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Dead Collections
Exploring Chronic Illness in Academic Libraries through the Metaphor of Vampires
« Collections mortes »
Exploration de la maladie chronique dans les bibliothèques universitaires grâce à la métaphore des vampires

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See table of contents

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Article abstract

Isaac Fellman’s Dead Collections: A Novel (2022) portrays a fictional archivist named Sol who experiences chronic illness in the form of vampirism. While he has many symptoms including cold skin and reliance on weekly blood transfusions, it is his life-threatening photophobia (aversion to sunlight) that becomes a serious impediment to commuting to and from work. While Sol and his vampirism are clearly fictional, the novel accurately depicts working in libraries with a chronic illness. This article compares and connects Dead Collections to the growing body of literature on library workers with disabilities and chronic illness, particularly articles that give voice to those with relevant lived experiences. Highlights of this discussion include the topics of non-apparent illnesses, disclosure, passing, reactions to disability among coworkers and supervisors, and the promises and disappointments of the Americans with Disabilities Act.

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Abstract / Résumé

Isaac Fellman's *Dead Collections: A Novel* (2022) portrays a fictional archivist named Sol who experiences chronic illness in the form of vampirism. While he has many symptoms including cold skin and reliance on weekly blood transfusions, it is his life-threatening photophobia (aversion to sunlight) that becomes a serious impediment to commuting to and from work. While Sol and his vampirism are clearly fictional, the novel accurately depicts working in libraries with a chronic illness. This article compares and connects *Dead Collections* to the growing body of literature on library workers with disabilities and chronic illness, particularly articles that give voice to those with relevant lived experiences. Highlights of this discussion include the topics of non-apparent illnesses, disclosure, passing, reactions to disability among coworkers and supervisors, and the promises and disappointments of the Americans with Disabilities Act.

Le roman Dead Collections: A Novel (2022) d'Isaac Fellman met en scène un archiviste fictif, Sol, qui soufre d'une maladie chronique sous la forme du vampirisme. Quoiqu'il présente plusieurs symptômes y compris la peau froide et le besoin de transfusions sanguines hebdomadaires, sa photophobie (aversion au soleil) menace sa vie et devient un sérieux obstacle lors de ses déplacements domicile-travail. Malgré le fait que Sol et son vampirisme soient clairement fictifs, le roman décrit avec précision ce que constitue travailler dans une bibliothèque avec une maladie chronique. Cet article compare et fait un lien entre Dead Collections et la littérature croissante portant sur les employés des bibliothèques ayant un handicap ou une maladie chronique, surtout les articles qui donnent une voix à ceux vivant cette réalité. Les faits saillants de ces discussions comprennent les sujets de la non-apparence de maladie, la divulgation, les réactions des collègues face à un handicap et les promesses et déceptions de la Americans with Disabilities Act.

Keywords / Mots-clés

disabilities, chronic illness, Americans with Disabilities Act; handicaps, maladie chronique, Americans with Disabilities Act

Introduction

Vampires have long been a metaphor for power. A century and half ago, Karl Marx used this metaphor in *Das Kapital* to describe how capital is dead labour that “only lives by sucking living labour” (Marx, 1887). In the past few decades, fiction writers have used vampires to explore social issues such as race (Gomez’s *Gilda Stories*, 1991), colonialism (Del Toro’s *Cronos*, 1994 and Canas’s *Vampires of El Norte*, 2023), medical capitalism (Little Badger’s *Elatsoe*, 2020), religious extremism (Flanagan’s *Midnight Mass*, 2021), and environmental issues (Wagner’s *Shot of Gin*, 2023). Isaac Fellman’s *Dead Collections: A Novel* joined this list in 2022 with its exploration of working with a disability. In this novel, vampirism is medicalized, clearly depicted as a chronic illness and disability. The present article will explore some themes from the novel regarding working with chronic illnesses or disabilities, tying the novel’s portrayal to disability scholarship within academic libraries.

Dead Collections tells the story of Sol Katz, a transgender archivist in San Francisco. Several years before the novel takes place, Sol cut himself while processing a new addition to his archives and became fatally ill with tetanus. While Sol was unconscious and dying, doctors infected him with the vampire virus to save his life. When he regained consciousness, he found himself with a highly stigmatized chronic illness, writing, “I don’t believe that anyone would give a damn about keeping vampires alive, except that they don’t need to spend good blood on us” (Fellman, 2022, pp. 10–11). His condition makes him deathly allergic to even the smallest amount of sunlight, dependent on weekly blood transfusions not covered by traditional health insurance, and unable to complete his physical gender transformation. Due to the impairments and the stigma of vampirism, vampires in this novel have very short life expectancies. Sol is at first unable to connect with other vampires, many of whom were turned with the same controversial “Milwaukee protocol” in response to otherwise fatal infections (Fellman, 2022, p. 53). While Sol does not need to sleep during the day, the sun allergy is so severe that Sol cannot be outside or anywhere near doors or windows when there is *any* sunlight present, making him unable to commute to and from work. As his archive is in a basement, he has solved his commuting problem by living at work for several years without anyone noticing. However, a new romance exposes the severity of his impairments and he is eventually fired and unable to find other paid work.

Working with Chronic Illness

Unlike acute diseases like a cold or the flu that one recovers from after a few days or weeks, chronic illnesses (or chronic diseases) are medical conditions that last more than a year (CDC, 2022). While most chronic illnesses can be medically managed, most cannot be cured. Examples of common chronic illnesses include diabetes, heart disease, asthma, autoimmune disorders, irritable bowel syndrome, and inflammatory bowel disease. Additionally, some may consider their neurodivergence and long-lasting mental health conditions to be chronic illnesses or disabilities. Chronic illnesses and their treatments can affect work in a myriad of ways, including time off for treatment or recovery, fluctuating energy levels, sensitivities to the physical workplace environment, and needing regular opportunities to rest, eat, take medication, or go to the bathroom.

Vampires are usually known for their strength, yet *Dead Collections* medicalizes vampirism. Sol experiences many physical and psychological symptoms from his condition, and while he is immune to the germs that infect those around him, he never actually feels well. The symptom that most severely impairs his activities is his extraordinary sensitivity to sunlight, which is particularly brutal for vampire literature. His sun sensitivity is so severe that he cannot go outside or near doors or windows with even the smallest amount of sunlight in the sky. This makes it impossible for him to commute to and from work at standard business hours without dying, particularly given the lack of affordable housing in proximity to his place of work. Twice during the novel, his budding romantic relationship leads him to miss work when he is unexpectedly away from his office near dawn. Throughout the novel, he is repeatedly told that it is *his* responsibility to solve his personal problems, although when he does find solutions, those who have power over him do not like them.

Sol's situation is clearly an exploration between the medical and social views of disability. In the prevailing medical model, and from the perspective of his human resources representative and cantankerous coworker, Sol's body is problematic and it is solely his responsibility to overcome this without inconveniencing his employer or coworkers. In contrast, the social view of disability says that it is not Sol's body that is the problem but rather the barriers in his environment that do not allow him to thrive. He is perfectly capable of working and his only major impediment to work is his inability to commute at socially acceptable hours. Society says that he must do the impossible and commute to work in fatal conditions if he wants to earn a paycheck. At the end of the novel, Sol meets a retired vampire archivist whose former employer has provided her with an underground apartment with an accessible entry to the archives, demonstrating that there are other solutions for inclusion via social-justice-oriented approaches to disability.

Until recently, there were very few publications in the library and information science (LIS) literature that focused on disabled or chronically ill library workers. Instead, the LIS literature on disability focused on library *users* with disabilities. However, there have been a number of publications on disabled librarians in the past few years, with many of the authors disclosing their own chronic health issues. Several authors have conducted surveys and interviews of chronically ill librarians with conditions including diabetes, connective tissue disorders, sickle cell anemia, and various developmental and mental health conditions (Burns & Green, 2019; Manwiller et al., 2023; Oud, 2018 and 2019; Rathbun-Grubb, 2021 and 2024). While the LIS research focuses on librarians, I will refer to “library workers” in this article as this applies to all people who work in libraries, perhaps particularly those in lower-paid positions with less autonomy.

Americans with Disabilities Act

Prottas (2012), in a scholarly article titled “The Vampire in the Next Cubicle,” applied the Americans with Disabilities Act (ADA) to managing workers with vampirism.[1] The author wrote of vampirism as if it were an actual medical condition and concluded that

> Managers who have lived in fear of the undead mercilessly sucking their blood may be surprised to find the conclusion that the law might require them to welcome vampires into their workplaces and provide accommodations for them to be able to be self-sufficient and contribute to their families and society (pp. 88–89).

While the author of this article is either overly optimistic about the protections of the ADA for disabled workers or completely facetious, the article provides interesting information on how the ADA *should* protect workers, with particular attention to the stereotypical impairments of vampirism.

According to Prottas, considerations for protections under the ADA would begin after the worker’s disclosure of disability by analyzing whether a worker’s medical condition would qualify as a disability according to the ADA. The ADA defines disability as “a physical or mental impairment that substantially limits one or more major life activities.” He acknowledged that vampires’ sunlight intolerance would “substantially restrict at least one major life activity” (p. 83) and reported that “even less severe cases of ocular, rather than dermal, photophobia have been found to be covered by the ADA” (p. 83). This means that Sol’s health condition meets the definition of disability under the ADA, whether or not he identifies as disabled. The employee also must be a “qualified employee,” meaning they can do the essential tasks of the job given appropriate accommodations. All indications are that Sol is good at his job, at least outside of management duties, which are only temporary.

Once an employee is determined to meet the disability criteria and can do the tasks of the job, the next consideration is “reasonable accommodations.” Employers are required to provide accommodations for qualified employees with disabilities so that they can perform the essential functions of their job. According to Prottas, requested accommodations for a vampire could include blacking out windows, protective clothing for brief duties outside, underground parking, or changes in scheduling, if those are available at a particular employer. However, employers are exempt from providing

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[1] The novel, the author of this article, and many of the library articles cited are written in the United States where the Americans with Disabilities Act is the most important piece of legislation protecting people with disabilities. Readers in other countries should locate their equivalent legislation.

accommodations if such provision would cause the employer “undue hardship.” There are no clear guidelines on what constitutes undue hardship, although in general it is anything that is overly expensive or difficult for the employer, taking the employer’s size and overall available resources into consideration. Prottas finds that there are enough reasonable accommodations for the typical symptoms of vampirism that employers “may have to hire a vampire” (2012, p. 88). While it is true that liability and building codes must be considered through an accessibility lens, the fact that Sol has been living in his office for years without anyone noticing makes it difficult for his employer to claim that allowing his living situation to continue would cause them undue hardship.

Like “Vampires in the Next Cubicle,” *Dead Collections* explores employees’ theoretical rights under the ADA, although from the perspective of the disabled worker rather than the manager, and with a much more realistic view of how the ADA is applied in practice. The novel’s treatment of the employee’s experience of working with chronic illness aligns better with disability scholarship and testimonies than that of the Prottas article. This is particularly prominent in Sol’s periodic conversations with the archive’s part-time human resources specialist, Darya. Sol explicitly states that he likes Darya because he tends to “like young women who have to struggle to be taken seriously” (Fellman, 2022, p. 69). In other words, he tends to have sympathy for people who are in marginalized and oppressed groups, even when those same people marginalize and oppress him.

Darya comes across as traditionally *nice* and *professional*. Yet she is undeniably gaslighting, invalidating, and infantilizing Sol, and her veneer of niceness and professionalism only superficially veils her belief that conversations with him are unworthy of her time. She is annoyed that Sol keeps repeating himself about his needs, while she also gives every indication that she is not actually listening. She insists that she has listened to Sol’s repeated reminders that he cannot go out in the sun, but that he needs to live someplace else no matter how impossibly impractical that is. She then tells him to take a walk to cool down, and he must remind her that doing what she is suggesting will kill him. She makes it very clear that other peoples’ discomfort about Sol’s disability matters, while Sol’s disabled life does not. Finally, she interrupts Sol mid-sentence to remind him that their archive is exempt from the ADA because it is such a small company and of all that the management has done so far (which in reality is nothing) is “because it’s the decent thing to do” (Fellman, 2022, p. 72). He tries to call her out on her gaslighting by asking her to articulate what they have done to accommodate him, but she responds by abruptly shutting down the conversation. As Schomberg and Highby (2020) pointed out, “U. S. court decisions are reached with the expectation that employees have the same negotiation power that employers have, and that the employers have the same disability knowledge as their disabled employees” (p. 37). This conversation between Darya and Sol shows the actual dynamics, where Sol is knowledgeable about his theoretical rights as a disabled person, but Darya has all of the power in their relationship and has no need to listen to him.

Sol’s primary impairment that limits his ability to work is his inability to get to and from work. Scholarship on whether the ADA can require commute-related accommodations is inconclusive. According to Hunter et al. (2021), the consensus is it is *not* protected as “commuting is not part of the employee’s job responsibilities or work environment” (p.

281), meaning an employee's commute is not the employer's responsibility. Batiste (n. d.) argued that employers *could* be required to change an employee's schedule to when they can get transportation, move their work location closer to their home if there are multiple work sites, or allow for telework. The availability of these accommodations depends on the employer and whether they have multiple shifts or locations. Like Sol's archive, most academic library jobs do not.

Librarian Katie Quirin Manwiller has spoken about the physical hardships of commuting due to her chronic health condition (Manwiller et al., 2022). Because of her disability, she often works from her bed when working remotely to manage pain and fatigue. In her attempts to get a reasonable accommodation to work from home more often, her human resources representative offered to set up a hospital bed in her office or a more private part of the library if she would work on site: "somehow, basically creating a bedroom for me in the physical library was being considered as more reasonable than allowing me to work from home" (Manwiller et al., 2022, 17:00). In other words, her human resources department wanted something more like Sol's situation. Similarly, Ettarh (2021a) wrote about her and a colleague sleeping in their offices due to spending so much time at work. I do not read her statement as an exaggeration. In another post about academic libraries' resistance to allowing remote work as a reasonable accommodation, Ettarh (2021b) wrote, "Librarianship has a really hard time with letting workers leave the building." Of course, she meant this literally during business hours and figuratively in the middle of the night. Employers are frequently happy to take advantage of employees who skew their work-life boundaries in the employer's favor, although few employers would be happy if their employees literally moved into their offices.

Sol does not consider telework, and that does not seem to be an option as he works with physical archival materials and in-person archive users. He *wants* to work on-site. His desire for the opposite of telework is interesting given the widespread effects of the COVID-19 pandemic on remote work. When remote work was the norm for many workplaces during the early days of the pandemic, many library workers proved they could do their work remotely—inequalities in *who* could work remotely notwithstanding. As health-privileged people have decided the COVID-19 threat is over despite evidence to the contrary (Davidson, 2024), library workers have been called back to in-person workplaces where very few others are masked. Workers who remain COVID-cautious, including those with chronic health issues that increase their health risks from virus exposure, have largely been forced to choose between working in unsafe environments or losing their income and health insurance. As for Sol, this is not much of a choice.

In a previous publication (Broussard, 2022), I wrote about my developing disabled identity as the relationship between the world and my body changed. Manwiller and Pionke (2022) also wrote about their concerns regarding COVID exposure at work. As most people with disabilities are at an increased risk for long-term adverse effects of COVID, "many of us had to return to work each day fearing for our lives" (p. 1080). These are not exaggerated or unreasonable fears. Farkas (2024) wrote about her experiences with negative health outcomes after an acute COVID-19 infection and Folk (2023) shared the results of a survey of 32 academic library workers with long COVID where many participants report working with significant fatigue, brain fog, and physical limitations such as breathing issues.

Nearly half of Rathbun-Grubb's (2024) study participants felt unsafe returning to in-person work when they were called to do so. Many were disappointed to return to in-person work as they found managing their chronic conditions was much easier from home. One wrote of the isolation they felt as their colleagues moved on from the pandemic that was still very much of concern to them. Some spoke of having accommodations or official policies for remote work that they were not allowed to use. One wrote, "despite the ongoing pandemic, the employer now requires a doctor's visit and formal FMLA [Family and Medical Leave Act] paperwork for any illness lasting more than two days" (Rathbun-Grubb, 2024, p. 45). All employees should be concerned about policies that force disclosure of health issues, including those caused by exposure to viruses at work. Additionally, completing FMLA paperwork for even routine acute illnesses, including those contracted at work, causes a significant burden on those recovering from the illness.

As shown by this brief discussion on reasonable accommodations regarding commuting and remote work, while non-disabled workers may think the ADA protects disabled workers against discrimination, it does not provide nearly enough protection. Rathbun-Grubb's (2021) participants frequently complained of red tape, lack of policies, long waits, breaches of privacy, and many other problems in the ADA accommodations process. Both Rathbun-Grubb (2021) and Oud (2018) found participants were hesitant to ask for accommodations due to the risk of negative repercussions. Only 12% of Oud's participants said they did not ask for accommodations because they did not need them. Many library workers (either authors or study participants) reported negative consequences for disclosing or asking for accommodations.

The ADA is vague and nearly all ambiguity (93%) is resolved by courts in favour of the employer (Oud, 2019). As George (2020) pointed out, definitions of disability and reasonable accommodations "can be expanded or contracted in order to police protections and economic resources available to people with disabilities" (p. 98). Manwiller et al. (2022) stated that "the system created to provide inclusion for disabled workers is inherently flawed" (21:05) and explain how being ADA-compliant is far from being an equitable or accessible environment for library workers or visitors. Schomberg and Highby (2020) cited studies that show employment rates of workers with disabilities have actually dropped significantly since the ADA was passed over three decades ago. Outside of libraries, social justice advocate Marta Russell (2019) referred to the ADA as "a free-market civil rights bill because the business owner's right to property (wealth) is weighted more heavily than the disabled individual's 'right' to accommodation on the job, and hence, to employment" (p. 70).

Disclosure and Passing

Sol's health condition is not apparent to others—often called an "invisible disability" or "invisible illness." While non-apparent disabilities allow a person to pass as able-bodied and able-minded, it is often quite stressful for the person to decide when and to whom they should disclose their disability. The term also hides the significant sustained effort of camouflaging one's health condition. Many participants in LIS studies of disabled workers have health conditions that are not readily apparent to their supervisors or coworkers, so disclosure and passing are frequently discussed.

The Job Accommodation Network (JAN) defines disclosure as "deciding if, when, and how to share disability-related information with a prospective or current employer" (n.d.). Sol has been open about his diagnosis with human resources and his direct supervisor (who is absent in the story as she is on maternity leave), but not with others due to the stigma of his illness. His budding romantic relationship causes him to miss work several times when he is caught away from work too close to dawn. In other words, trying to have a life outside of work results in his impairments affecting his work in a way that forces a disclosure. No doubt he would miss work much more frequently if he actually commuted between work and an apartment.

Much of the discussion on disclosure in the LIS literature revolves around workers' risk-benefit analysis of deciding when and to whom to disclose their conditions. Oud (2018) found that only half of her disabled participants had fully disclosed their condition to their direct supervisor, with another 30% having partially disclosed. Only 30% said they had disclosed to most of their coworkers. Of the minority of participants who had asked for official accommodations, which requires disclosure, most reported experiencing negative consequences such as microaggressions, minimizing their disability, displays of discomfort regarding their disability, and assumptions they are less productive and capable than their non-disabled peers. Manwiller et al. (2023) found that only 20% of participants had disclosed to their direct supervisor, and only 8% to human resources. They write, "It is difficult for academic librarians and archivists with invisible illnesses and/or disabilities to be open about their experiences in the workplace" (LIS professionals handle disclosing section). Burns and Green (2019) also found many of their participants feared disclosing their mental illnesses in academic library environments.

Disclosure of a non-apparent illness or disability usually involves either trusting the person to which the condition is being disclosed or being forced to disclose when symptoms flare up and affect one's work (Schomberg & Highby, 2020; Bennett, 2021). Deciding or being forced to disclose a non-apparent disability is difficult for everyone, although additional marginalized identities can make disclosure even more risky for some (Manwiller et al., 2023). Additionally, it is harder to disclose disability in dysfunctional work environments, which are unfortunately common in academic libraries (Pionke, 2019).

Another reason for not disclosing one's non-apparent illness is the fear of disbelief, and that any requests for accommodations will be seen as undeserved special treatment. In particular, "invisible, less known or contested conditions are dismissed as fabrication, malingering, and an act of a fundamentally lazy or overwhelmed worker seeking validation" (Pionke, 2019, p. 430). Pionke further explained that the level of employer disbelief rises with the level of invisibility of the chronic illness. A common and painful microaggression to people with chronic illness or other non-apparent disabilities is, "but you don't look ill!" (Nissen, 2021). This phrase is nearly always accompanied by the belief that the person disclosing is not telling the truth, as if ill people always look ill and the able-bodied and able-minded are always able to identify illness. One of Rathbun-Grubb's (2021) participants wrote, "It's often a struggle to get people to understand that just because they can't see the effects doesn't mean that they aren't happening to me" (p. 49).

In the novel's climax, a spiteful coworker sends an email to all of the archive's employees disclosing Sol's medical condition as part of a successful effort to get him fired. Several LIS authors discuss experiences where supervisors or coworkers disclosed their health conditions to others without their consent. In a presentation, Manwiller talked about an otherwise supportive supervisor who would openly worry about Manwiller's health during staff meetings, disclosing her health condition to others who did not already know (Manwiller et al., 2022). Clements (2021) also suspected a supervisor disclosed her mental illness to at least two coworkers. After finally being granted an accommodation, Pionke's (2019) disability was disclosed in a departmental announcement. Schomberg (2018) wrote about a coworker who tried to get her fired because of her diabetes. Non-consensual disclosure of non-apparent chronic illnesses is not rare in academic libraries.

Several LIS authors criticized disclosure as a barrier to accommodations (Manwiller et al., 2022; Moeller, 2019). Official ADA accommodations require disclosure of the disability as the first step of the process. Moeller (2019) pointed out that the official process for ADA accommodations "neglects to acknowledge the risks and complexities associated with disclosing a disability" (p. 463). Given that many who ask for accommodations do not get them (Oud, 2018) or may not actually be able to use them even if approved (Rathbun-Grubb, 2024), widespread hesitancy to disclose stigmatized disabilities in the official accommodations process is more than justified.

The alternative to disclosing one's disability or chronic illness is to "mask" or "pass" as able-bodied and able-minded. We see this in *Dead Collections* when Sol fakes chronic migraines (a less-stigmatized chronic illness) to hide his photosensitivity when his job requires him to go to the loading dock. Additionally, he soaks his hands in hot water before a handshake to hide how cold they naturally are from his vampirism. This is often stressful and requires a lot of advance planning as well as a great deal of energy, a resource frequently in short supply among people with chronic illness. Sol is expressing the effort it takes to pass as healthy when he writes, "It took up all my time to remember who I was supposed to be, this character I overlaid on myself to pretend my life was normal" (Fellman, 2022, p. 23).

LIS authors also discuss the energy requirements and consequences of passing. Moeller (2019) pointed out that in addition to effort and dedication, passing requires "the ability to manipulate others' perceptions of you" (p. 465). While this sounds dishonest, it is a justified reaction to the risks and extreme power imbalances of the parties involved. Passing often involves putting the employer's and coworkers' needs above one's own, such as "coming to work sick, in pain, or without adequate sleep over a long period" (Schomberg & Highby, 2020, p. 40). There is often a great deal of internalized pressure to do extra work to seem “normal,” which can lead to more stress as well as physical and mental illness (Oud, 2018). The consequences of passing are not minor and can affect one’s health, morale, and productivity (Pionke, 2019). Sol writes that his vampirism limited him to half of a life, and what he has is strictly devoted to work. This is echoed in the LIS literature when Pionke (2019) talked about having no energy left for any hobbies or activities outside of work. Many disabled library workers can relate to Pionke when he writes, “It was all I could do to survive, and surviving was all I was doing” (2019, p. 431).

Intersectionality

Dead Collections focuses at least as much on Sol’s gender and sexuality as his health, and to a lesser extent on his Jewish identity. My analysis in this article focuses almost exclusively on his disability. However, any discussion of a marginalized group, such as workers with chronic illnesses, must acknowledge intersectionality. I found Fellman’s treatment of intersectionality intriguing, particularly in Sol’s first conversation with the human resources representative. In this conversation, Sol juggles back and forth between advocating for his rights as a transgender person and his rights under the ADA, and his arguments become muddled in the nuance of which identity is more important in his various situational contexts at work. He is fired primarily because of his disability, although his gender and sexuality play a role in his downfall as lack of accommodations for his sun sensitivity denies him a private space to express his sexuality.

Health conditions are just one facet of the identities chronically ill library workers bring to the workplace. Disability scholarship and advocacy must recognize the effects of other facets of a worker’s identity, particularly those of marginalized groups such as people of colour, the LGBT+ community, and the economically disadvantaged. While most of the LIS literature on library workers with disabilities have been written and published by white people, there are some exceptions, including Smith (2020) and Ettarh (2023). Additionally, some important disability scholars outside of the LIS field are queer and/or people of colour, such as Eli Clare, Alice Wong, Leah Lakshmi Piepzna-Samarasinha, and Audre Lourde. Anyone looking to grow as an advocate of library workers with chronic illness or disabilities should read the works of diverse authors.

Vocational Awe

Sol struggles with vocational awe, a term coined by Ettarh in 2018 for “the set of ideas, values, and assumptions librarians have about themselves and the profession that result in beliefs that libraries as institutions are inherently good and sacred, and therefore beyond critique” (para. 3). This definition describes vocational awe as an abstract concept, but Ettarh’s article truly focuses on the negative real-world effects this concept has on library workers’ lives.

Several LIS authors have connected discussions of disability to vocational awe. George (2020) talked about how the ubiquitous call to do more with less puts institutional needs over workers' well-being, which disproportionately harms workers with disabilities. Schomberg and Highby (2020) wrote that unexamined vocational awe can worsen stigmatization and marginalization of "nonconforming disabled bodies and minds" (p. 150). Moeller (2019) wrote that the concept of vocational awe is "based upon unacknowledged expectations of normative bodies and minds" (p. 461), pushing all others out. Moeller also pointed out that vocational awe, by defining libraries as inherently good and beyond critique, make critiques of libraries as places for disabled workers "unprofessional and unwelcome" (p. 462). In *Dead Collections*, Darya clearly uses (and abuses) her power over Sol to label his efforts at self-advocacy as unprofessional, effectively shutting down any hope he has of keeping his employment.

In a blog post entitled "Vocational awe and fictional depictions of librarians," Hermann (2023) said that librarian characters "are almost universally created by those who haven't been librarians, have worked in libraries, have library degrees, and so on. As such, their views of libraries are informed by popular perceptions" (para. 3). In contrast to the examples of fictional librarians in pop culture discussed by Hermann, *Dead Collections* was written by an archivist. I found the depiction of vocational awe in the novel to be so strong that I wrote to Fellman and asked if Ettarh's article had provided inspiration. He responded that he had read it and "the idea is always in the background," (personal communication, November 18, 2023) but it had not intentionally informed the novel.

Sol passionately loves his work and believes that "any reasonable person would want to be a librarian" (Fellman, 2022, p. 8). His archive is a "sanctuary" in both senses of the word that Ettarh (2018) discussed. The older sense of sanctuary describes a sacred place, and Sol treats it as such in that he is completely *devoted* to the work; it is also a place where supernatural events start to occur, as neglected archival materials mysteriously turn into slime. Additionally, his archive, located underground, is literally a "shelter and refuge" from sunlight (Ettarh, 2018, The Library as a Sacred Place). His work-life balance is so skewed that he literally lives in his office and does work outside of business hours because he has nothing else to do. His dedication to his job explains why he is in the office when his coworkers are arriving to or departing from work, masking that he has been living at work for years. However, as soon as anything besides work becomes important to him, his professional life falls apart. As he is being fired, the human resources representative admits that maybe they never should have asked one person to do as much as he was asked to do.

Furthermore, Sol is a vampire as a direct result of his work. He was processing rusty pins when he was infected with tetanus, leading to use of the vampire protocol to save his life. There is no discussion of worker's compensation being offered and he is ultimately fired because of impairments caused by his vampiric condition that was a direct result of his work. He may love his work enough to continue to do work for this archive and others for free after he is fired, but his work does not love him back. Sadly, Sol never overcomes his vocational awe and is left with nothing at the end of the novel, proving Farkas's (2022) point that vocational awe is *always* harmful.

For the last few decades, there has been a nearly ubiquitous call to do more with less in academic libraries. Academic libraries are at the heart of the academy, yet they cost institutions a great deal of money and do not directly bring in any revenue. For decades, administrators have asked library workers to compensate for the perpetual underfunding by offering more and more of their energy, as if that energy is an unlimited resource. Vocational awe has led many library workers to give that extra energy for the good of the library. This is harmful to everyone, but is disproportionately harmful to workers with chronic illness and disabilities.

Conclusion

Our culture's dominant narratives about chronic illness and disability are overwhelmingly harmful. People with lived experiences of chronic illness deserve a platform for their stories to be heard. A growing number of academic librarians are sharing their stories in professional literature and blogs. This is extraordinarily brave to disclose to their colleagues, current employers, and potential future employers. Given the previously discussed risks of disclosure and the gate-keeping of scholarly literature, the prevalence and range of experiences with disability among library workers is much greater than our professional literature would indicate.

Dead Collections is clearly a work of fiction, and vampirism is a fantastical medical condition with impairments that only marginally resemble the impairments of real chronic illnesses. However, the novel tells a story that has the potential to develop empathy in a way that scholarly literature cannot. I cannot speak to Sol's other identity explorations in *Dead Collections*, but his experience of working with a chronic illness in archives felt highly authentic to me based on my own lived experience. For decades I struggled with mysterious symptoms until I finally received a controversial diagnosis of chronic Lyme disease and other tick-borne coinfections. Six years into treatment that is largely not covered by health insurance, I am much better than I was at my worst, but I am still far from cured.

I have had several conversations with a human resources representative that strongly resembled Sol's conversations with Darya. The first was a complaint about an ableist wellness program. That was an argument I lost. The others revolved around a repeated accommodation request for remote work in 2020 in case of an outbreak on campus as we were one of the few institutions that returned fully in-person that fall. I submitted requests to begin this process in June and again in October and received prompt email responses each time saying my request would be processed. It never was. Approving the requested accommodation was not legally required, but *processing* these requests is required by law. Not only were my requests and questions never addressed by human resources, I heard from a colleague that after I left that job in 2022, largely due to prolonged and unnecessary stress aggravating my chronic health conditions, the human resources representative told several other administrators that I lied about having submitted an accommodation request. I was glad to have saved the email receipts.

Commuting remains a potential issue for me as well. At times in the past, fatigue has made it difficult to work a full workday and brain fog made driving unsafe. At that time, I worked a mile from my home, so the commute was not an issue. I now have a significant commute. While I currently do not struggle with the 10-hour days or the driving, I fear that could happen due to a flare-up of my existing conditions or a future case of long COVID. My needs have been accommodated by my supervisor and coworkers without a formal accommodations process, but I know that there are limits to what my supervisor can approve. I have good reasons to worry about my future employment, even if there is no immediate threat of job loss.

At the end of the novel, Sol, like many disabled workers in the real world, is forced into poverty. Sol is unable to find another job and lives in a light-proof van doing pro-bono archival work. The unemployment rates of people with disabilities are high (Bureau of Labor Statistics, 2024). Most of the disabled librarians writing for the professional literature are employed at the time of writing, but many who provide narratives of their own lived experiences express considerable concern about not being able to work in the future. For example, Farkas (2024) recently wrote a blog post expressing concern about her upcoming return from sabbatical when she will no longer be able to exercise two hours a day to alleviate the symptoms of a connective tissue disorder.

The many worries of chronically ill library workers are not unfounded, as has been shown in the research cited in this article. Library workers do lose their jobs because their disabilities are perceived as incompatible with their employment. Porter (2024) wrote about having to leave a library job she loved because the toxic mold in her library building made her very sick. Ettarh (2021a) deeply lamented the mistreatment of one of her former librarian colleagues, Latanya Jenkins, a black woman who had to continually drag herself to work right after each chemotherapy session due to Temple Library's draconian illness policies that initiated disciplinary meetings for more than two days' absence due to illness. Using an obvious vampire metaphor, Ettarh wrote, "Librarianship bled her dry" (2021a, para. 5).

Who is the actual vampire in *Dead Collections*, and who are the vampires in actual academic libraries? Is it the disabled workers, who want to work and avoid being disruptive (Manwiller et al., 2023)? Or is the actual vampire the capitalist system that lives off the life force of our work? Sol's lack of self-esteem and inability to shake off vocational awe, no matter how much it has harmed him, makes him unable to place the blame for his situation where it rightfully belongs. Structural problems cannot be solved by individual efforts and resilience. As a profession that purports to care about equity and inclusion, we need to do better for our chronically ill colleagues.

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