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# Seeing Double: A Diplopic Aesthetic in Experience and Performance

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*This investigation uses an autoethnographic approach to investigate the author's personal, phenomenological experience of living with diplopia (double vision) in order to apply the lived condition to an aesthetic form in performance. Using Petra Kuppers's notion of a "crip aesthetic," this piece re-functions a potential aspect of disability, the condition of diplopia, as a way of opening up discourses of multiplicity in art and performance. The author also calls for others to integrate non-normative body states into their art praxis.*

*Keywords: Diplopia; Autoethnography; Disability Studies; Vision*

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The overall effect was not unlike...  
The worlds, I see, have now been torn apart.  
Was it always like this? I fear to ask.  
A reprehensible thing, this thing  
my own repetition with a difference

**Fig. 1. Poem: "A Doubled Sense," by author, 2009.**

The excess of a doubled sense is alarming and nauseous. It presents extra information and re-performs the world. It is a playfully and deceitfully duplicitous sense. As with so many sources of excess, one both adapts over time and learns to ignore the irrelevant information. However, in the beginning, one has neither this benefit of time nor a sublimated routine for disregarding information. In my own condition, I was beset, bewildered by the tension between multiplicity and veracity. What is a "true," single image? What is the "truth" of a doubled image? *How* does it mean?

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Samuel Sloan is a 4th year Ph.D student at Southern Illinois University Carbondale, studying Communications at the intersections of Performance Studies and New Media. He would like thank Craig Gingrich-Philbrook for his help through multiple drafts, along with the eyes and input from Nichole Nicholson, Joshua Potter, Siri R. K. LeBaron, and Benny LeMaster. The essay was presented at NCA 2011 and saw its original format as a longer research report.

And what is it about the left and right hemispheres of the brain that makes these subtle differences? The talking head on the left looks an awful lot like the one on the right; they're moving at exactly the same time, are dressed the same, and have the same awful haircut. The sound appears to come from the same place, but there are definitely two heads. What? I will proceed to try to make sense of my experience, but first, look at me in the eyes—both of them—as I tell you this story about myself.

During the summer of the third year of my undergraduate program, I experienced a shift in vision. The change, at first, was subtle. Being a dedicated internet user, I first blamed it on eye fatigue. During that period of time, I was reading web pages and book chapters for hours on end. While that cause was a salient and reasonable explanation to others, the problems persisted, even with rest. The funny thing was that I could not put my finger exactly on what was different. I noticed feeling less inclined to be active, but with the Louisiana summer sun beating down on me at that time, there were many other reasons for that. As I slogged out of my hibernation to participate in the world, the only sense I could make of the difference was that everything was, well, doubled.

## **Method**

Taken literally, the purpose of this writing is to demonstrate the existence and validity of non-normative vision—through the discussion of a year of my life when I was diagnosed and treated for double vision—and to articulate the possible aesthetic and performative consequences that can be employed alongside that reality. Taken figuratively, this aesthetic condition has the ability to dissociate vision, generating disorienting narrative selves, in the postmodern sense. Just how can we stage bodily experience, and more importantly, how can a person's unique perceptual world aesthetically enter into art and performance as a conceptual layer?

This research paper is an autoethnographic text that begins from an exploration of my experience of being diagnosed with adult-onset diplopia (double vision); relays issues present in medicalized discourses of eye care; makes conceptual links to postmodern ontologies of vision; and moves forward to apply my phenomenological experience of disability—using Petra Kupper's notion of a “crip aesthetic,” to aesthetic possibilities within the realms of performance and new media.

Therefore, I place this text firmly in the areas of autoethnography and performance studies, of intellectual and performance praxis, following Craig Gingrich-Philbrook's calls toward a praxis where “performers who view their work autoethnographically (and vice versa) must do more to articulate subjugated knowledges themselves, lost arts, hidden experiences” (311). In order to do this, I have set up this essay in the form of a mystery, using a mixture of voices that flow back and forth between discourses of the “personal,” the “popular,” and “professional”—the tripartite criteria which

Michael and Ruth Bowman set forth as a potential mystery formula in their conception of autoethnography (165), created through an interpretation of Gregory Ulmer's mysteriography (304).

## A Struggle for Orientation

Before diagnosis, I understood my double vision merely as disorientation. Weeks of this condition only brought me more of the same, my field of vision splitting in two: stop signs were doubled, people were doubled, and crowds were confusing. The rules of reality did not seem to apply anymore. Goffman asserts that "a performer [in everyday life or in conspicuous performance] tends to conceal or underplay those activities, facts, and motives which are incompatible with an idealized version of himself [or herself] and his [or her] products" (48). This way of thinking or behaving—perhaps heightened through my own previous history of stage acting—led me to want to downplay my obvious gaps in functioning with acute diplopia, and I went about my daily business as if nothing had changed. Here, I would like to functionally define this drive to maintain face as an aspect of what I will refer to as "consensual reality," or that plane where beings-in-the-world more or less agree upon a kind of physical or metaphysical space—virtualized realms such as cyberspace included—where objects and entities can be mutually co-constructed among subjectivities.

On a practical level, the situation of my diplopic experience is a bit like asking two people to stand side-by-side and then talking to the empty space between them. The task, in everyday life, seems absurd; yet, in those early times, I experienced it every day. It made me question where we put the identity of people, of objects. The idea of having a literal "space between" the same body reminded me of reading in-between the lines of a text/performance. In a way, the condition points to an inability to locate an "actual" reality or, at least, a suggestion of a possible "living heteroglossia," a multiplicity that is always already at least double within a "normative" visual system. Yet, I had the ability to point to the "reality" that lay between the double. Both signifiers—like bodies standing side-by-side—did point to a single sign—a person—but those signifiers were in constant contest for dominance: whether it was a pair of my best friend or the same word competing with itself and others on a street sign.

To participate in consensual reality, I could take the necessary time to explain what I was seeing, but I could just as easily pretend that nothing was different about my visual field. As Nicolas Bourriaud claims about aesthetic sensibility:

So reality is what I talk about with a third party. It can only be defined as a product of negotiation. Escaping from reality is "mad." Somebody sees an orange rabbit on my shoulder, but I can't see it. So discussion weakens and shrinks. To find a negotiating space, I must *pretend*

to see this orange rabbit on my shoulder. Imagination seems like a prosthesis affixed to the real so as to produce more intercourse between the interlocutors. So the goal of art is to reduce the mechanical share in us. Its aim is to destroy any *a priori* agreement about what is perceived. (*Relational Aesthetics* 80)

I take Bourriaud's words as a point of departure for my own diplopic aesthetic that, at its core, hopes to defamiliarize such *a priori* ways of seeing the world in favor of a more playful relationship with vision, one that does not completely disregard the difference. In this regard, I must say that I've grown fond, in the last few years, of talking to my orange rabbit friends, metaphorically speaking. One might dare say that it can even be fun.

In studies with small mammals, when a binocular animal—one with human-like stereoscopic vision—is raised from birth with one eye covered, “monocular form deprivation can cause massive changes in cortical physiology that result in devastating and permanent loss of spatial vision” (Wolfe, Kluender, & Levi 71). This severe case points to the vital connection between physiology and the mind's ability to construct perception. However, in cases of a slight crossed disparity error, such as was the case in my double vision, the competing forces are what is known as “binocular rivalry.” This is “the competition between the two eyes for control of visual perception” (Wolfe, Kluender, & Levi 149).

When watching a person, I would often let one eye be dominant over the other and ask myself, “Which person is the actual person and which is the ghostly doppelgänger?” This had an important effect, as I would focus my attention on that “version” of the person who had the most opacity. In truth, if I wanted to throw a ball at that person, I would have to throw it in the middle of the pair. However, when I first tried to split my focus between the two, I usually found myself unable to process the situation in a “normal” way.

### **Acceptance of Disorientation**

More to the point, my migraines at this time were not caused by mere dizziness; the constant work of trying and failing to fuse each eye's information together contributed to the strain. I suppose my ocular muscles—and visual sensory system—remembered what it felt like to fuse, to normalize two optical fields into one picture. They perpetually tried and failed. Living with diplopia often turned into a game or constant visual joke, much like Roger Caillois's notion of play “in ilinx,” where one “gratifies the desire to temporarily destroy his bodily equilibrium, escape the tyranny of his ordinary perception, and provoke[s] the abdication of conscience” (44). The everyday correlate is very common if you spin in a circle to get dizzy, ride a roller coaster, or consume alcohol with the intent of escaping neurotypical body-states.

Quite like being perpetually dizzy or disoriented, I chose to frame my

double vision as playful ilinx. This reframing was an important coping strategy. Over time, I began to story my body less in terms of a medical diagnosis—something in need of treatment—and more as an aesthetic condition—a unique perspective on the world. Even after I acquired orthoptic corrections, glasses with prism lenses, I still would revel in this strange thing my body was doing, that I was doing. After all, I had a limited amount of control. I could choose to fight the splitting or choose to keep it doubled, orienting differently to my disorientation.

My search for an artistic form that matches my experience is related to Beardslee's discussion of "the disorientating story, the story that assaults our expectations and pulls us out of the world to which we have become accustomed" (167). In this manner, Beardslee is trying to define a new aesthetic story that he sees being crafted in the world: the disorienting narrative. Far from a mere night of ilinx, he asserts that such stories usurp utopian aims, seek meanings "beneath the surface," and trouble notions of "closure" in storytelling (Beardslee 171). Thus, in the explication of my story, I have made the conscious decision not to use only typographic play to present my condition. Rather, I wish to explain—and maintain the complexities within—the particularities of the "chaotic and broken experience" (Beardslee 171) which led me to question the tyranny of signifier/signified dyads in art and my own visual system. Here, I nest myself between an "accepted reality" of normative, monocular vision and my own explicit stereopsis-with-a-difference.

Citing an often-forgotten history of pre-enlightenment art, Martin Jay questions this aesthetic of the Western monocular viewpoint when he asserts that the "medieval assumption of multiple vantage points from which a scene could be painted" shifted into a position where "the beholder was now the privileged center of perspectival vision, [. . .] a monocular, unblinking fixed eye (or more precisely, abstract point), rather than the two active, stereoscopic eyes of embodied actual vision" (Jay 54). The medieval aesthetic of multiplicity, perhaps one—before the advent of modern medicine—that included the experiences of non-normative body states, mutated into what is now a largely unquestioned canon of vanishing point perspective, with a normative, "monocular" observer. The lesson is clear: aesthetics have ideologies, philosophies, and potentially lived body states embedded within them.

By attempting to capture my sense of vision in aesthetic form, I am attempting to subvert "the assumption"—in modernist storytelling practices of orientation—"that there [is] an overall story," a "unified story, coming to a conclusion that tie[s] up all the loose ends" (Beardslee 164). Just what sense can I make of sense anyway? I recognize that I can only create a heuristic to describe my embodiments, and this heuristic will never fully capture my experience. I have made my peace with this lack of closure, like I have made my peace with the notion that I will always have some recurring double

vision. I feel as if I can only dance in ludic recombinations of sight, playing with signifiers: slips of vision, like slips of language. What, then, happens when the play of ilinx becomes serious?

## **A Look at Driving**

I was scheduled for my driving test weeks in advance of the onset of the diplopia. Not disclosing this, I simply went through with the test. Thus, my first experiences driving were doubled: double stoplights, double cars, and doubled anxiety. People asked me, “How in the world do you find the middle of the road when you’re driving with diplopia?” I politely answered that I simply look into the distance where the two roads meet or where the two cars intersect. The middle point between the center of one car and the center of its double is the place where the actual middle is, where the actual car is. This becomes very important while driving, very important. Using this basic knowledge and my performance skills, I was able to pretend that I was not literally on the edge of my seat, both of them, and received my license that very day. Certainly, there is a certain feeling of danger to driving with diplopia, but at the same time, once you sublimate the extra information and learn to live with the difference, it makes as much sense as any other novel sensory input: writing while listening to music, walking while eating, or wearing polarized lenses during a movie to simulate the already-existent three dimensions that seem to come so easily to other people.

Perhaps I should not be so cavalier about what others may perceive as an admission of recklessness, but in this case, I think it noteworthy that this kind of feigning of consensual experience allows for an important space of passing for those with invisible disabilities. In some ways, I had to disallow the orienting master narrative of driving—that one should have “perfect” 20/20 vision at all times—in order to narrate, for myself, my own disorienting story of being able to drive with double vision. This aspect of passing was essential for survival in the city, and to this day, I have never been in a major traffic accident. Since I did accomplish some driving in my life before I was diagnosed, I sometimes wonder if the driving lessons showed me a disparity that already existed in an extremely heightened way. Perhaps, I’ll never be able to know this in any way other than embodied experience.

Staying in the center of a road is the same with double vision; there are merely two roads. If a visual scene is too confusing, one can always sport a certain pirate accessory to cover an eye, as I still do on certain occasions. After all, plenty of folks with vision in only one eye or varying degrees of strabismus also drive, even if that narrative is not referenced in a DMV driver’s pamphlet. Often, living long term with this condition, a person will “turn off” the extra information from one eye. This is certainly the case when one or both eyes are angled so far out that visual fields from each eye refuse to overlap. However, for those of us who have a disparity closer to the center, we must take Robert Frost’s advice: making our own sense, with two roads

to travel by. In this vein of multiplying perspectives, and in an effort to more fully explain my desire to recreate double vision in performance, the next section covers Kupper's idea of aestheticizing disability as a potential model for postmodern constructions of art, visual or otherwise.

### **The Crip Aesthetic**

Petra Kuppers talks about “the violence of normalization” in her “Performing Determinism: Disability Culture Poetry” (90). She analyzes the poetry of Jim Ferris (a prominent disabilities studies scholar, born with a leg-length discrepancy), referencing those violent acts of correcting bodies that society deems to be incorrect. In this piece, Kuppers praises Ferris's poetry which she feels captures the gait of Ferris's walk—modified by his orthopedic shoe—in its meter. Kuppers's argument for a “crip culture” aesthetic engenders a burgeoning space for narratives and poetry that reflect the experiences of bodies that do not conform to normal standards (95-98). I see her crip aesthetic as a call for a model of creation whereby artists engage their embodiment of disability by including traces of it in layers of their work. I identify myself as a temporarily able-bodied person, a TAB, with a kind of invisible disability, so I wish to call on my continued experience with double vision as a somatic marker from which I can begin to understand the normalization of “good vision.”

As Ferris's leg did not take well to the initial surgery and leg breaking, he found a new, enlivened aesthetic in the difference, wearing an orthopedic shoe which allowed him to walk differently with a cadence that influences his crip poetry (Kuppers 91-92). Personally, my orthoptic prism correction lenses allowed me to see the world through a normalizing correction. However, even as my eyes turned more clearly to the center, I still found differences in vision when removing my orthoptic appendage. To be cliché, my vision was straightened but not narrowed. The corners of my vision often remained doubled, and doubling still occurs with stress. When I wear contacts, I can see objects around me sharply, but the doubling that sometimes occurs is a more intense experience: a clear double vision.

Below, I would like to continue my personal narrative of treatment for diplopia in order to emphasize the ways in which vision therapy—rather than an initially proposed surgery—influenced my ability to think about my double vision in ways that were aesthetic—in Kuppers's crip sense—rather than medical. With the slow progress of vision therapy, I eventually came to terms with vision as a processual and changing feature of my life, rather than as a static and monocular construct with an “easy fix.”

### **Discourses of Medicalization**

Walking into the children's hospital in my 20's was a surreal experience. Sitting in the waiting room, I looked listlessly at the brightly colored toys lining the floor, struggling to pull them in and out of focus. I was particularly



shocked that the specialist, an older man, was so quick to suggest eye muscle surgery, even when surgeries of this kind often “improve cosmetic appearance” alone, while “[n]umerous peer-reviewed scientific studies report success rates for eye muscle surgeries ranging from 30% to 80%. In those studies, the success is sometimes defined as “cosmetic improvement only” (J. Cooper and R. Cooper, “Strabismus”). In his mind, strabismus, as was common in his very young patients, was the only acceptable diagnosis for my double vision; for him, this fairly invasive surgery, which he routinely performed on childhood strabismus, was the only option to correct my particular issue. Given my age, my case was unusual, so he merely insisted that other doctors had missed my double vision for over a decade.

With futility, I tried to reorient myself through this diagnosis, his diagnosis that came from a particular Western medical establishment, in a pediatric hospital, from this doctor who was a specialist in making the same diagnosis over and over. I simply could not believe that such a major aspect of my life had escaped notice until my college years. Essentially, he wanted to spread my eyelids widely for full access to my eyeballs, make an incision in my lateral muscles to shorten them, and then fuse the muscles back together. Bolting from the children’s hospital, my family and I proceeded to look into less drastic measures.

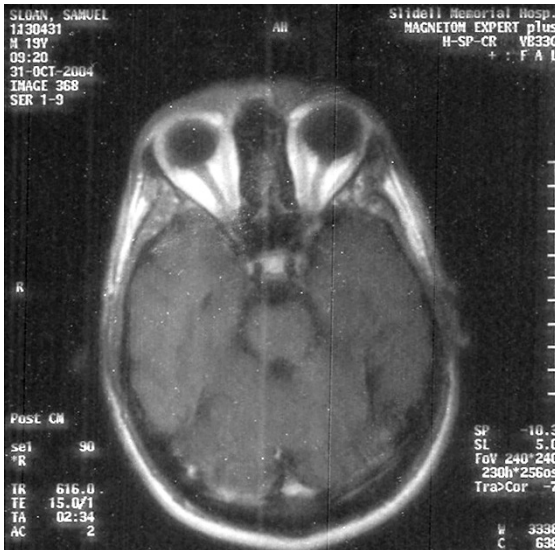


Fig. 2. MRI scan of author’s brain.

Adult-onset eye issues of this magnitude are rare and are often symptoms of greater problems, so late one Halloween night, I eventually submitted to lying in the loud, whirring magnet for a few hours. Was it myasthenia gravis or brain cancer? Trick or Treat? How might a cosmetic surgery mask this

deeper issue? I felt fortunate, lucky, and ecstatic that the test results came back clean after a month of nervous waiting, but I had no new answers. Perhaps I just had not noticed the doubling my entire life? I had no explanation, just some amusing pictures of my brain and the experience of the doubling that grew more intense with fatigue and anxiety.

## **Vision Therapy**

A month's research resulted in a specialist—a behavioral optometrist—who greeted me warmly. I soon learned the difference between an optometrist—a person with a major certification in the measurement and prescription of eyeglasses and basic eye issues—and an ophthalmologist—someone who has completed medical school in order to specialize in disorders of the eye. In my situation, I found the latter looking to perform surgeries, with the former—among those optometrists who were well-informed—seeking alternative medical treatments. Actually, my vision therapist was quite emphatic about patients avoiding the knife, especially with children who may face a lifetime of repeat procedures as their delicate vision evolves over time.

Curiously, instead of using special prisms that would let me see “normally” for the course of the therapy, this doctor prescribed lenses which had a little less than the prism power that would let me see with “perfect” vision. The lack of intensity pushed my eyes to continually work to accommodate and fuse images in distance vision. With the correction, headaches were slightly less common during the day, but with the use of nightly computer eye exercises, I strained to focus until I was able to meet certain levels of ocular competence. For these, I used a computer program with opposing sets of random dot stereograms, similar to Magic Eye image puzzles. Using three-dimensional glasses, the color-coded visual fields would separate as I stressed the limits of my vision in order to see boxes in the jumble of dots. I would register the location of the boxes—up, down, left, or right—on the keypad, meeting a loud affirmative or ear-piercing negative beep. Without the ability to lower the volume in this old DOS program, I entertained the notion that behavior modification must have been part of the treatment process. In reality, these tests were merely a metric to determine how much my everyday use of fewer prisms caused my eye muscles and brain's interpretation of the optical signal to reorient over time. Finding out that the exercises were not doing the work of “recovery” part-way through the process, I was annoyed but far from angry. There was something comfortable about the numbers which denoted my progress through an exercise, and I watched the prisms in my glasses drop: from six, to five, to four.

I mention these corrective strategies for at least two reasons. First, I would certainly like to advocate for non-invasive and alternative therapy practices in Western medicine; along with many others, I believe that a wider variety of legitimate treatment and preventative options exist outside of go-to surgical (Cassels; Makary) and pharmaceutical (Bass; Petersen) treatments

that often prop up an unhealthy corporate environment in the health care profession. Secondly, however, I would like to visit the idea that medical orthopedics can be a legitimate “imperfect” corrective, in that one need not maintain the rhetoric of “the complete recovery.” The moment my prism lenses were right for my progress toward the “center,” the doctor would give me a prism sticker—a plastic lens to affix to my glasses—or a new glass lens which made it harder to focus. The goal may have been eliminating the two images before me for a single one, but the method did not follow the surgical logic of a single-day’s fix and recovery. Rather, the milieu of vision therapy followed the notion that I would definitely live with this condition; I would gain a measure of control or a way of functioning with it over time. However, even as I shed the prismatic lenses—moving in power from four to three—I could not shake off the memory of the headaches, the doubling, and the corrective therapy with its triumphs, setbacks, and many beeps. The tedium was met with more visits to my orthoptic doctor friend and fewer prisms: four turned into three, three to two.

### **An Aesthetic Awakening**

For that period of time in my life—while going through vision therapy—I reveled in being able to see with both a respect for the center, when seeing “normally,” and an appreciation for a crip aesthetic, when seeing double. With corrective prisms, I could not help but see singular; with mere contacts, I could not help but see double. However, with this, my aesthetic appreciation was widened and complicated. For instance, repetition in art and performance became heightened. Repetitive paintings often appeared beautifully three-dimensional; stage scenes with multiple characters would overlap, creating depth and signifiers of multiplicity. In this mindset, I was able to actively frame an art object as doubled specifically in my vision, rather than as just-doubled-like-everything-else.

Superimposition, the placing of one eye’s object on top of the other, became an art I could perform in my own head. While doubled, I would willingly contort my head to make things line up; in fact, when two people were standing side-by-side with their four apparent bodies, it was more comfortable—i.e., less migraine inducing—to make the two middle bodies overlap heads or shapes, condensing down to three bodies. Perhaps this practice reduced the number of people or objects to track visually, or maybe the overlapping was interesting enough to make a perpetually uncomfortable situation more palatable. My relative lack of control of the constant superimposition led me to embrace this crip aesthetic of looking, which felt somewhere between intentional and compulsory, somewhere between beautiful and nauseating. As Ferris writes, “I’m not sure if I want all poems to limp, but I know this: all the interesting ones do, all the lovely ones do, in one way or another” (qtd. in Koppers 93). As the heft of the prisms reduced, I felt the weight of their absence on my face: from two to one, to none.

Even after vision therapy, I wonder how I have actually “recovered” from this ordeal, this “diplopic episode.” I still regularly use glasses, as I have for nearly two decades, but I now choose whether to use prism correction. Since I have spent so much time at the cusp of not being able to fuse images in my visual system, I can cause my eyes to converge or separate easily. To recall Rhonda Blair’s biological basis for acting, in true Stanislavskian fashion, I am able to produce an “as-if” body state, based on “recollections and reconstitutions of conscious and somatic experiences” and “imagination” of what that experience was actually like (79). This phenomenological reminder of a former state is just as disconcerting—or aesthetically engaging—as the original condition. It also brings back body memories of that early disorientation, and sometimes my eyes seem to want to quickly fuse back, just to make sure they can. Sometimes they can, but with fatigue, often they fail. As with many embodiments in life, over time, I have learned to regard—rather than discard—this extra information which re-performs the world. I have articulated this process of fusing a singular, monocular perspective for myself, in a way that does not allow me to take for granted the complexities of vision.

My vision therapist assured me that I was retraining my eye muscles and the brain’s connection to them, my overall sight. Though areas of the brain have certain plasticity, much of the brain’s ability to recreate and relearn neural pathways is reduced throughout adulthood. Indeed, he mentioned that I may not be able to “reclaim” my former vision—whatever that was—at all. In a sense, he was right; my experiences will forever inform my vision. From the position of Koppers’s crip ideology, which champions non-normative aesthetics, my overall experience with double vision has been a positive and enlightening one.

## **A Diplopic Aesthetic in Performance**

Returning to a practical discussion of staging double vision, this section will tie my personal experiences with diplopia into a codified list of three basic criteria for applying the experience as a visual aesthetic. I have generated three criteria—of repetition, proximity, and hybridization—to reflect some of the particularities of my experience in navigating the world with double vision. Although the particularities of my experience serve as case study in the application of biology to performance, I hope that readers take away the urge to stage or leave traces of their own unique body states in their work.

In applying a crip aesthetic to performance, Koppers talks about the notion of “biological determinism” as a call for “leaving traces in language” to describe the experiences of bodies that function in other ways, outside of the “normal” conventions (94-95). For my involvement in this aesthetic, I can tell you my story or encourage you to cross your eyes for a day, for a time. Perhaps a crip biological reference embedded in this essay will reach you in

its use of metaphor or meta-analysis; perhaps my performance of diplopia on the page will cause you to look twice or to complicate the act of looking, reducing its givenness. Consider vision both as an active performance of dialogue—with internal (inter-ocular) and external (interpersonal) negotiations—and as a substantive performative act in locating a meaning for signifiers, a performative view.

In this way, vision—particularly directed at performance—is not just a gaze or a means of apprehending the clarity or “meaning” of a scene. Rather, the theater of looking is a constructed, political act that carries the subjectivity of the performer and the weight of the multiplicity of an audience’s interpretations. In the space of performance, audience and performer co-create consensual meanings, even as each appears to hide the reality of her own interiority. So, it is with the utmost respect for a crisp sensibility that I lay out three criteria for the particularities of my diplopic aesthetic, criteria that are by no means an exhaustive list of the possibilities for what could be a diplopic performance. Rather, I offer them as examples of sensory embodiments from my own life that can make their way into a performance that employs double vision as a staging device.

## **Repetition**

First, a director or group of collaborators should pay special attention to repetition in any visual stage imagery. The use of repetition—particularly the act producing at least two of any single object or character—is a device used to indicate literal multiplicity in the visual frame; it functions similarly to the way that I orient to the presence of two copies of the same object in my visual field when I have double vision. As a rule, the general notion of doubling or multiplying—e.g., people, objects, set pieces—should be present in the form of extra copies of things: characters have nearby doppelgängers; items always appear in multiple; and set pieces are chosen for their natural tendency toward repetition, like slats in chairs and porches. Performers can definitely apply a “poor theatre” perspective—one that is “without make-up, without autonomic costume and scenography, without a separate performance area (stage), without lighting and sound effects, etc.”—to a diplopic production, but such a work would likely emphasize the doubling of characters or other elements of staging, such as the close placement of audience rows (Grotowski 19).

## **Proximity**

Second, performers in this style who are “doubled” should remain in close proximity to each other where all movements are choreographed and matched by both performers. Whereas practices such as character bifurcation—where two performers may represent or embody one character—are already widely used in performance studies productions, this diplopic performance would be more of a pre-configured simultaneous dance with

rigid blocking. I could also imagine the use of life-sized puppets for this purpose, but I think that most diplopic performances could be accomplished through media and video representation of two split visual fields captured by a pair of cameras or the image from one camera duplicated.

### Hybridization

Third, diplopic performances should emphasize the hybridization that takes place when two pairs of bodies or objects begin to overlap. Through the use of blending voices, costumes, character affects, or digital superimposition of video, one can use the hybrid aspect of my diplopic aesthetic to look at the everyday blending of hybrid subjectivities. For instance, imagine a meeting of two doubled characters that form a total of four onstage performers. To perform the kind of superimposition present in Fig. 3, the closest two performers may overlap physically or temporarily combine costumes or characterizations to show the visual and conceptual blending of two subjectivities. In part, I see this as the most potentially subversive aspect of a diplopic aesthetic because of the possibilities for strong juxtapositions of body types, genders, races, ideologies, and personalities. When two dissimilar entities overlap in this way, they may soon separate, but the conceptual implication is that, as beings-in-the-world, we are always generating reality and being affected viscerally by exchanges with others. I find the challenge of staging such juxtaposition—or of producing one through digital media—to be thought-provoking in terms of how identities are created, recreated, and fluid. So, having laid out my tripartite criteria for a diplopic aesthetic, I will now discuss possibilities for these techniques in digital media—where I believe this particular aesthetic has the most potential.

### Mediated Representations



Fig. 3 Screenshots from “Diplopic Vision,” a video by and featuring the author.

In my experience, I have been unable to locate a performance—outside of taking off those special glasses during a 3-D movie—that employs these

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criteria—of repetition, proximity, and hybridization—in a way that reflects the particularities of my diplopic experiences. One could certainly look at the 3-D film technology as an analogue for stereoscopic vision, but I am interested in the preservation of diplopia as an aesthetic record of a bodily sensation. On this note, I can envision using digital media in order to create this aesthetic in art, as seen in Fig. 3. In this instance, I used video editing software to create a digital superimposition: a doubling of some footage from my childhood. In each of the two images, note the slight difference in opacity between “left” and “right” entities, the overlapping bodies, and the birds and figures in the background that are now duplicates. The doubled image on the right shows the way that multiplicity factors into this aesthetic as a sparsely populated beach becomes one full of activity. Small groups of people quickly balloon into crowds, and the number “one” no longer functions as a representative signifier of any individual or observable entity.

One could create similar images by using two cameras with overlapping fields of vision or with the new 3-D technology being built into and used by cutting-edge cameras and handheld devices. The two cameras or lenses of this process would satisfy my criteria for repetition, as there are two images: for proximity, as the digitally combined images show objects in close, locked relationships; and for hybridization, as bodies and objects overlap—giving an illusion of hand-holding in Fig. 3. As in binaural recording, which uses two microphones to simulate input from both ears, the use of two cameras can simulate the vision from two different eyes.

These digital renderings of my diplopic aesthetic fall within Bourriaud’s ideas in his book *Postproduction*, in which Bourriaud asserts that an artist can generate new digital materials to be modified or work “with objects that are already in circulation on the cultural market, which is to say, objects already informed by other objects” (13). Like the re-used home movies in Fig. 3, one may take already existing texts and manipulate them, remix them, as a form of Brechtian defamiliarization or commentary on the original image. I can imagine elements of close repetition and proximity producing multiplicity in images with this method; I also envision the hybridization aspect of a diplopic aesthetic being used in digital collage to emphasize the remix—or overlap—of two already existent texts that are dissimilar. For instance, my use of a particular home movie as the subject of “Diplopic Vision” allows for a metaphoric and a literal doubling of a past and present self.

I realize that there may be other creative ways, perhaps a use of mirror or sound, to embody my diplopic aesthetic and other bodily realities which would also follow Kupperts’s notion of a *crip aesthetic*: presenting non-normative possibilities for the senses. Art, in this vein, is certainly made for venues like psychology textbooks to show what synesthesia or so-called sensory disorders might look like. However, that art is often made with the idea of representing and confirming pathologization—of improving normative treatment models so that temporarily-abled psychologists can more

efficiently recognize those whom they believe have a disability. I believe in alternative, aesthetic universes of reference which would reclaim—or begin to free—entrenched signifier/signified relationships that occur when artists represent the world of bodily experiences. This is a way of thinking that attempts to avoid medicalization in favor of a broader perspective of consensual reality.

Though, in this writing, I do not wish to normalize any particular body. My aesthetics of looking may invoke a diplopic aesthetic, but there might be someone missing an eye who would have a monocular aesthetic: a monocular aesthetic of a different kind than those who forget—optocentrically—that they have two. I'm not talking about theoretical lenses here; I'm talking about biological lenses. If we are to fetishize visual culture, I believe the least we can do is to make sure that different types of vision are seen as both present and presently working in aesthetic objects and performances.

In light of this, I hope artists will begin to interpret the world through their own perspective, their own visual world, with all its complications. What about a farsighted staging or one that makes present the fact that the human eye often receives a yellow tint with age (Wolfe, Kluender, & Levi 112)? My argument here is one of addressing the formal aspects of a production, of making present the frame of a performance or adding to the complexity of a scene. Certainly, one might argue that a shift in color onstage or an alternative camera position would be imperceptible to an audience, but I would put forth that embedding things like a character's (dis)ability into staging choices adds to the conceptual complexity, the richness of a conspicuous performance. For instance, a director might tint part of the stage with a slight yellow gel when the scene is situated in the perspective of an older character whose eyes have begun to (dis)color. In order to use an aesthetic of the eye condition retinitis pigmentosa, a director might occlude part of—or the center of—the stage from being lit in order to re-create this experience where “sufferers typically exhibit an overall shrinkage of their visual fields, as well as ‘ring sarcomas,’ bands of blindness between the relatively normal central visual fields and the periphery” (Wolfe, Kluender, & Levi 44).

Suffice to say, not all productions would benefit from this kind of artistic practice. Rather, I would only advocate using a kind of crip or bodily aesthetic in a situation in which it makes sense for the overall goals of the artwork in development. I would like to return to Kupperts, who links her crip aesthetic back to the body:

I can *perform* biological determinism, the living nature of flesh, in writerly practice, the site where language knits meaning. I can show crip culture poetry as a site of these performances, of living life. I can show how these poets craft a suspension, lift of line. New alignments can be made, and the very notion of biology becomes playful. . . .

In his crippled poetics, Ferris loves limping poems, finding



beauty in the irregular, finding himself and more than himself: finding openings in those certainties of his bodily life, . . . knowing that these are also words to play with, material for making gorgeous things, risky things. (94)

Here, I do not seek to dis-identify with the notion of my diplopia as disability, but I am also aware that body politics can often circulate in degrees of intensity and authenticity. In my contribution to an understanding of a crip aesthetic, I hope to speak with rather than for the beauty and body that can accompany this kind of art-making. Therefore, I do not wish to claim a grand authenticity in the disability world from my subject position as an otherwise temporarily-abled body. But, in this movement, I also do not wish to create a hierarchy which would discourage a director from using or making salient, for example, a basic nearsighted or farsighted aesthetic in staging: perhaps making a stage very far away, very close-up, or visible only through a tinted set. This essay and its broader research project serve to interrogate monocular optocentrism in visual art and rhetoric while providing my personal frame of diplopia as a tool or heuristic for staging multiplicity in performance. In this way, I view my experience with diplopia in opposition to my former and current states of “singular,” temporarily-abled vision. My disorienting personal narrative serves as a record of my experience, a crip possibility of sight. My performance of double vision can then be located in my narrative writings of the experience, the drama of corrective strategies, the audiencing of my body’s differing interpretation of the visual world, and in the remembered coping mechanisms—such as looking in-between two of the same object.

## **Coda**

My visual sensation has entered a new evolution which resembles its former state, but my indoctrination back into singular vision is not—and can never be—complete. Stress and fatigue hail the return of the doubling. Even after acquiring orthoptic corrections and eliminating prismatic glasses, I still revel in this strange thing my body does, that I do. After all, I have a measure of limited control. I can choose to fight the splitting or choose to keep it doubled, orienting differently to my disorientation. I do not know any longer if a “normalized body,” if there is such a thing, has this kind of control over perception, but the experience drives me to question what visual aesthetics, social processes, artistic practices, and cultural stories create this “normalization.”

I believe that we must tell our defamiliarizing stories of body—our disorienting stories of experience—through autoethnographic work. I believe that these stories can also be embedded in our staging and composition practices, rather than being outright expositions. Even if they are not fully understood—in the logical sense—they can be felt and can serve as witness to the fullness of the human experience, to all of the possibilities of polyphony

present in consensual reality. I am not concerned with my three criteria for a diplopic aesthetic encompassing my entire experience with double vision, and I am equally uninterested in my audience coming to exactly my same sense-making position on the polyphonic nature of reality. Rather, I hope that readers will take the meaning that they need to take from my personal narrative and reflect upon their own lives for traces of their physical bodies that can work their way into art-making practices. Life is messy, short, and complicated, and I think art, at its best, should reflect that.

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