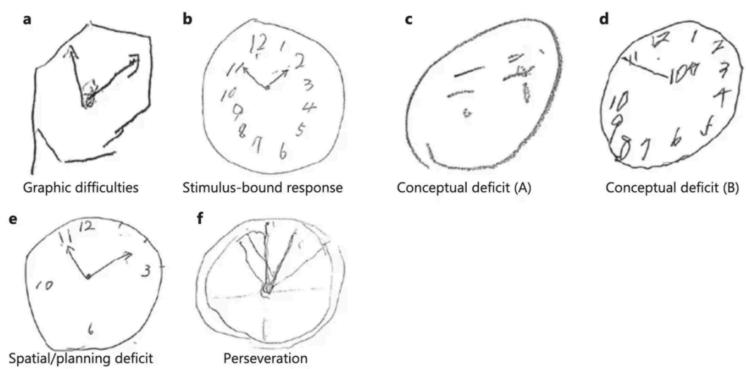
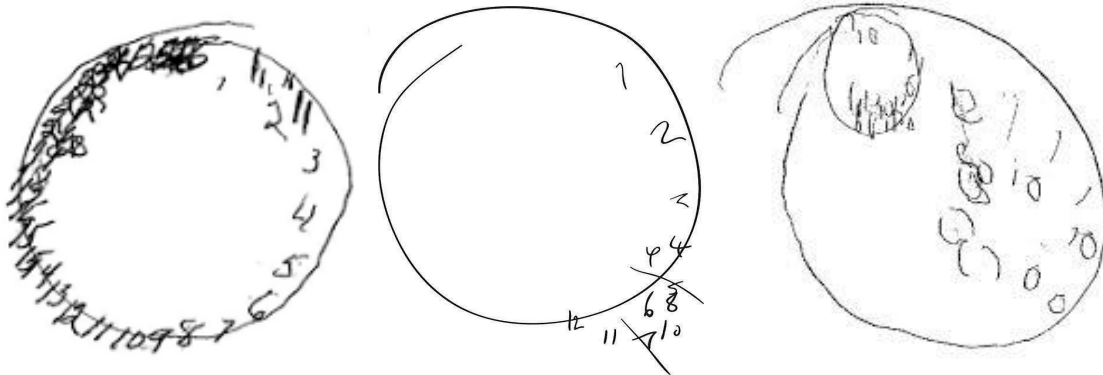
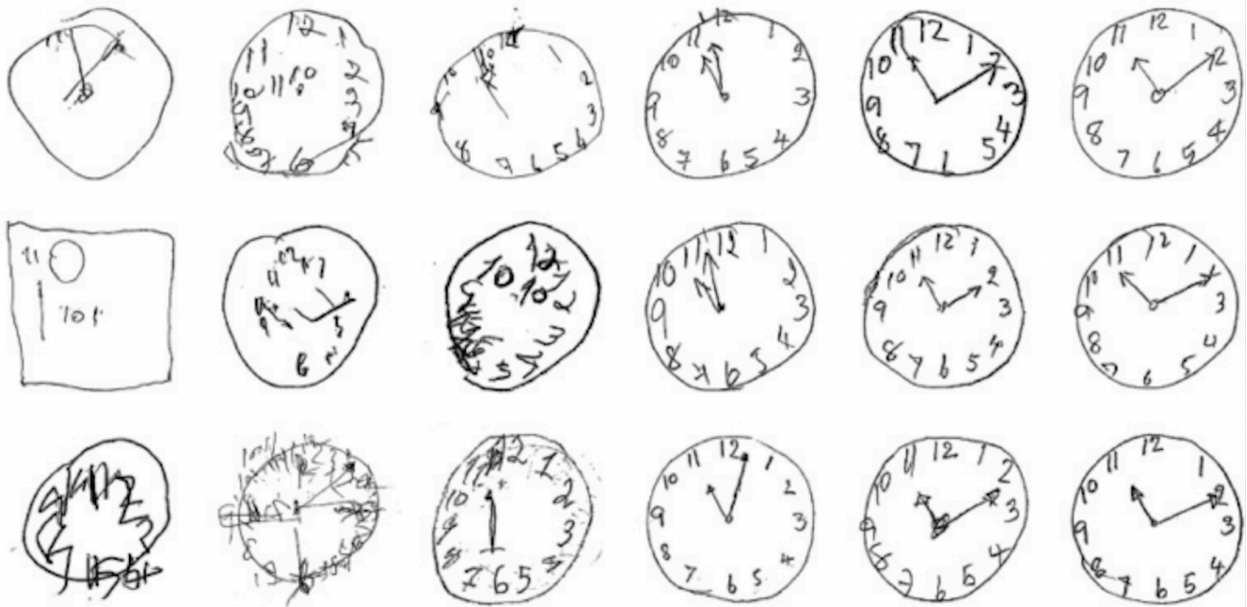
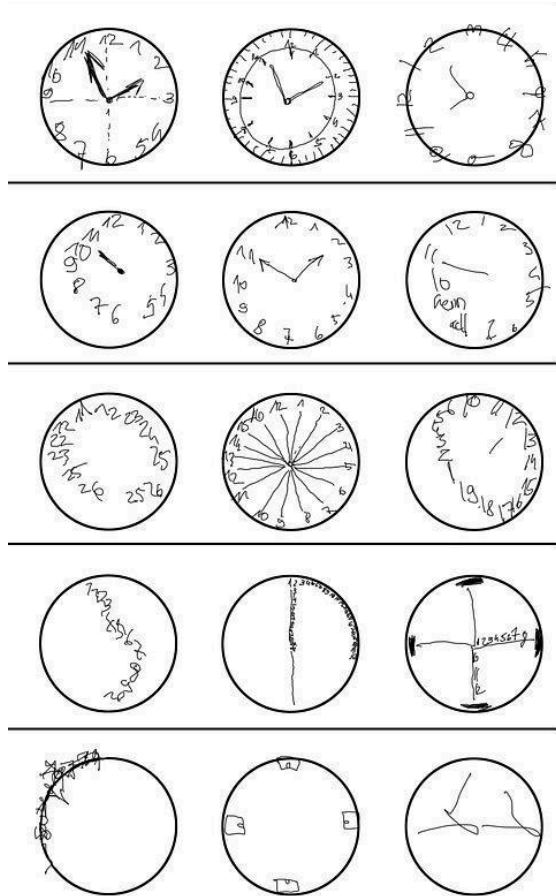


- alzheimer patient's clock drawing





(2) Minor deficiencies in visual and spatial thinking, e.g., need for auxiliary lines, and numbers on the edges of clocks

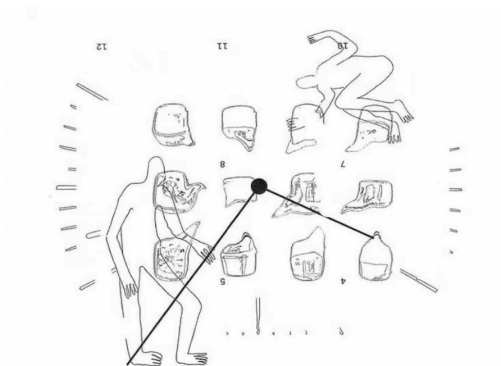
(3) Clock drawing errors, such as missing or inverted hands

(4) Moderate defects in visual and spatial thinking, e.g., defective or irregular distances between numbers, or numbers > 12 on a clock (classic horror theme, 32 at 13 or something like that...)

(5) Severe deficits in visual and spatial thinking, worse than 4th degree (looking at the last clock with the auxiliary lines, it feels as if the patient is trapped between worlds, trying hard to remember what is real but can't get past it)

(6) Inability to recognise clocks (dear friend, there is no time here)

- Clock based on disease progression

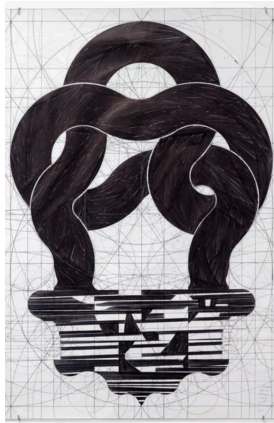


- No linear time



Antonio Paucar, *Círculo del Altiplano (The Altiplano Circle)*, 2009, installatiebeeld *No Linear Fucking Time*, BAK, basis voor actuele kunst, Utrecht, 2021–2022, foto: Tom Janssen

[https://metropolism.com/en/recensie/46093\\_crip\\_time\\_queer\\_time\\_deep\\_time\\_non\\_human\\_time\\_no\\_linear\\_fucking\\_time\\_at\\_bak\\_utrecht/](https://metropolism.com/en/recensie/46093_crip_time_queer_time_deep_time_non_human_time_no_linear_fucking_time_at_bak_utrecht/)





<https://hybrid-futures.salford.ac.uk/collective-futures-session-7/>

The group was asked to consider their understanding of time. Collectively they practised using metronomes - some Bakelite, some antique, large or small, colourful - on a large table. The task for each collective was to set their metronome at the speed at which they felt their body and their embodied time moving in that moment. The aim was to connect as a collective, to try to see the ways in which we try to share space with each other or connect with each other when each person experiences time in very different ways. The metronome in this exercise is a tool for articulating the subjective ways of time. The Collective was asked to spend some time in setting up their moonshine to reflect on how the normative idea of time affects their daily lives. How do our bodies live up to the expectations of normative time? What ideas about time did I internalise and once each group had found their own pace and set up their metronomes, these were placed on the table and allowed to sit through interruptions and interwoven beats.

Neurodivergence has diverse kinds of differences in how their brain works, as compared to Neurotypical people. It is not a 'disability', rather a difference in the physiology of brains. However, it is seen as a disability in how the world is and how social systems are dysfunctional and often more exclusive towards neurotypical people.

### **Time blindness -**

As per my understanding, I can form this opinion that time blindness is what we are calling the inability to perceive time the same way it is 'supposed' to be perceived, the internal sense of time/ clock affects how someone perceives time, manages time and schedules based on time.

This takes different forms based on the type of neurodivergence, such as ADHD, ASD, OCD and more. In my personal experience.

I associate the experiences of time blindness with OCD, where the perception of time is created with tasks or 'rituals' that need to be done, which is a coping mechanism for anxiety, which stretches tasks, or expands the entire schedule, making the day pass by faster, without doing much.

This is crisp time, the time that gets occupied as part of time blindness in schedules, daily, monthly, in different contexts, which only the person dealing with can see, it is invisible, just like time itself, but its subjective, time is not objective, its subjective, relative.

### **OCD -**

Obsessive-Compulsive Disorder (OCD) is characterized by two primary symptoms: obsessions and compulsions.

Obsessions are characterized by recurrent, intrusive, and distressing thoughts. These thoughts often create anxiety, at which point the person often engages in compulsions (rituals or behaviors) which function to "neutralize" the anxiety associated with the obsessive thoughts. To meet the criteria for OCD, these thoughts must be excessive and distressing.

*For ADHD, this is often attributed to time blindness, difficulty with regulating attention and focus, and executive functioning difficulties.*

*In the context of OCD, obsessions and compulsions can make attention, focus, and following through on tasks difficult. A person may also struggle with timeliness and time management if they spend copious amounts of time engaging in compulsions.*

Personally, I would wish schedules were flexible, I wish my time would be accommodated for, acknowledged for, that would reduce anxiety & stress. In an ideal world, time would flow flexibly, or at least the perception of time would be flexible, accommodating for each person separately. **Time is linear, but the perception of time is not linear**, it has its highs and lows. Some moments feel longer, some pass by quicker than days. The perception of time also depends on a person's age and which stage of life they might be in, and the physiology of their brain too.

It is also dependent on how we visualise time, clocks, calendars, etc are linear methods of tracking time. Although time is linear in nature, the visualisation of it doesn't have to be linear, it can be flexible. An hourglass is a good example of visualising an hour without a ticking timer.



*How may we reduce the stress and anxiety associated with compulsions and obsessions in people who have OCD through scheduling or alternates?*

*How may we visualise time or the perception of time that acknowledges people with neurodiversity and manage time blindness?*

References :

ADHD vs OCD :

<https://neurodivergentinsights.com/misdiagnosis-monday/adhd-vs-ocd/>

OCD The war inside :

<https://docuseek2-com.arts.idm.oclc.org/cart/product/833>

Designing for time blindness :

<https://uxplanet.org/designing-for-time-blindness-e42b0f8eb922>

How manipulatives can help in ADHD's time blindness :

<https://adhdhomestead.net/time-blindness-manipulatives/>

Keywords

Time is personal

Not to re-generalise

,

Survey questions :

1. How does someone perceive the passing of time on the daily?
2. How does mood and emotion play a role in how someone perceives time?
3. How does someone perceive the passing of time in a week?
4. How does someone relate with the concept of time visually?
5. How does someone visualise a clock, what would their ideal clock look like? (Draw)
6. How does someone's mental health affect their perception of time?



## People with panic disorders → problems they face using public transportations

- The system → interaction between public transportation schedules and the daily life of a person with panic disorders
- The “killing rhythm” → the set, non-negotiable schedules of public transportation that demand punctuality and impose stress on individuals who experience panic attacks
- Affected individuals → People with panic disorders who struggle with unpredictable episodes of anxiety, making adherence to strict transportation schedules a challenge.

### → Who sets this rhythm, and how is it controlled?

- **The transit system:** Public transportation operates on efficiency-driven, fixed schedules that cater to the majority rather than individuals with different needs.
- **Work and societal structures:** Employers, schools, and social norms reinforce the expectation of punctuality, often without flexibility for those who need extra time.
- **Peak-hour congestion:** Crowds, noise, and unpredictability make public transport stressful, forcing those with panic disorders to adjust their travel times significantly.

For individuals with panic disorders, public transportation isn't just about getting from point A to B but it involves careful planning to avoid overwhelming situations. One common coping mechanism is **leaving home earlier or adjusting schedules to avoid peak hours**, which results in an additional **time cost** that is not accounted for in standard transit planning. This directly links to the "killing rhythm" concept.

### → How does it disrupt a person's daily schedule?

- Traveling during off-peak hours may require individuals to leave home significantly earlier, leading to longer days and reduced personal time.
- Adjusting schedules to avoid peak hours can result in less sleep and heightened stress, impacting overall health/well-being.
- Finding alternative transportation methods to avoid crowded public transit can lead to additional expenses, adding financial strain.

### → How to intervene?

- **Flexible Scheduling** → advocating for workplace policies that allow flexible start times can enable individuals to commute during less crowded periods, reducing anxiety.

- quiet zones within transit stations → offering a space to manage anxiety before continuing their journey.
- Transit apps that allow users to see real-time crowd levels and plan less stressful routes.

## References:

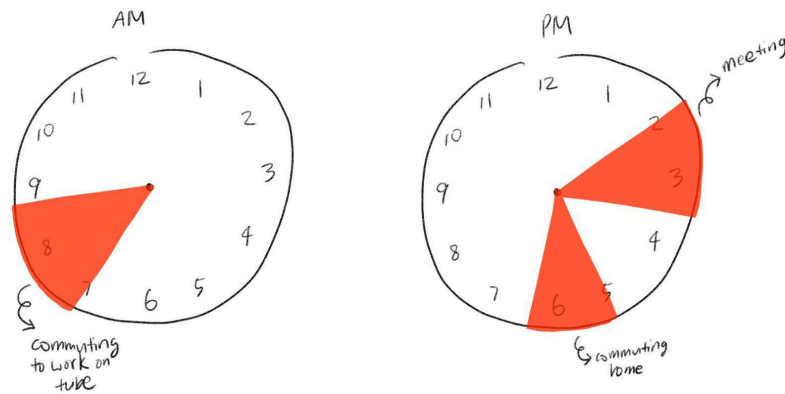
- <https://www.nightingalehospital.co.uk/professor-david-veale-on-the-rise-in-public-transport-anxiety/>
- <https://www.happiness.com/magazine/health-body/my-first-panic-attack-the-bus-ride-from-hell/>
- How to present them to ppl?
- Don't generalize it too much

## \*Panic disorder

**Peak Anxiety Time Indication:** The clock highlights periods of **heightened anxiety**, such as commuting during **morning and evening rush hours**.

### Layered Transparency Effect:

- Overlapping colored film layers gradually obscure the clock face as peak hours approach, making time harder to read.
- This visual distortion symbolizes the **increasing stress and avoidance behaviors** experienced during those times.



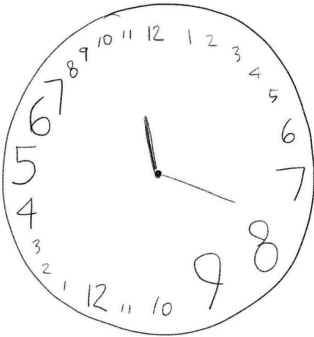
### Dynamic Perception of Time:

- During off-peak hours, the clock remains **clear and readable**, representing a sense of calm
- As anxiety-inducing times near, the **blurred or darkened effect intensifies**, mimicking the overwhelming nature of those periods

### A Non-Linear Time Experience:

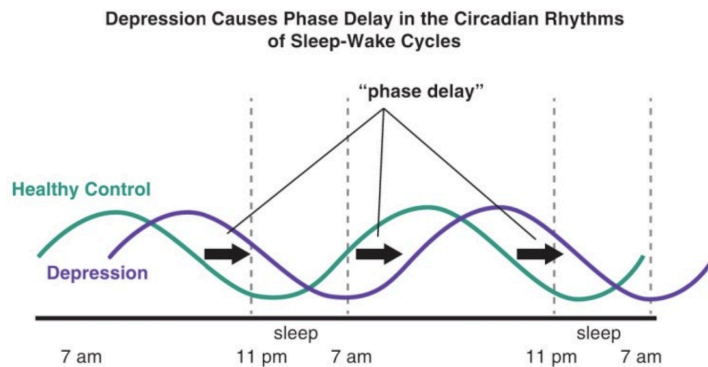
- The design disrupts the standard perception of time, reflecting how people with panic disorder navigate their day differently
- It acknowledges that **time is not equally accessible** to everyone, particularly in high-stress situations

- The time with the highest anxiety could also be represented by the spacing and size of the number



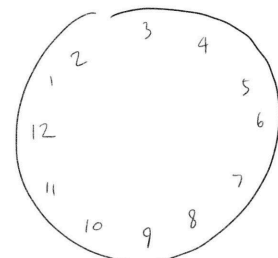
## \*Depression

**Phase-Shifted Time:** The numbers on the clock are delayed, reflecting the circadian rhythm shift in depression.



Stahl's essential psychopharmacology 4th ed. 313p

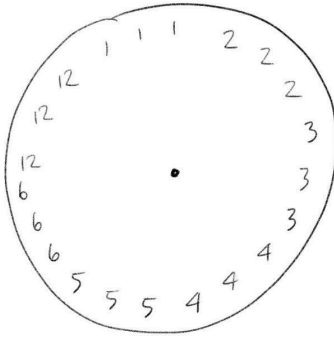
- 12 o'clock appears where 9 o'clock would be on a standard clock, visually representing how the sleep-wake cycle is out of sync





**Distorted Time Perception:** Since time feels slower for those with depression, the clock reflects this by:

- Repeating numbers multiple times, stretching out the perception of each hour
- Potentially having elongated clock hands that move sluggishly or pause, reinforcing the sense of stagnation



#### **A Non-Standard Time Flow:**

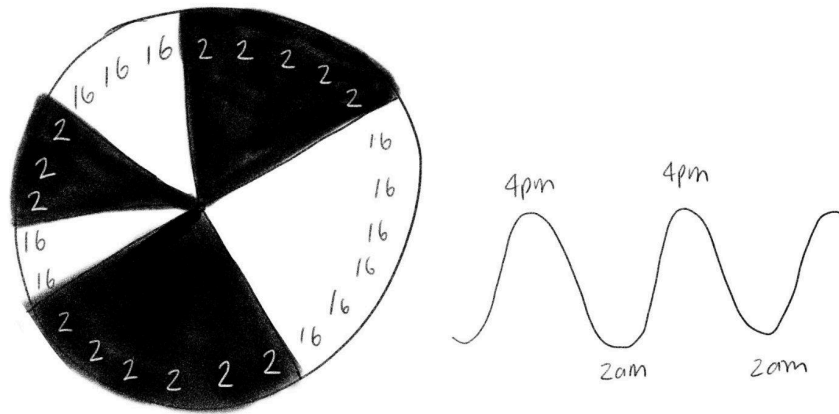
- The design challenges traditional time structures, acknowledging that time is experienced differently in a depressive state
  - It visually conveys how depression warps both the perception of time and one's ability to engage with daily routines
- 

#### **\*Bipolar disorder**

**Selective Time Display:** The clock face only shows two number

- 2 (2 am )and 16 (4 pm) —representing the brain's most extreme states → when it is most alert and least alert
  - 2 AM: A state of heightened alertness, often linked to manic energy, racing thoughts, or creative surges.
  - 4 PM: A period of deep fatigue, reflecting depressive lows or exhaustion.

**Minimalist & Disorienting Design:** By removing other time markers, the clock challenges the conventional perception of time, mirroring how bipolar individuals experience drastic shifts in energy and cognition.



**Nonlinear Time Experience:** Without a full set of numbers, the clock suggests that time isn't evenly distributed, reinforcing how bipolar disorder affects the perception of daily rhythms.

#### **Potential Visual or Mechanical Elements?**

- The hands could jump between 2 AM and 4 PM rather than moving continuously
  - The clock face might fade in and out, reinforcing the contrast between hyper-awareness and mental fog
-

<https://thepolyphony.org/2024/01/26/medhums-101-what-is-crip-time/>

As a chronic fatigue sufferer, when I calculate how many hours I need to rest before I can attend a social event, that's my 'crip time'.

Instead of 'crip time' making the disabled person's mind and body subservient to the clock, 'crip time' makes the clock subservient to the disabled person's mind and body!

Many disabled people live according to an alternative temporal logic.

In this sense, the term indicates the extra time a person may need to perform various tasks - and the need for time adjustments. Crippled time also notifies a conflict with normative time, which is the seemingly normal allocation or division of time in everyday life.

<https://www.accessibility.com/blog/what-is-crip-time>

Rather, it varies between individuals and is shaped by unique physical and cognitive factors.

Both emphasise that normative time is artificial and can be changed.

Culturally also dictates that the division of time into larger chunks and milestones, such as when certain life stages should occur and for how long (when a child should learn how to read or ride a bike; when an adult should get his or her first job after high school or college; when someone should get married, etc.) tends to be exclusive, limiting, and even arbitrary.

From people whose sense of time and future changed after being diagnosed with a serious illness, to the experience of pandemic isolation that many of us are now familiar with. This radically altered sense of time is intimately connected to the new ways in which we must relate to physical space, everyday tasks, future prospects, and even our own bodies.

<https://www.kcl.ac.uk/exploded-broken-endured-resisting-and-reorienting-normative-time-through-feminist-crip-theory>

'requires our bodies and minds to break into new rhythms, new patterns of thinking and feeling, and travel through the world'

(un)predictable daily rhythms.

'Cripplagate time is flexible time, not just expanding but exploding; it requires reimagining our notions of what can and should happen on time, recognising how expectations of 'how long things will take' are based on very particular minds and bodies ..... Instead of bending disabled bodies and minds to meet the clock, the clock is bent to meet disabled bodies and minds.'

(Kafer, 2013, p.27)

- Medical care area

<https://thepolyphony.org/2024/01/26/medhums-101-what-is-crip-time/>

“For many, this process also involves the liminal space of pre-diagnosis/prognosis. Waiting to see a doctor, being shuttled between specialists, waiting for test results, getting inconclusive results or no one knowing what the next step is; all of this is crip time. In many ways, I experience the strangeness of crip time as a terrifying taste of eternity because it wrenches me out of the social and conventional scripts about time and life. Crip time is immanence.”

- Mad time & Trauma time :

“Beyond crip time, some scholars and disabled people also affirm the existence of mad time and trauma time to acknowledge and analyse the temporalities of psychosis, depression, PTSD, and other mad conditions. (As with any definitions, there are advantages and drawbacks to using “crip time” as an umbrella concept; it can be useful for organising purposes, but it can also flatten the diversity of disabled/mad/chronically ill/debilitated communities. )”

<https://debrawesselmann.com/trauma-time/>

“If I have suffered a trauma one, two, ten, twenty, or forty years previously, a sound, a smell, or a sight may remind my limbic brain of the original danger, triggering an immediate surge of cortisol into my brain. The cortisol leaves my heart racing, my palms sweating, and my thoughts disorganized and fragmented. In a split second I may find myself arguing and fighting or hiding in fear. I may be as confused as others around me regarding my extreme behaviors, and later I may be overwhelmed by guilt and shame.”

- Extra time

<https://www.accessibility.com/blog/what-is-crip-time>

This could include anything from the extra time it takes to move through spaces in a wheelchair (and thus the extra time it takes to arrive somewhere in an expected timeframe) to the way chronic illness and fatigue ‘eats up’ a person’s time. In both scenarios, the apportioning of the day into segments that are assumed to be normal and natural—set hours for work, rest and recreation, chores, errands, socializing, family time, and sleep—is disrupted and shown to be inadequate. Needing extra time and recovery time to perform tasks, often necessary ones, means that other portions of the day will be sacrificed, something that is often not factored into how disability accessibility is understood. Crip time provides a framework to look at how different relationships to time need more inclusive acknowledgment and accommodation.

The daily over time schedule is understood by the family (or by themselves) :

[https://www.bilibili.com/video/BV1QB4y1Y7iX/?spm\\_id\\_from=333.337.search-card.all.click&vd\\_source=67bb7907e4d0e76905c6894c8b22e400](https://www.bilibili.com/video/BV1QB4y1Y7iX/?spm_id_from=333.337.search-card.all.click&vd_source=67bb7907e4d0e76905c6894c8b22e400)



(a person might need to perform any variety of tasks. Crip time also notifies a conflict with normative time, the seemingly normal apportioning or segmenting of time in daily life.)

<https://onlinelibrary.wiley.com/doi/full/10.1111/1467-9566.13504>

'chronic', 'intermittent', 'frequency', 'relapse' and 'remission'

Sheppard (2020) explores **chronic pain and the entanglement of disbelief and uncertainty with pacing in understandings of crip time**. Sheppard foregrounds understandings of crip time with the role of '**non-recognition**', as the first thing many of her participants shared, and as important in recognising the liminality and uncertainty when chronically in pain. For Sheppard (2020), she describes how for those with 'undocumented disabilities' (see Mollow, 2014, p. 185 who incorporates their own experiences of IBS as part of this description) whereby impairments are '**neither visible nor definitively measurable by western medicine**', they experience 'epistemic invalidation' (Wendell, 1996) and thus, uncertainties regarding impairment or disability should be included in understanding crip time and its complexities within social worlds. This is something especially important to consider when appreciating the experiences of living with IBS—a common, but often contested and glossed over condition. That is not to medicalise such experience, but to highlight the role of recognition, diagnosis and labelling (Nettleton, 2006), in its relationship to everyday experiences of inaccessible environments and social attitudes.

The **11 o'clock rule** is crip time - the bend where society meets the body. the 11 o'clock rule is about expanding time and collectively re-imagining how long things take to.

Julie also describes how **removing the ticking clock of time pressure at work changed her irritable bowel syndrome**. This is another reminder of the importance of how the social clock intersects with the body.

The narratives of people with irritable bowel syndrome emphasise how everyday practices are **negotiated and fulfilled with social times, relational relationships and other human and non-human bodies**.

#### ▶ ADHD: A Nightmare Under Capitalism

One of the definitions of time and tasks comes from capitalist exploitation, such as how much time to do how many things. But the time that passes or the perception of time is different for people with different illnesses.

How to intervention:

Creating different clocks, different diseases have different perceptions of time

Reference:

<https://artreview.com/what-is-crip-time/>

<https://www.mmk.art/en/whats-on/crip-time/>

《Have you ever fallen in love with a clock?》

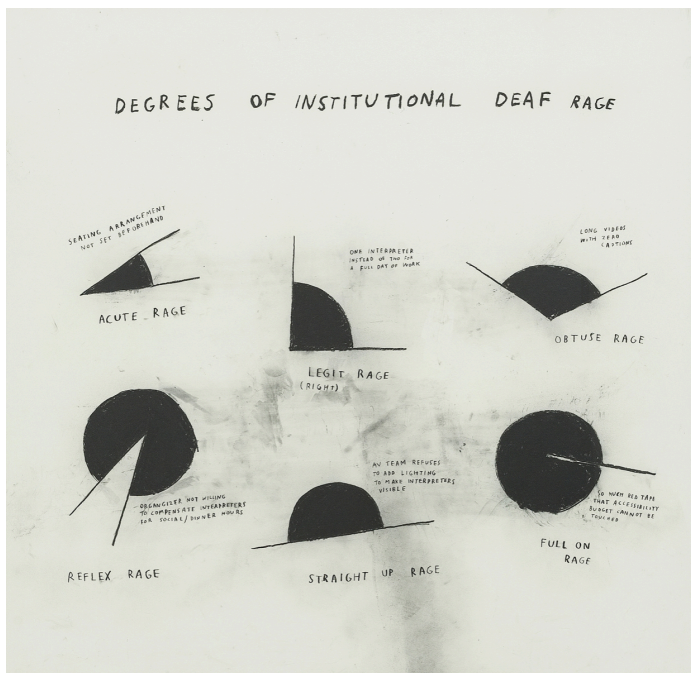


A set of clocks. Unlike typical clocks that show hours and minutes, these clocks only show the day of the week. Each clock has a very slow moving hand that rotates every seven days.



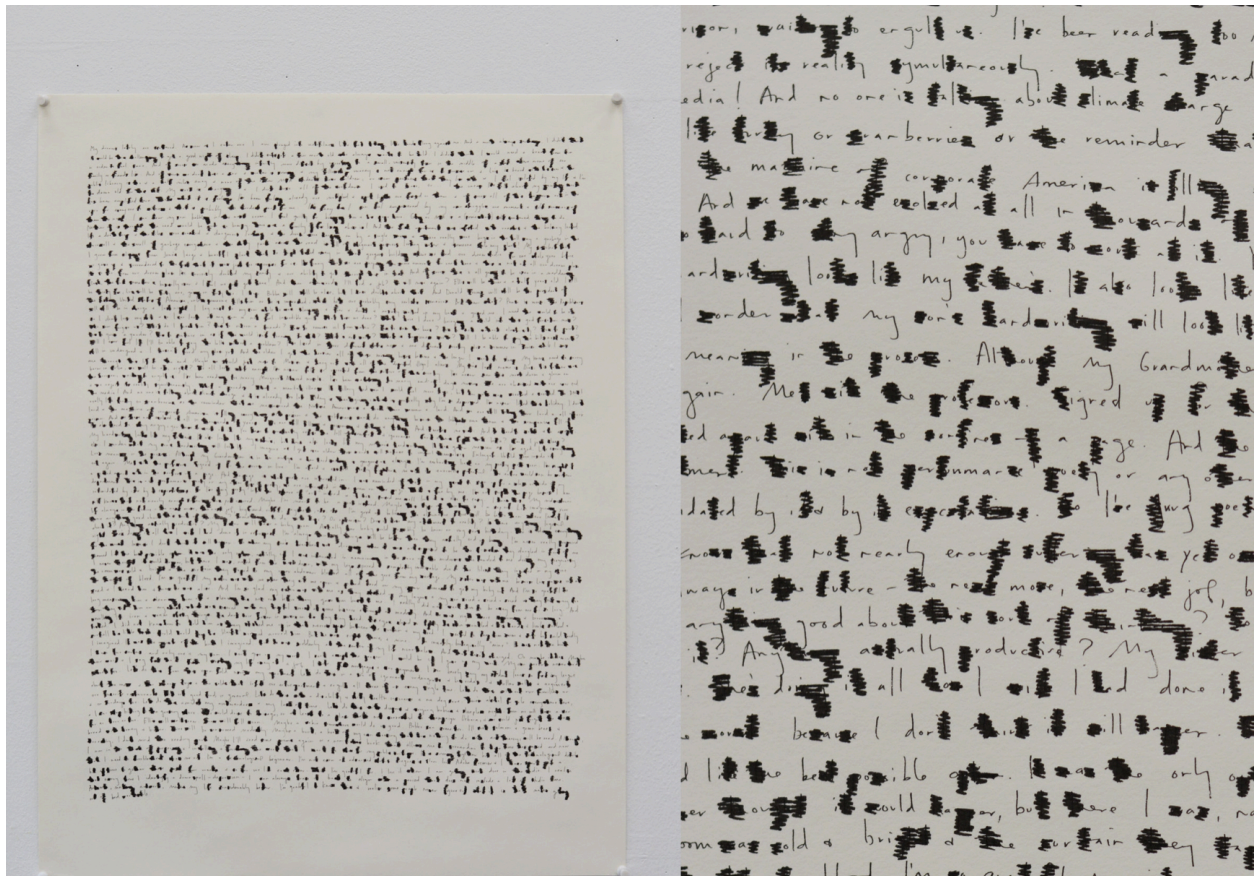
《Crip Clock》 Sharona Franklin's

A pair of mandala-like arrangements in which silver teaspoons fan out like the hands of a clock. Each spoon cradles an assortment of pills, while its handle is detailed with a tiny enamel photograph of a syringe. Drawing on her own daily pharmaceutical ritual—she photographs her syringes prior to injecting herself with antibodies and takes or has taken the pills displayed here—Franklin rejiggers the mawkish trappings of domesticity to express a home life structured by other rhythms.



Christine Sun Kim《Degrees of Institutional Deaf Rage》

Liza Sylvestre《Interference》



For CRIP TIME, Lazard methodically replenishes a variety of brightly coloured pill boxes whose labels are worn from use. A pill keeps time like an irregular clock. Using the duration medium of video, Lazard transforms a seemingly mundane task into a new way of measuring time - one that mirrors the experiences of people with chronic illnesses!