

**Statement and Introduction for Assignment #3**  
**Dane Victor Galloway**  
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Narcolepsy type 1 is a rare lifelong neurological disorder characterized by excessive daytime sleepiness (EDS), fragmented nighttime sleep, sleep paralysis, hypnagogic/hypnopompic hallucinations, and most unique to the disorder, cataplexy.

In this video I discuss narcolepsy and cataplexy to do three things: (1) illustrate two established notions of the gaze; (2) introduce one novel notion of the gaze; and (3) test the potential of an unexplored sociomedical metaphor. None of these ideas will be fully explored here, but they may give a sense of the direction the research will take in longer form. This all flows from my desire to connect the dots between senses of self, other, and collective. The thing that links this assignment to the first two is the human project of revisionist mythologizing, on the individual, familial, and of course, the national levels. The terror of life and the denial of death give fuel to the stories which we lean on to justify and rationalize our terrestrial activities. The genealogies of purpose we pass down and pass through give form to the archaeologies of ability that frame what we see when we look in the mirror. Be it through objects, places, or perspectives, these are all rituals of remembering and revising and thereby rendering real what was once only imaginary.

I am wary of sociocultural theory which is wholly grounded in analogies to scientific or mathematical concepts. There is a tradition of extrapolating highly particular (and in most cases still theoretical) ideas from physics, biology, and math onto the social and the psychic/psychological. See the field, entanglement, force, etc. If I'm honest, I'm actually quite drawn to these analogies; there is an allure to the discovery of intellectual patterns that, if I'm not careful, I may believe to be patterns in reality as well. But I also wonder to what extent the scholarly drive toward comparison and sameness correlates to the dominant epistemology of forcing homogeneity and uniformity where there is none. Scholars have also attempted to use various pathological or psychological concepts as metaphors or even concrete diagnoses of social issues. See schizophrenia, anxiety, depression, neuroses. As these ideas or pathologies evolve in their original fields, and as the affirmative literature grows more and more specific (though not necessarily homogeneous), there is no clear way to address their vestigial impacts on the social sciences and humanities. The humanists' pull toward leaning on medical and scientific analogy can both undersell the complexity of the concepts in their original form and oversell their ubiquitousness and acceptedness. I predict within the decade we will see this pattern repeating with narcolepsy as the frame, glimpses of which we are getting in the post pandemic world. And so to pre-empt and prevent, I, here and now, claim: The real, the imaginary, the symbolic, the symptom; none of these is abstract for the narcoleptic living under the wakeful gaze.

Narcolepsy is one of several sleep, neurological, psychiatric, immune, or other disorders where hypersomnia is a key symptom. Not to mention the documented sleepiness, sleeplessness, and fatigue that characterize late stage capitalism and racialized, gendered, stratified society. Narcoleptics may live in the house of exhaustion but we certainly don't own the building. All are welcome and all will one day pass through its doors. To learn more about narcolepsy visit [project-sleep.com](http://project-sleep.com).