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Room for Care: Simone Leigh's Free People's Medical Clinic

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Critical Acts

Room for Care

Simone Leigh's Free People's Medical Clinic

Samara Davis

The large wrought iron gates of the Stuyvesant Mansion were propped open when I arrived for Simone Leigh's *Free People's Medical Clinic* (FPMC) on 11 October 2014. It was the last weekend of Creative Time and Weeksville Heritage Center's *Funk, God, Jazz, and Medicine: Black Radical Brooklyn*—a month-long event and exhibition program taking place across four sites in the Brooklyn neighborhoods of Bedford-Stuyvesant and Crown Heights.¹ I had just learned about the project through Facebook so, clad in workout clothes with a water bottle in hand, I showed up for the free "Afrocentering (Pilates)" class Leigh's clinic was offering that day. Toting the Black Radical Brooklyn map that clearly detailed the location and artwork at each site, newcomers like myself stopped at the clinic gate to read a large placard describing the FPMC and the historical significance of the site. The mansion, built in 1914, was a former senior and community center owned by the family of Dr. Josephine English, the first African American woman to have an OB/GYN practice in New York and a prominent member of the community as an activist, doctor, arts patron, and real estate agent. Among her many accomplishments, Dr. English founded the former Paul Robeson

Theatre in Fort Greene, Brooklyn, and delivered thousands of children, most notably all six of Malcolm X and Betty Shabazz's daughters.

While some read the placard, others floated in and out of the mansion's main doors. Once inside, several women wearing 19th-century-inspired dresses—black apron-like full skirts and tunics with black-and-white-striped, puffy-sleeved blouses—were positioned at the bottom of the entranceway's large two-story staircase. Poised and welcoming, they greeted visitors and provided information about the clinic's scheduled classes and performances. Flyers about upcoming Black Radical Brooklyn events and copies of *Waiting Room Magazine*—a compilation of fiction, short essays, poetry, and images collected and edited by Leigh—were also available. Up the stairs in front of large stained glass windows, a DJ booth run by artist Charles Fembro emitted a loud throbbing sound that inundated the vestibule as red and blue lighting cast down on the site attendants and incoming visitors. The occult vibe of the entranceway eerily held two time periods in tension: the house's dark wood and early 20th-century details giving way to the next century's purple light and electronic pulse.

1. Other artworks and site pairings included: Xenobia Bailey in collaboration with Boys & Girls High School (Brooklyn's first public high school founded in 1878); Bradford Young and the Bethel Tabernacle AME Church (founded in the Weeksville settlement in 1847—one of the first communities of free blacks in the US—and continuing to operate a few blocks from the Heritage Center); and Otabenga Jones & Associates in collaboration with the Central Brooklyn Jazz Consortium, which was a temporary outdoor radio station located at the corner of Malcolm X Boulevard and Fulton Street.

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Figure 1. A site attendant takes a visitor's blood pressure outside the entrance of Simone Leigh's Free People's Medical Clinic, 10–12 October 2014. (Photo by Shulamit Seidler-Feller; courtesy of Creative Time)

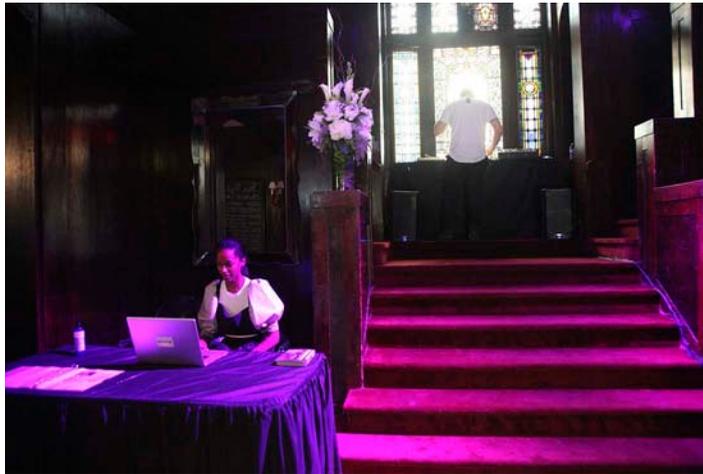


Figure 2. The foyer at the clinic. Site attendant Indira Cruz at the desk and sound artist Charles Fembro at the DJ booth. (Photo by Shulamit Seidler-Feller; courtesy of Creative Time)

Site attendant Indira Cruz checked me in and we spoke a little about Leigh's project. Cruz was composed and engaging, exacting a charm school demeanor that carried us both in conversation. (Later, I would learn that site attendants took an etiquette class in order to approximate an air of Southern gentility [Batista 2014].) Eager to share my excitement about the clinic, I told Cruz about my inter-

est in comparing alternative health-care and performance sites—how these disparate venues navigate the tricky task of dealing with and caring for bodies in space. In response, she led me to a small, framed photograph of Dr. English hanging on the wall of a tiny side room off the main entrance. In the picture, an elderly Dr. English sat alone in a chair on the stage of the Paul Robeson Theatre, the former church that she bought in 1980 and converted.² With the entire empty church-turned-theatre behind her, English embodied the kind of courage and vision necessary to meet the complex needs and desires of her community.

Outside the room housing English's small portrait, a large chalkboard listed the FPMC's offerings that day. On 11 October the following services were provided for free to the public: Well Women Care with Ancient Song Doula Services (12:00–6:00 p.m.); Nurses Hours (12:00–2:00 p.m.); Afrocentering (Pilates) with Aimee Cox (12:30–1:45 p.m.); The Medicine of Integration with Karen M. Rose (1:00–2:00 p.m.); Black Folk Dance (Dunham-based) with Aimee Cox (2:30–4:00 p.m.); Massage Therapy with Malik Bellamy (4:00–8:00 p.m.); and Community Acupuncture with Julia Bennett (4:30–8:00 p.m.). The Afrocentering class took place in a

room south of the entrance. Set out on the dark wood flooring were a handful of all black yoga mats and blocks—a simple but effective choice for the décor. The instructor was Aimee Cox, a cultural anthropologist and former Alvin Ailey dancer who also developed a popular core class called "Hot Mess," which she teaches at Sacred Brooklyn, a yoga/movement/meditation studio in Bed-Stuy. In a small class of about five

2. Gentrification no doubt contributed to the closure of the Paul Robeson Theatre earlier this year. As of January 2015, it was available for rent (Upadhye 2015).

women, Cox confidently and with humor guided us through stretches and small yet strenuous movements to songs by black artists, ranging from funk to soul and R&B tracks.

The next day when I came to the clinic for Solid Gold (Vinyasa Yoga) with Kami Jones, I unexpectedly encountered Cox again in the waiting room as I skimmed through *Waiting Room Magazine* before my class. Cox entered the room and positioned herself in an empty space by a large bay window as a crowd shuffled in and took seats along the room's perimeter. A song by Nina Simone began playing from an iPod nearby and Cox, now donning the FPMC site attendant uniform, began performing a string of movements on a small stretch of floor: balletic extensions of the legs and feet with her rounded arms extending above her head and in front of her open chest; her torso twisting to either side and falling forward over her hips and bent knees. Cox's body oscillated between looseness and precision, all in time with Simone's song. Drawing from the technique of another cultural anthropologist and dancer, modern dance pioneer Katherine Dunham (Cox also taught the Dunham-based black folk dance classes at the clinic), Cox's movements were self-assured and joyful, expressing an openness in both her body and face. She appeared to be deeply affected by the music—and performed this before all those who gathered to watch her. Cox's class the day prior impacted my experience of her dance—to have her teach one day and then see her wield that skill and knowledge the next was an unanticipated gift. The FPMC's duration and thoughtful curation of affective and material elements allowed for special occurrences like this; it was a space where planned juxtapositions and unexpected overlapping flourished. For a little over a month, the gates to the mansion remained open and the invitation to come in was clear and evident—whether for free classes, perfor-



Figure 3. The day's offerings at the clinic were listed on the entranceway chalkboard. (Photo by Shulamit Seidler-Feller; courtesy of Creative Time)

mances, or out of sheer curiosity after happening upon the signs outside. Leigh and other organizers spoke about impromptu performances from neighborhood musicians and how FPMC attendants came to recognize people from the community after multiple visits.



Figure 4. Aimee Cox (center right) leading a dance class in the waiting room with artist Simone Leigh (center left). (Photo by Shulamit Seidler-Feller; courtesy of Creative Time)

Creative Time's call for artists to participate in Black Radical Brooklyn included the mandate to work with some aspect of the Bed-Stuy and Crown Heights communities. In the initial press release, the language concerning the FPMC referred to the idea of "dignified care." Leigh eventually shied away from this term due to its condescending undertones:

What I was trying to describe was an African American aesthetic when I talked about dignity. Trying to take what was already there in the neighborhood and what I found was a lot of traditions of black women nurses. But what people were reading was “we’re finally bringing some dignity to these black people.” I was more trying to reveal a dignity that’s always been there. (Leigh 2015)

“Care” may be a more inclusive and less hierarchical term than “dignity” to describe what the FPMC was revealing and promoting. And since so many of the services offered there were



Figure 5. The waiting room at the clinic. (Photo by Shulamit Seidler-Feller; courtesy of Creative Time)

based in self- and preventative care, the clinic’s approach to healthcare was aligned with more holistic practices that aim to treat the patient, not the illness. But who the patient was at the FPMC was a fairly complicated matter, not least because Leigh’s “clinic” straddled the divide between two seemingly disparate worlds of art and health. As a highly educated white woman contributing to the gentrification of yet another neighborhood in Brooklyn (Red Hook), my interest in the clinic—and what I took from it—stems from my research on performance and healthcare sites, as opposed to any need to access free care. The clinic taught me about important Brooklyn histories (Dr. English’s being one among several I touch

on below) and introduced me to an impressive network of Brooklyn-based body practitioners and healers. Most importantly, it expanded my thinking about what constitutes care.

The Waiting Room

During my subway rides home from the clinic I read the first short story in *Waiting Room Magazine* by A. Naomi Jackson about the tragic death of Esmine Elizabeth Green in 2008.

Green, age 49, died after waiting 24 hours in the psychiatric emergency room of Kings County Hospital in Brooklyn without being seen. As Jackson recounts, Green migrated to

the United States from Jamaica 20 years prior, leaving her family, including her children, behind in order to send them monetary support from the States. By the time she arrived at the psychiatric ward, Green had been despondent and out of work for months. Weaving Green’s story together with memories of the narrator’s own estranged mother and late grandmother (both suffering from mental illness), along with quoted statements from Green’s bereaved sister, Jackson repeats the chilling line from a *New York Times* article about the woman’s death: “Waiting may have killed her” (Dwyer 2008:B1).

Esmine Elizabeth Green’s devastating fate and Jackson’s ability to make room for it alongside her own experiences of familial loss and estrangement is, to quote author Sharifa Rhodes-Pitts, a kind of “building on unsteady ground” (2014). Jackson inserts herself in Green’s story, filling in for a life largely unknown but not devoid of certain proximities. And she allows Green to haunt hers. Jackson’s poetic rendering of the intersecting experiences of women of color underscores the time of waiting as uncertain, unstable, and in Green’s case, fatal. It also reveals waiting to be a classed, racialized, and gendered form of (im)mobility that has the power to subsume a lot of undifferentiated life in its naming.³ For these reasons,

3. In an issue of *Gender, Place & Culture*, Deirdre Conlon writes in her introduction, “Waiting: Feminist Perspectives on Spacings/Timings of Migrant (Im)mobility”: “[W]aiting is not something that takes place in suspended time or outside ‘doing’ things, but instead [is] an active and intentional process, integral to constructions of subjectivity and ‘significantly shaping lived life’” (2011:357).

Leigh's decision to make the waiting room of the clinic one of the most dynamic rooms in the mansion is significant. Clearly, Leigh's waiting room is vastly different from the one Esmin Green occupied, but the gap between them now exists for us to contemplate. Leigh described one of the functions of the waiting room at the FPMC: "One of the reasons I have acupuncture or dance or yoga going on in the waiting room is because I wanted to have on display what was going on inside the rooms so the clinic is revealing itself in these performances" (in Osmundson 2014). Exposing these activities by assigning them to the same space also put them in concert with one another, dulling the seemingly intuitive lines between terms like "health" and "art." Leigh constructed a space where multiple activities—and subjectivities—could unfold.

Leigh's oeuvre concerns African American female subjectivities and representations of black women in visual culture to the effect of performing complex "processes of identification" as opposed to discrete identities, a distinction art historian and theorist Amelia Jones makes in her book *Seeing Differently* (2012). In order to move away from a binary structure that fixes subjects according to an overdetermined matrix of attributes, and yet honor past needs for identification that have residual effects, Jones proposes a rubric for seeing and interpreting the visual called "queer temporal durationality," which, she explains,

indicates the potential for doing something with artworks through interpretation that [...] reactivates them by returning them to process and embodiment—linking the interpreting body of the present with the bodies referenced or performed in the past as the work of art. (2012:174)

This queer temporality is already at play in Leigh's work as the artist's deep engagement with process and embodiment informs not only the FPMC but her other works as well.⁴

The FPMC was somewhat of an artistic departure for Leigh—the object-based artist treading, albeit very successfully, on new "social practice art" grounds. The impact of the clinic could not have been achieved without Leigh's intimate staging of the past and present, what Carolyn Dinshaw, calls "touching across time" (2007:178).

One main impetus behind the FPMC came from a wish to honor the work of African American women nurses who "overserved an underserved population for centuries" (Creative Time 2014). Of particular interest to Leigh was the United Order of Tents, a secret society of black nurses organized in 1867 by two former slaves, Annetta M. Lane and Harriett R. Taylor, as a station on the Underground Railroad. It is the oldest Christian organization in the United States run by women and Leigh was stunned to find out about the group from a friend who passed along an article featuring a Bed-Stuy mansion owned by its members in the Brooklyn real estate blog, *Brownstoner* (Morris 2011). Though amazed to learn about this society of black nurses, some of whom still reside and hold meetings in Bed-Stuy,⁵ Leigh was not surprised to discover a hidden black history:

A lot of black life, for practical reasons, happened in secret. If you can't be completely human in public, maybe you can do that privately. It peeks out every now and then. But in these private rooms, a lot of culture is developed. All of this informs, I think, this project and the need, at times, for separatism. (in Osmundson 2014)

Leigh was also inspired by the radical health-care initiatives of the Black Panther Party (referenced in the artwork's title after the Party's "People's Free Medical Clinics" or PFMCs), which created free health clinics in black neighborhoods where services were lacking and widespread distrust of the medical industry endured after a long history of medical discrimination. At these clinics, care was provided

4. Though all of Leigh's work could be included here, one particular solo exhibition that received critical attention was *You Don't Know Where Her Mouth Has Been*, curated by Rashida Bumbray at The Kitchen in 2012.

5. The organization is currently more active in the South. For more information, visit www.unitedorderoftents.org/heritage.html. Also see Morris (2011) for the history of the Bedford-Stuyvesant mansion they have inhabited since 1945.

by Party members “work[ing] with both lay and *trusted-expert* volunteers” (Nelson 2011).⁶ Leigh’s FPMC was open to all but the artist tried to address the necessity of the “private room” in several ways: by offering queer and trans-only classes as well as South Asian-only yoga classes. Additionally, all of the site attendants were women of color as were a majority of the teachers and healers (several of whom were men).

Like Leigh’s other works, the FPMC was able to absorb many references at once, continuing the artist’s predilection for and exploration of a kind of formal circuit breaking that reroutes narrative lines and in the process results in work that is historically layered but “not historically contrived” (Tedford 2013). Leigh’s temporal mash-ups render conventional categories insufficient. Historical pairings that don’t quickly or easily cohere—like the temporal slippages of the clinic’s entranceway—are loaded with affective force and meaning. These aesthetic interventions provide necessary impact, hence the artist’s frustration around calls for the FPMC to be sustainable—a demand that requires it first to be legible in existing frameworks, and second, to withstand the slow and monotonous rhythm of bureaucratic time.

Translating the impact of the FPMC—and Leigh’s vision—into a lasting project is not a simple matter, despite the expressed public desire for it to develop a long-term life. Many of the FPMC participants I spoke to expressed a kind of wistfulness for a sustained version. But Leigh has expressed ambivalence about this kind of objective. Not only does a social art practice on the scale of the FPMC demand a lot of time and resources—energies that would replace a huge chunk of studio time for an artist—Leigh locates the call for longevity within a corporate and capitalist logic, where ends are prioritized over means and easy (though arguably necessary) equations connecting subjects to needs prevail. While the clinic offered mostly holistic and alternative health services, the initial intention was to include more Western medical care as well. In the two

years that Leigh, along with Creative Time and curator Rashida Brumbray, developed the FPMC, Leigh’s attempts to recruit medical professionals from Wyckoff Hospital and other community healthcare clinics revealed a clash of opposing logics. As Leigh told me after the conclusion of the project, the medical world has an “altruistic spirit”: every dollar they get must be stretched to its utmost value leaving little room, if any, to budget or consider alternative ways of providing care (Leigh 2015). In a system where healthcare is not free and providers are often stretched thin, Leigh’s insistence on finding black doctors to donate their time was nearly impossible to accomplish. And even if a doctor could participate, health insurance provided other barriers. Though Leigh explained that much of her two-year planning involved “finding out what couldn’t work,” the end result of including mostly alternative health practitioners—many of whom were from her personal network—underscores her approach of working with “what’s already there” (Leigh 2015).

With gentrification happening at an accelerated pace in Bedford-Stuyvesant and Crown Heights, Black Radical Brooklyn aimed to throw into relief the more than a century-long, ongoing struggle for black self-determination in these neighborhoods. Resonant with the anxiety many had about the clinic’s future, Holland Cotter’s *New York Times* review of the event ended on a similar melancholy note. After a very favorable review of all four site-specific works on display, Cotter concluded with this paragraph: “Funk, God, Jazz & Medicine: Black Radical Brooklyn’ can’t do much. It’s only art, and it’s only on view through Sunday. But its restorative spirit should be kept alive, in place, from here on” (2014). While I understand Cotter’s passionate insistence on keeping a certain spirit “in place,” I get stuck on the “restorative” in his statement, especially with regard to the FPMC. Though the stalemate between art and sustainability continues to produce that twinning of hope and hopelessness, Leigh’s practice resists a logic of restoration bound to a past, present, and future that

6. Alondra Nelson provides an in-depth study of the Black Panther Party’s radical healthcare initiatives in her book *Body and Soul: The Black Panther Party and the Fight against Medical Discrimination* (2011).

is already known, and hinges on the already knowable subjects of history. Instead, the artist allows for somewhat unlikely historical associations to proliferate, putting into circulation new forms and ways of valuing.

In the essay “Freed but Unfree” written by Sharifa Rhodes-Pitts on the occasion of Black Radical Brooklyn, the author narrows in on the row of four residential buildings preserved from the 19th-century Weeksville settlement, now maintained and exhibited by the Weeksville Heritage Center. Referencing the anti-abolitionist riots of 1834 in New York City, which happened just four years prior to the building of the settlement, the author asks: “What kind of house might you build in a time of riots?” (2014). This question is a sardonic response to the architectural preservationists in 1983 who scoffed at the “average” construction and “low-level vernacular” of Weeksville’s buildings. Rhodes-Pitts continues:

[P]erhaps the effort to preserve and restore the structures — that is, to make them conform to what we understand as a building — erases their most intriguing elements. Perhaps the houses were built in a style beyond vernacular, as yet unrecognized by architectural study. Call it Afro-brutalism, proto-fugitivism or pre-destructionism. This is the house you would build with meager resources on the unsteady ground of American unfreedom, with the smell of burning black buildings not long on the wind. (2014)

Conjuring the unsteadiness, and terror, of unfreedom — an *un*freedom because it had to be bought — Rhodes-Pitts explains that within the context of Weeksville’s founding up to the current moment of rampant gentrification, the very structure and materiality of what we know to be solid foundations, ways of building and dwelling, are certainly up for debate. What Leigh skillfully demonstrates through her work’s complex temporal and material constructions and Jones argues for by way of employing the term “queer” is that in place of

“the idea that we can know what we see [...] durationality and its corollary qualities of undecidability and unknowability [are] at the heart of meaning” (2012:174). Leigh’s uncanny layering of transhistorical references, what Cotter refers to as “exceptionally dense,” is characteristic of the artist’s self-proclaimed Surrealism. Leigh’s building of associations is a way of inhabiting a provisional future where the past is unsettled and is made strange in the present. Leigh remarked that Fembrow’s pulsating music, while not what she originally expected for the clinic’s entranceway, worked nonetheless, since it sounded like a heartbeat.

What happened at the Stuyvesant mansion exceeded any simple act of restoration or preservation because it created its own sense of time and history. Rhodes-Pitts, continuing her architectural metaphor, describes “funk, jazz, God and medicine” as “corner posts framing off a room”:

They are ways of being and living and thinking, all connected by a consideration of time: the twisting, bending and defying of linear time that marks black music; the life-extending, transcendent elements of spirituality and healing. When building on unsteady ground and stolen territory, perhaps the most important material is time, and the ability to inhabit an expanded idea of history [...] (2014)⁷

Leigh’s clinic was a place where “an expanded idea of history” could dwell. Though its entanglement of past and present forces will remain outside the purview of the established institutions, which would prefer a long-term health clinic, the FPMC puts pressure on organizations and critics to develop new ways of accounting for the transformations that took place there. As one Creative Time organizer (whose job entailed the daunting task of assessing public engagement) asked: “How do you even measure the success of a project like this?” (Tamari 2014). Leigh’s work negotiates

7. The end of this quote reads: “like the one that Columbia professor Saidiya Hartman offers us when she asserts, ‘I, too, live in the time of slavery, by which I mean I am living in the future created by it.’” Hartman details the myriad problems and frustrations in constructing a history of the trans-Atlantic slave route in her brilliant memoir *Lose Your Mother* (2007).

the impossibility of containing histories and identities that, while always exceeding legibility, need to be given a space nonetheless.

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Open Carry Radical Stillness

Chloe Johnston

On 9 November 2013, a radical political performance occurred at the Blue Mesa Grill, a Mexican restaurant in Arlington, Texas, a suburb of Dallas. Three women met at the restaurant, members of Moms Demand Action for Gun Sense, a gun-control group formed in response to the 2012 shootings of 26 people at

Sandy Hook Elementary School. According to the group's website: "Moms Demand Action supports the 2nd Amendment, but we believe common-sense solutions can help decrease the escalating epidemic of gun violence that kills too many of our children and loved ones every day" (MDA 2015). Not long after the