THE SKULL SESSIONS

A COLLABORATION BETWEEN
TIM HYDE & ANDREA GALVANI
Saul Melman was born in Baltimore MD, and lives and works in Brooklyn, New York. He creates immersive environments, performances, and sculptures that integrate tactile and conceptual manifestations of the body.

saulmelman.com
THE SKULL SESSIONS
A collaboration between Tim Hyde & Andrea Galvani

The Skull Sessions are a series of collaborative works by Tim Hyde and Andrea Galvani. Each session is a recording of an action, a conversation, or a journey that is remixed and translated into physical form.
IN CONVERSATION WITH
SAUL MELMAN

*Skull Session No.1* is an artist book made from an audio recording of a conversation with Saul Melman, an artist who creates immersive environments and sculptures that integrate tactile and conceptual manifestations of the body. Saul’s recent work animates the inanimate, renders apartments invisible, and incorporates gold, salt, and saliva as material for performance. The conversation was recorded in Gowanus Brooklyn, New York City.
We’re recording now. Let me begin by saying that we are sitting in Saul Melman’s studio in Gowanus Brooklyn, in New York City. It is March 2012. I would like to start with this photograph of the Emergency Room (p.8). I’ve been to Saul’s studio a lot this year, and I’ve been staring at this photograph. I know you both well enough to say that this photograph is connected to both of your lives, although I don’t think either one of you knows it yet.

Tim is right, I have a personal relationship to this room. First, I spent six months in the hospital recovering from surgery. And second, I grew up visiting my father who worked in a hospital as a surgeon. When I was really young I watched people screaming and crying and waiting to see if he could save someone in their family. So I can imagine your presence here in this space, even though your body isn’t visible. In this way it seems to me like a spiritual photograph. When we saw
you performing at PS1, you had your tools organized in that special tool box to hang in the air next to you while you were working. And you worked so slowly and precisely with those tools. It reminded me of a surgeon. And now I see this image you made of the hospital room, and I understand your performance as being connected to how you work as a doctor. I don’t know if I am thinking this way because I am so familiar with hospitals. But for me the connection between this image and your method of performance is very strong. Was this connection intentional?

**SM** Yes, the installation I made at PS1 felt closely connected to my experience as a doctor in the Emergency Room, with its ritualized actions and associated tools. And the image of the Emergency Trauma Room has become important for me because it’s a direct opening into the territory of the hospital as source material for my work. In the photograph I arranged the sheets deliberately. One of the beds looks like someone has slept there. The other bed is waiting for someone to come. The bodies are absent, but their presence is felt, and the viewer can project their own body into that narrative.

**TH** It makes sense that you set up the picture—it looks like a stage set. We know it’s a staging ground for the negotiation of this line between life and death, with all the tools and machinery to try to prevent people from crossing over that line. And the color is so over-saturated that it looks like you used pigment to coat everything in the room. I think the color claims the room as sculpture, leaving no chance that we would mistake the photograph for a document, a documentary photograph of a hospital.

**AG** Maybe this is a delicate question Saul, but have you ever thought of the Emergency Room as an art studio?
Yes! It’s kind of a studio and also a theater. When I’m in the Emergency Room I’m using certain tools and materials, I’m assuming a role and being watched. Obviously it’s very different than making art because what is at stake is human life. The procedures that I do as a physician must be done precisely, in a very specific order, and of course without error. So there is no room to experiment, sit back and look, make mistakes, the way I would in the art studio. But I physically perform a role in both arenas. And even when I’m not physically present making the work, like I was during the six-month performance at PS1, I still think of the environments and objects I create as having a performative sensibility and the viewers moving through the work as part of that performance.

Do you think the Emergency Room gives you a special relationship to time, given that time and managing it correctly is crucial to the question of whether someone will live or die in the Emergency Room? I mean, do you think that your relationship to time in the Emergency Room is carried over into your art practice?

That’s a good question, and the answer to that may seem strange. When people come to the Emergency Room because they’ve been shot, hit by a car, or they are having a heart attack, I have to process information very quickly. I have to be able to forecast what is going to happen in the future and be able to pull those predictions into the present. When I’m in that space my experience is that time slows way down. I have heard about this experience of the subjectivity of time in interviews with athletes—you know, like baseball pitchers or other professionals whose performances depend on fractions of a second. What is interesting to me about this feeling is that I have the sense that I can maintain my own speed and everything else around me stops moving. It opens space to move and think. I become very calm. So in this way it made sense to make a photograph of the trauma room because I want the viewer, when they are experiencing my work, to be transported to this slowed down time space.

One thing we should make clear is that this photo of the Emergency Room and the installation of the transparent doors both have the same title: *Best of All Possible Worlds*. Why is that?

The installation at Socrates was a translation of the Emergency Room photograph. The overhead lights in that room have always reminded me
of how people describe near death experiences. I wanted to work with light as a primary material and as a way to represent a passage between states. And I wanted to make the light something that could be experienced physically. I think the transparent doors capture that. At certain times of day they glow, and at night they reflect the lights of the city across the water.

**TH** When I was standing inside this transparent apartment it made me think about how we can fall in love with domestic spaces in films. I love moments in films where maybe no one is talking and the camera is paying attention to the geometry of a room, the light, and the physical feeling of being in the room. Your installation is like a private psychological space that is projected outward towards the public physical space of the city across the river. It made me think about the private lives we live in the city and how we compare them to other people’s lives in films. I don’t know if that is what you were thinking about, but I love the idea of the coexistence of private space and public space behind the transparent doors.

**AG** When you have a door in front of you in a hospital it is a barrier between you and somebody that you love that is undergoing surgery. So a door is a special separation between life and death, sometimes between reality and miracles, so is curious to think that you made a work that is a transparent door.

**SM** It is great that you see that, because I was hoping that the space in and among the doors would feel like those empty beds in the photograph. In the performance of gold-leafing the boiler at PS1, the slowness with which I worked encouraged people to slow down when they were there. They read my body language and they adjusted their bodies accordingly. With the installation at Socrates, and in the version I’m making for the Aldrich Museum this spring I wanted to see if I could produce or suggest slowness even if I wasn’t there, using objects instead of my body.

**AG** When I was watching you gold leaf the boiler I was reminded of miners. Miners go underground to find gold, and you were making gold out of the heart of the architecture of that building. Was it the space itself that made you think of gold, or was gold a material you were working with before you saw the space?

**SM** It began by thinking about skin. I had been experimenting with “re-skinning” objects in
different ways. I started working with gold leaf to transform discarded objects. I kept one of the objects, a crumpled can, in my studio. When I was brought to PS1 and saw the space of the installation, I hadn’t yet decided what I was going to make, but I knew that I didn’t want to ignore the majesty of the boiler and try to squeeze an installation in around it. It was this imposing thing sitting in the dark basement. I wanted to work in sync with the physical and historical power that the boiler already had. So I began to think about how I could reclaim this object. I started the PS1 installation by sand-blasting the whole room down, not just the boiler but the walls, everything. Most people don’t know about that part of the process. It was like exfoliating layers—many decades of dead skin in the form of rust and dirt. Then I re-skinned the boiler with gold leaf. Before I picked up each little square of gold leaf with my brush I would touch the brush to the skin of my neck, which was coated with mineral oil. The sweat and oil helped the gold stick to the surface of the boiler.

AG Since I arrived I’ve been looking at those strange rubber arms hanging behind you. I am wondering if they are made from a mold of your arms?
SM That sculpture is about turning things inside out. It’s based on a story by Flannery O’Connor called *Geranium*, a story about a man being consumed from the inside out by his own hatred. I put silicon on my arms and let it dry and then peeled it off inside out, so the arms are reversed. And that’s why there are arm hairs in the silicon itself. It has become more apparent to me within my recent work how much I think about skin. Those bricks on the wall are made of skin dust—horse skin dust—mixed with water and pressed into bricks. When I construct things with the bricks they expand and contract with temperature and moisture, and so the sculptures are always moving.

TH I’m curious… One thing I’ve assumed about your practice is that you—unlike most other artists—have this extremely physical and internal knowledge of how bodies work and look from the inside out. I mean, you work with bodies as material in the hospital. You are stitching them together, going inside them, wrapping them. Given that you work with materials as a kind of a primary engine for different projects, I wonder how your sense of the body appears in your work? How do you think the fact that you know how to puncture a hole in the throat to let someone breathe effects how you work with materials?
SM  That’s a good point, and I think the way this affects me is that nothing is taboo, nothing is sacred. A lot of doctors and nurses (and maybe also prostitutes) have an unromantic idea of the body because we work with the body routinely. The human body is a bunch of sacks inside a sack. I started to think about bodies this way, even when I was younger. My father, who is a urologic surgeon, would dissect chickens at the dinner table giving my sisters and me anatomical tours. I remember him demonstrating a sex change operation on a piece of asparagus. I think that this absence of taboo makes me unafraid to work with materials that I haven’t used before. I don’t ask myself whether a material should be used in a certain way. I just experiment with it and see if it works. If someone says oh that material is not made to be used that way, I just think why the fuck not? For example, the machine used for making the vacuum formed casts is like a re-animator, something you would find in Frankenstein’s laboratory. Six ovens with glowing coils heated to 1000 degrees melt the plastic, which is quickly lowered down onto the molds. A vacuum underneath the mold sucks the hot plastic down with incredible force. The result is something I can never completely control, which allows the work to take on its own unpredictable life.

TH  I’m thinking about re-animation, and the idea of a science experiment that gets out of your control. It is interesting to see the connection to science fiction, Mary Shelley, and early Romantic ideas of the monster. The basement at PS1 is the laboratory, and the furnace is the monster! Maybe the idea of the monster coming to life is in some way a manifestation of cultural uneasiness over the power doctors have over life and death…

SM  I see that. The fact that doctors negotiate the line between life and death lead to a certain mythology about what a doctor is supposed to be.
concerned with healing people. Well, some of the work I make is actually kind of dark. I’m interested in exploring and exposing the underbelly. One of the reasons why I like being a doctor is that I am invited to see that part of life, to see the underside that most people don’t get to see.

**TH** Tell us more about what you mean by the word “underside”.

By underside I mean the things people usually don’t expose, you know, whether it’s very personal information that I am told only because I’m the doctor, or it’s a situation where I need to physically put my hands inside someone’s body. So that interests me, not in a macabre or flippant way, but in the sense of having the privilege of hearing and holding a secret. Part of the mythology about physicians is that somehow we’re not supposed to be personally interested in those secrets.

**AG** You mentioned that saliva is part of the material for the installation at PS1. I like that the location of the material is your secret, it’s invisible. I imagine you licking or kissing the architecture. So this form in the basement becomes an extension of your body, a portrait of you, though no one would know.

That mythology plays out in literature, but also in the everyday experience of working with people in the hospital. The doctor is supposed to be an entirely benevolent person who is exclusively
Now that you mention it, the furnace is actually a double boiler and the main thing that I was attracted to when I first walked into the basement was the duality of the two boilers, side by side, with a split down the middle. Also, if you look at the image of the trauma room, on first glance it appears almost like a symmetrical mirror image, two beds, two lights, although if you look closer you can see the symmetry is imperfect.

I think when you are working with the symmetry of the body, everything you use becomes related or based in some way on that symmetry. Even the space around the body reflects that symmetry. Human civilization—our concept of beauty, our architecture, our tools, the tools we have developed to practice medicine—has developed around the symmetry of the body. Visual symmetry is dualistic, but when it ripples outward like that it becomes non-dualistic. In your work, it seems to me, you are on the bed, you are around the bed, you are touching the body that’s dying and you are also dying. When I look at your work I see your intention to be both inside and outside, the person who is fixing and being fixed, healing and being healed.
WORKS

By Saul Melman

page 08
Best Of All Possible Worlds (2009)
Pigment Print
36 × 36 in.

page 14
Best Of All Possible Worlds (2011)
Mixed Media
L 55 × W 20 × H 9 ½ ft.
Site Specific Installation
Socrates Sculpture Park, Queens New York
Photograph by Dr. Arnold Melman

page 18 / 20
Central Governor (2010)
Gold Leaf, Salt and Saliva
Site Specific Performance and Installation
Detail and Performance Still
MoMA PS1 Queens, New York
Long-Term Installation
Photographs by Tim Hyde

page 22
Geranium (2008)
Burnt wood, steel castors, bone marrow, horse skin, waxed thread, silicone and human hair
H 8 ½ × W 3 ½ ft.

page 25
Figura 3 (2012)
Silk Screen Print On Paper
9 × 12 in.

ADDITIONAL IMAGES

I. front cover
The science of common things (1859)
David Ames Wells - Ivison, Phinney, Blakeman
Illustration

II. page 06
Untitled (1994)
Saul Melman
Fuji-Color Photograph
4 × 6 in.
Experimental distillation trials of indigenous medicinal plant extracts
Awa-Kwaiker Bio-Athnrologc Rainforest Preserve, Esmeraldas Province, Ecuador

III. page 11
Untitled/Self Portrait (2005)
Saul Melman
Digital Photograph
4 x 6 in.
Advertising illustration on side of delivery truck for professional uniform cleaning service taken while walking in NYC

IV. page 26 / back cover
Protective Clothing of Doctors and Others Who Visit Plague-Houses (c 1720)
Illustration from Der Pestarzt Dr. François Chicoineau
Colored copper engraving
10 ¾ × 7 in.
Germanisches Nationalmuseum, Nuremberg

V. page 28
A man midwife (1793)
Isaac Cruikshank
Hand Colored Etching
10 × 8 in.
Clements C. Fry Collection, Cushing - Whitney Medical Library, Yale University, New Haven

VI. back cover
Hexagon (2012)
Tim Hyde & Andrea Galvani
72 × 62 in.
MDF (Table top and base)

VII. back cover
Heptagon (2012)
Tim Hyde & Andrea Galvani
78 × 80 in.
MDF (Table top and base)
Tim Hyde was born in Boston, grew up in Vermont, and lives and works in New York City. Hyde works interchangeably with photography, video, and drawing to interrogate the perceptual experience of space, time and architecture.

timhyde.info

Andrea Galvani was born in Verona, Italy and lives in Brooklyn, NY. Drawing from other disciplines and often assuming scientific methodologies, his conceptual research informs his use of photography, video, drawing, and installation.

andreagalvani.com

SPECIAL THANKS TO
Eric Gleason
Jennifer Hoffman-Williamson
Saul Melman
Sam Morse
Nancy Nichols
Adam Thabo