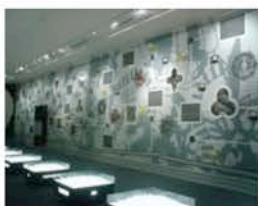
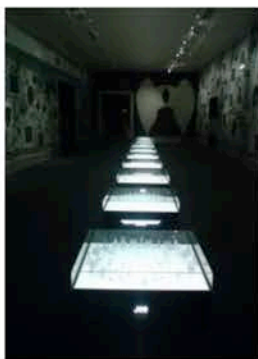


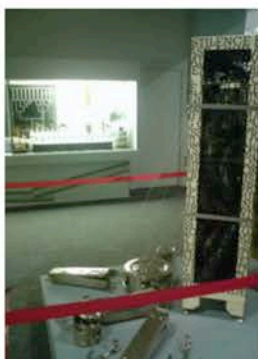
Fritha Langerman  
Detail of cabinet display, 2009 . mixed media .



Fritha Langerman  
Wall of exhibition 2009 . mixed media .



Fritha Langerman  
Floor pieces 2009 . mixed media .



Fritha Langerman  
Detail of central sculpture 2009 . mixed media .



Fritha Langerman  
Central sculpture and display cabinets 2009 . mixed media .

## cape reviews

Subtle Thresholds: the representational taxonomies of disease

**Fritha Langerman at South African Museum**

By Thomas Parker  
25 July - 01 March.

'[Cholera] like any other disease, has in itself no meaning; it is only a micro-organism. It acquires meaning and significance from its human context, from the ways in which it infiltrates the lives of people, from the reactions it provokes, and from the manner in which it gives expression to cultural and political views.'

(Arnold, 1986)

Fritha Langerman's 'Subtle Thresholds' at the IZIKO South African Museum aims to re-contextualise the politics of disease within a scientific lattice. As Langerman's use of the above quotation suggests, the exhibition causes the viewer to approach disease from a different entry point, essentially undertaking a reconstruction of their pre-existing knowledge of the subject.

### Venue

#### South African Museum

25 Queen Victoria Street, Gardens,  
Cape Town

Tel: 021 481 3800  
Fax: 021 481 3993  
info@iziko.org.za  
http://www.iziko.org.za  
/sam/index.html

10 am – 5 pm daily  
Closed Workers Day and Christmas Day

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What are there?

To realize this aim, the exhibition deploys a two-pronged strategy. The first method involves removing stigma associated with disease by objectifying it and re-presenting it visually and informationally as a site of wonder and intrigue. The second method is to remove the notion of a taxonomical hierarchy and linear form inherent in biological sciences, introducing instead a 'web of life' which emphasises interconnectedness and removes the implied direction in any linear motion (a fundamental dynamic in the theory of evolution). A successful execution of this strategy serves to remove cultural prejudice and inequality, as our biological equivalence with other organisms becomes clear and our human tendency to deem entities superior (generally ourselves) is shown to be fallacious.

Situated tactically between the social and natural science sections of the museum, the exhibition becomes a site for the conceptual bridging of the two disciplines, bringing the representational and linguistically-based social sciences together with the observable and inductively-based natural sciences. By borrowing and altering conventions of museum display which are shared between these two realms of the museum, the exhibition successfully references both bodies of knowledge. This creates a platform where their intermingling is nurtured, allowing a third form of informational display to come to fruition.

By adopting biomedical language, which requires reading of the visual, the viewer engages in a process where both language and object inform and mold information. Abstraction of language and object become necessary in formulating a new means of reading displays, effectively erasing the clarity and delineation that is traditionally associated with museum display and the explanation of such display. The use of the visual from an artistic perspective becomes an important tool in the abstraction of information and scientific imagery, a necessary step in the viewer's objectification of disease.

Once the viewer becomes alert to repetition (a notable feature of the elements of design), their intuitive response to the notion of disease is quickly overridden. A contrast of informational language (medical indexing and definitions in the glass displays), emotive language (the blackboards with textual extracts mounted on the walls), and visual language (the floor pieces constructed from disposable medical supplies and metal discs conflating images of disease with design) contribute to an experience of the exhibition as one of repeated convulsions. The viewer's intuition is stirred by emotive language and then quickly quelled by the demand of the cognitive when faced with information and complex system interpretation.

The dialogue created between the wall pieces, floor pieces and cabinet pieces becomes a metaphor for the non-linear assertion of horizontal gene transfer and the viewer finds themselves in the midst of contravening lines of communication, an informational imbroglio, desperately trying to make sense from a subjective focal point that finds itself at the outskirts of the system's own focal point.

Before coming to grips with what the viewer is dealing with, the work requires a discarding of culturally-constructed beliefs surrounding disease - which is a position didactically enforced on the viewer - and the reconstruction of knowledge within the framework of the exhibition.

Difference and analogy are seen - according to the exhibition's brief - to act as mediators between observable information and a cultural understanding of disease; both relied on to successfully relay complex ideas. These mediators are identified as the cause of stigma. By reforming the viewer's knowledge from the building blocks of language and the object, the viewer hopefully rids him or herself of these flawed mediators. The critique of language as a limiting agent is clearly evident, not only culturally, but scientifically too. Stuffed animals (from the museum's collection), which are literally pinned down by scientific terms, function as qualifiers; positioning an object (such as an animal) within a taxonomical hierarchy it is unable to escape. The collection of objects (including the animals and items found in the floor pieces) is refashioned objectively by removing the objects from their natural habitats (generally the laboratory). In this way they become disempowered, as they cannot fulfill the function for which they were designed. They retain their meaning and relevance but are put in the position of something to be observed, ironically the job they performed in the environment for which they were created.

The sculpture opposite the entrance to the exhibition, consisting of medical equipment used for sterilisation attached to a glass case printed with text, serves as the converging point of language and object. This relationship (indicating the creation of stigma) is visually demonstrated through attached cables. However, language itself, being printed onto glass, becomes an object in its own right, in need of definition and attachment to meaning; much as the objects with cables have been outfitted with.

The large body of related concepts and information presented to the viewer aids in keeping their comprehension engaged, making it difficult to pass intuitive judgement on disease, but also presenting another problem in terms of their reconstruction of knowledge. The viewer is confronted with a plethora of evidence for disease, imagery of disease and apparatus used to observe disease, but something vital is missing. This is, of course, disease itself. As real disease is nowhere to be found in the exhibition, it therefore goes missing in the viewer's reconstruction of its reality and the viewer is left without the grounding of its existence. Disease itself can therefore not be factored into the viewer's new construction and instead they are asked to adopt the evidence and recordings of others' empirical pursuits, essentially having to base their belief of such information on an *a priori* basis (with feeble analytic clues for guidance).