

Street Gallery (Pushing Perception) - Transcript

Pushing Perception can be found on the ground floor of MOD. There is a 20metre ramp with handrails which brings you to the Street Gallery.

The QR code is located the start of the ramp at the Street Gallery entrance.

Content Warning: This exhibit explores perceptions of pain and may cause discomfort for some people. Parental guidance is recommended.

This exhibit emits an electric shock which may interfere with implanted electrical devices such as pacemakers, all types of defibrillators, deep brain or spinal cord stimulators.

This exhibit uses lighting that may trigger a photosensitive reaction.

Do not use if you have and implanted electrical device.

Do not use if you are pregnant.

Do not enter if you experience epilepsy, migraines or other photosensitive conditions.

If you feel unwell, ask our team for assistance.

All exhibits in the Street Gallery have an interactive component and if you would like assistance, please ask for a MODerator.

At the base of the ramp, a short black wall hosts the white wall text: ***Want to push your limits?***

Next to it, projected digital media images of sharp and spiky 3D particles scroll.

A large, portrait-oriented screen with a coloured photo image of a human using an interactive touch screen device: text reads: *Please rate your pain.* On the touchscreen device, there are five boxes rated 1 – 5 in black and white, within each box is a block generated human in gesture, for example; Box 1 is a block generated human with a thumbs up gesture – underneath text reads: *thumbs up.* Box 5 is the block generated human in a bed, text reads: *Gah, make it stop!*

To the right of the text is a red stop sign with white text which reads: *HOME.*

Underneath the image text reads: *Every day we get out of bed and we make decisions. We decide how risky things are based on our perception of the activity. And we decide how we feel based on the pain we are feeling.*

We trust our brains to tell us if things are safe, or if something hurts. But perhaps all is not as it seems. How easily fooled are we?

Credits[MR2]

- Professor Lorimer Mosely **RESEARCH**

- Dr Tasha Stanton **RESEARCH**
- Dr Hannah Keage **RESEARCH**
- Associate Professor Tobias Loetscher **RESEARCH** [phonetic check]
- Ian Gwilt **RESEARCH**
- Adam Droguemuller **RESEARCH** [phonetic check]
- Aaron Davis **RESEARCH**
- Josephine Mick **NPY WOMEN'S COUNCIL**
- Pantjiti Lewis **NPY WOMEN'S COUNCIL** [phonetic check] [MR3] |
- Alison Carroll **NPY WOMEN'S COUNCIL**
- Uti Kulintjaku Collective **NPY WOMEN'S COUNCIL** [phonetic check] [MR4] |
- Exhibition Studios **GALLERY DESIGN AND BUILD**

ABOUT Pushing Perception

How good are we at figuring out what's risky?

If you ask a scientist what a risk is, they might say its “hazard times exposure equals consequence.” But, for the typical person a risk is the chance of something bad happening. What is bad, and how bad it is, is called risk perception. It's something that we do every day. Lots of different things might affect how risky we perceive an activity to be. For example, you are less likely to perceive an activity as risky if you have done it before.

UniSA researchers Professor Hannah Keage and Professor Tobias Loetscher found people could accurately judge which activities were riskier than others. For example, participants knew that climbing Mt Everest is riskier than anaesthetic use. However, relative difference was not as well understood by people. Climbing Mt Everest and skydiving might both seem risky, but climbing Mt Everest is so much more likely to go wrong, it's 1,200 times more risky than skydiving.

How do the body and mind work together to make us feel pain?

Pain is a complex experience involving biological, psychological and social influences. Factors like expectation, belief, anxiety and attention can greatly impact how much pain is felt. For example, focusing your attention on pain can actually make it worse sometimes. Even attending too hard to some bodily sensations can actually make them painful. Conversely, distraction and re-directing your attention can be very good at reducing pain.

Anxiety and fear can also increase your level of pain. If an experience is framed in ways that are non-threatening, your limbic system, which helps to process our emotions, can reduce the amount of pain experienced.

On the other hand, if your brain is receiving sights and sounds that suggest you're in danger, your pain will be heightened. This response to pain is highly sophisticated. It has evolved over millions of years to keep you safe.

The placebo effect is one of the best ways to show how belief and expectation can influence pain. Studies have shown that people experience pain relief after taking medication, when really they took a sugar pill. The reduction in pain is due to their expectation that the pill will reduce their pain, and not the action of the pill itself. The same is true for the nocebo effect. This is where people experience pain due only to their expectation that they will feel pain.

How is pain culturally dependent?

Now we know that pain is highly dependent on context, how does culture play a part in this?

In the Ngaanyatjarra, Pitjantjatjara and Yankunytjatjara (NPY) Lands, Ngangkari [MR5] [MR6] [phonetic check] healers have worked for thousands of years, looking after people's physical and emotional health. Ngangkari use their hands to work on their patients. They align body and spirit to remove pain or obstruction in the body.

This healthcare is gaining momentum in places otherwise dominated with Western methods. Ngangkari are now working at the Royal Adelaide Hospital and rural clinics. Their work is becoming recognised as having an important role in wellness for all patients.

GALLERY OVERVIEW

You will need to turn to the right from the end of the ramp, to face the Street gallery's long, thin room, which is approximately [check size] X [check size] wide.

Two black walls at a right angle meet ceiling to floor windows [MR7] between large concrete pylons with a black slate floor.

The large ceiling to floor windows fill the Street gallery with natural light. A suspended cluster of 40cm reflective white triangles, catch the natural sunlight, as they dangle from the heavily scaffolded ceiling.

The Street Gallery holds six featured interactive exhibits, a few on plinths and two experiences utilise chairs.

In the middle of the gallery room, two large, modern square plastic chairs face each other, approximately 12 metre apart. This interactive exhibit challenges your perception of pain (Please note: content warning upon entrance).

To their right, is a half half-moon leather visitor couch – at the end of the gallery are another 3 interactive exhibits on plinths.

Such as, resting on a black plinth, 5 tactile 3D models of pain are displayed. White text reads: *Talking about pain can be, well, painful. It can also be hard to describe to begin with. These 3D pain models are created by young adults to explore*

their own pain makeup and are used to communicate this with others. Boring day, Agonising, Routine day, Very boring, Falling off my bike, Fuzzy.

White tape tracks along the floor from this plinth leading to an interactive touch screen station where you can create your own bespoke computer generation 3D of pain.

At the far back of the Street Gallery is the final exhibit, where you are invited to sit in a chair and experience depth perception. (is this correct[MR8] ?)

Next to the large North Terrace windows, two 5 metre grey upholstered pod chairs invite you to sit and experience an audio sound story about Nangkari. (question: will the scrolling text be audio described to make it accessible?)

There is a long bench seat for rest to the right of the entrance[MR9] . In front of this bench seat is exhibit A, which will be audio described.

EXHIBIT A - AD

A large black rectangular box of about 5 metres long and 3.5metres [MR10] height, sits on metal cannisters.

On the side of the box, is white text, it reads: *How risky is too risky?*

18 handles adorn the top of the box (two lines of 9 handles), extend left to right around the perimeter of the box.

On a black [what do we call this[MR11] ?] white text on top of the box reads: *A micromort (from micro -and mortality is a unit of risk defined as one-in-a-million chance of death we use them to measure the riskiness of day-to-day activities. Guess how risky these activities are:*

The exhibition invites you to interact with the handles – if you pull and extend the handle, it will reveal a red cylinder displaying the risk micromort calculation[MR12] .

In white text, each risky activity is represented by a handle – they are as follows: (from left to right around on the box top).

Handle	Reveal
Scuba diving	5
Skydiving	10
Anaesthesia	10

Commercial flight 12,070km	1
Coal Mining	430
Vaginal birth	120
Kangaroo encounter	Nothing stated – zero risk?
C-section	170
Running a marathon	7
What's the riskiest?	12,000
Driving 535km	1
Base Jumping	430
Getting out of bed age 45	6
Riding a motorbike 11km	1
Getting out of bed age 90	463
Commercial fishing	1020
Rock climbing (per climb)	3
Working any job for a year	6

When you pull the riskiest activity handle, a very long retractable plastic cord, extends for approximately 4 metres across the gallery space. Extending from the handle is a red line of tape, which is stuck to the side of the box – it meets the floor and travels across the floor to a red, circular, graphic splotch on the floor, which reads: Climb Mount Everest, 12,000 micromorts.

This gallery invites visitors to explore and interact with all the other freestanding exhibits in the room.

This concludes the audio description track for [“Pushing Perception” in the Street Gallery](#), by Access2Arts for MOD. You will find the next exhibition on level one. [Exit via the same ramp we arrived by. Head over to the other side of the building for the stairs or lift to level 1.](#)