Since people living with persistent pain often suffer invisibility and struggle for legitimacy and credibility;

since long-term pain is often wrongly assumed to be a temporary and unnatural state;

since pain experience is diverse and must be understood intersectionally (through interweaved categories such as gender, race, sexuality, and class);

since pain’s causes can be cryptic, multiple, personal, social, environmental, transgenerational, and hidden;

since pain science is neither widely understood or well-funded, and requires wider dissemination;

since pain experience exceeds the language of medicalisation;

since pain undercuts illusions of human autonomy and self-sufficiency, showing that all people are vulnerable and interdependent;

since pain may impair the ability to work, in which case those living with it may be wrongly seen as not living a ‘useful’ life;

since witnessing pain makes profound claims on – and poses challenges for – carers, family members, and healthcare practitioners;

and since chronic pain affects every dimension of life …

... I call for creative work which engages these invisibilities, these lacunae, these intersections – moments in public or in shadows, in loneliness or connection.

Yet - pain experience may not lend itself to established forms of either illness narration or survivorship story:

the experience may lack an ending, where resolution is reached;

it may lack a beginning, its causes hidden;

it may break the positivity imperative – to be hopeful, a warrior, a survivor, a meaning-finder;

it may be incommunicable, resisting representation,

yet may simultaneously engender language;

it may be a story not (only) of a personal journey, but also of wider social calamities and inequalities, both contemporary and transgenerational;

it may resist plot, instead being a thing of fragments, glimpses, and moments.
So I call for

‘flash’ illness writing:
short-form creative work

- which expresses a moment or fragment of experience of persistent pain;
- which takes either the perspective of a person experiencing the pain or the perspective of a witness (carer or healthcare professional);
- which captures any dimension of experience – physical, emotional, social, economic, institutional, medical, spiritual, or creative;
- which communicates in any emotional register, positive or negative;
- and which can be shared and used by others to try and communicate the vivid, contradictory, and diverse realities of living with chronic pain.

The parameters:

- short-form creative writing, from 5 to 150 words, in any form (e.g. prose or poetry; autobiography, fiction, or a blend);
- optionally can be accompanied by a single image (photograph or artwork);
- can also take the form of a single comic ‘panel’ or short sequence, to fit on a single screen;
- the fragments/moments/glimpses to be shared online with attribution, under Creative Commons Licensing (BY-NC) 4.0.
- authors can choose to be anonymous, pseudonymous or named.

To submit work, please visit http://www.lancaster.ac.uk/translating-pain/submit

For further information, please visit http://www.lancaster.ac.uk/translating-pain

Sara Wasson, Translating Chronic Pain: Creative Manifesto (2017), http://www.lancaster.ac.uk/translating-pain