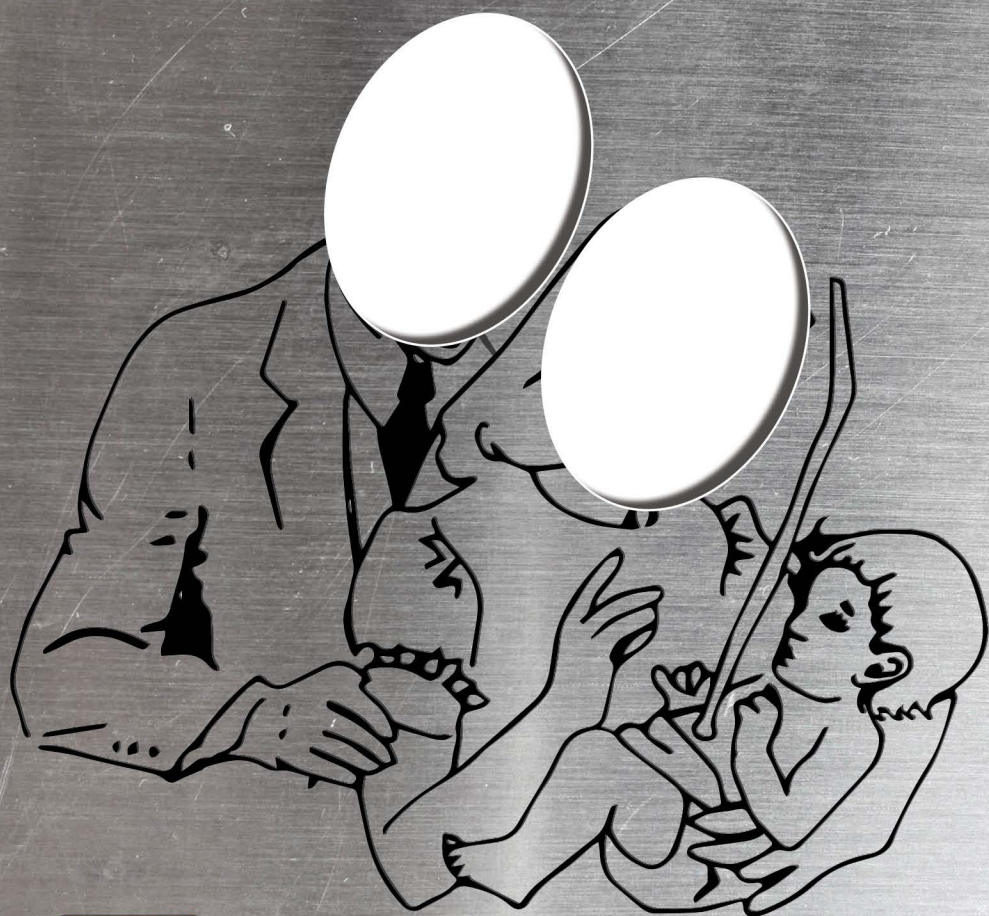


Disorder 299.00

Aby Kaupang and
Matthew Cooperman



DISORDER 299.00

ABY KAUPANG &
MATTHEW COOPERMAN



#52

ESSAY PRESS STEREO SERIES

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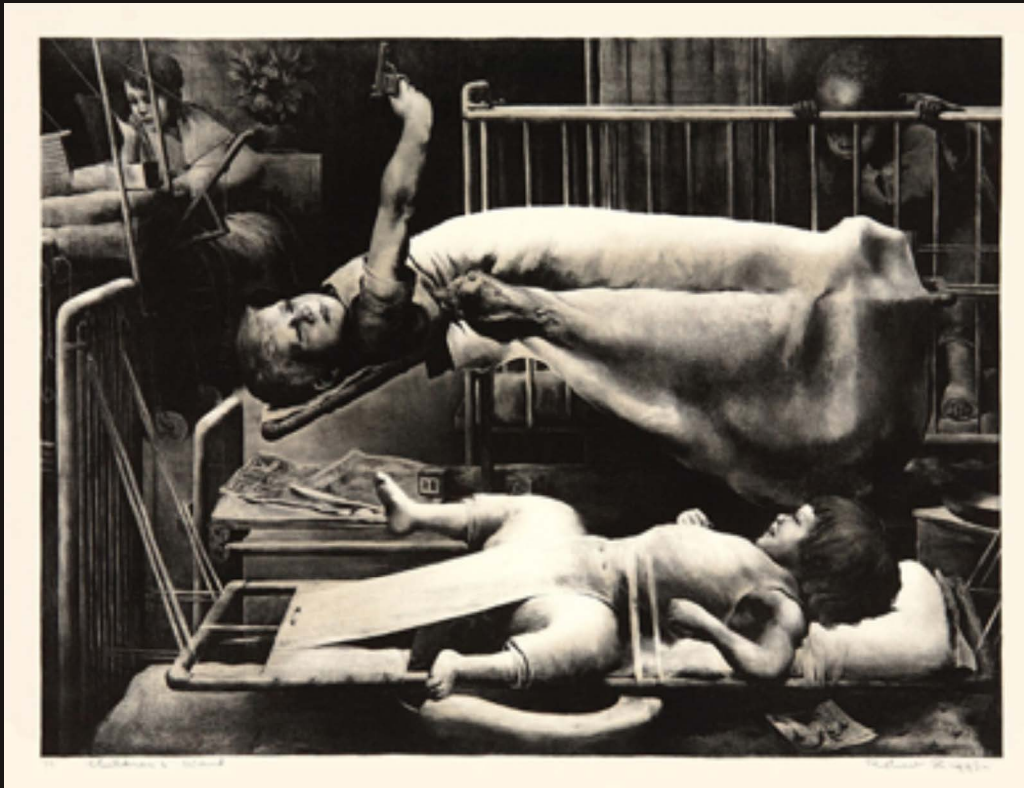
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INTRODUCTION

Rage and catastrophe, diagnoses and advocacy, *Disorder* 299.00 specifies the uncertainties autism brings to parenting, and to language. What follows documents part of the journey of diagnosis, which precedes any action. But action is slow, and our child doesn't sleep, doesn't eat, doesn't speak. This is felt as a strange intensity of Being, both an intricately connected rhizome of forms, agencies, doctors, codes, and an isolated island far out to sea with just enough room for four. Studies suggest parents of children like our daughter have cortisol levels akin to soldiers with PTSD. We are hyper vigilant. We are neither soldiers nor people with disabilities, but we are somehow a strange subcategory whose lives are entirely hijacked, consumed, coded. This is our attempt to code back.



GOOD DAY

And today was a good day, what
with your rising to bathe and dress
the daughter, put her on the bus
and let me sleep. I sleep and sleep
and cannot wash it out of me, tired
fear that rests too much on now.
The day goes on, backing up its horn
of plenty to this house, that house,
not this house. We think there is
delivery, sometimes there is delivery.
Then she sleeps, the wife, and I wake,
and the daughter grinds her fists into her
sockets. Nothing appears as it always does
like nothing you've seen before, closer
in the mirror, and more real, the collapse
of time, dark bright hour, the house
abed and blazing, a keening and a rocking
and a whimper, make it stop. Present is
this gift of the daughter's enormous need,
and absent is the dream of her own dream,
a blue house and yellow car, two Chinese dogs
and a child of her own. Baby body of brood,
I cannot shake this futureless dream from sleep.
It is not hopeless—she brings a joy as “swim” and
“more” and “movie”—but it is wholly child,
a simple life without her own earned heartbreak.
I staunch the fear of my own death and her
perpetual childhood. Today was a good day.

What is there to say of this child? She lived, lives through this. So did we. You want to know more about her. So did and do we.

The girl began, and then so did the book, a mirror for sorrow or anger or fear. The book is a messenger, out in front, it canvasses the halls of many hospitals. Again and again at the ER soothing her body. The daughter didn't eat, didn't sleep, didn't laugh, didn't shit, didn't walk anymore. We went for a long visit. Doctors said *erythromycin*, they said tape a bag to her shoulder. We went again when they said she was crazy, a crazy summer when our little girl lived with other un-specifiable children. We met others there, and parents of others who cared for/were eaten by the unseen and unseemliness of it all. We were told it all in notes and looks and notations: "fear of a dog she doesn't have" "a dog she needs for her night terrors" and "negligent mothers," "attachment disorders," we have heard it all. Clearly "the parents are rude."

they that were in the hospital they that on the pavilion parented they that refined
their faces in the sieve of seizure

in the daylight met the carded men the parking arm the vertical blades
of the guillotine elevator

doctors rose as did their entourage

June a morning
moving a sun-glintoned
box of what faces

people

disappearing

they that wanted coffee thousands must not have wanted coffee they that were
wanting watched from the insular cart they that wanted were clairvoyants of sea
tanks tubing and cardiums

cardiums: heart bouquets, whack jobs

they that were the cardiums wore it on their sleeves their crimson gowns
their forehead temples and they wagoned there were they that were in the wagons
and those that carted others in wagons it was numerous who or who all were cardi-
ums

they passed through the foyer we drank coffee averting our eyes from sadness to
sea tanks we admired the sea tanks we too being cardiums

staring

staring

chairs were gliding smoothly door to door real wheel chairs into rooms where procedures occur it was icecapades linoleumcapades

balloons on wrists carnations on laps
those that were more cardium stumbled in the parade

we feel lucky often during
the parade

our daughter not being in certain parts during of the spectacle she is in pageant
on an elevator 20 -ISTS in entourage

and us—

Student First Name: Maya	Student Last Name: Cooperman	DOB: 14-Jun-06
Health Information -- Conditions (Health Tab)		
Condition: Other (explain)	Genetic testing was done in the past and all testing was within normal limits.	
Condition: Autism/Asperger's	Diagnosed with and Autism Spectrum Disorder. Hx of sensory processing issues in the past, but has improved after going to Star Center.	
Condition: Other (explain)	gluten and casein free diet as an attempt to lessen autism behaviors. However, due to Maya's reluctance to eat, parent wants her to touch and taste any snack foods served in the classroom with the exception of milk. Not allergic	
Condition: Other (explain)	Sleep disorder. Erratic sleep patterns. Will scream for hours if made to stay in her own room. Sleeps in bed with her parents and this has helped. She continues to have difficulty getting to sleep and staying asleep. Awakens in the middle of the night screaming still making the parents question if she is having seizures at night.	
Condition: Gastrostomy	Feeding tube since 10/07 due to declining weight as would only breast feed. Receives all nutrition via tube as of 1/09 (mom makes gluten and casein free feeding). "Wt gain failure in childhood" noted on paperwork from Dr. Guenther dated 9/4/09.	
Condition: Developmental Delay	"Delayed in many areas" per parent on application form. IEP and Hx IFSP. Paperwork from Dr. Guenther dated 9/4/09 lists "mental retardation" as a diagnosis. Essentially nonverbal.	
Condition: Other (explain)	Be aware of activities that might catch g-tube and pull it out.	
Condition: Failure to thrive		
Condition: Allergies/Environment (explain)	noted on application form but no specifics given	
Condition: Kidney/Urinary problems -explain	hx of 2-3 urinary tract infections. Watch for signs at school--fever, dark foul smelling urine, discomfort, pulling at diaper area.	
Condition: Seizure/Neurological (explain)	Per mom, one of Maya's health care providers says she may have mild seizures and is being monitored. During a seizure, Maya may appear to stare without blinking. Eyes may appear "glassy." Or, she may have an abrupt change in mood or may appear to be having a "panic attack." Paperwork from Dr. Guenther dated 9/4/09 states seizures "maybe"--takes Lamictal 1/2 tab since 8/09.	
Condition: Other (explain)	hypotonia per paperwork from Dr. Guenther dated 9/09	
Other Health Condition(s)		
I voluntarily provide this health information to my child's school and understand that it is confidential and is only shared with staff on a need-to-know basis.		
Parents's/Guardian Signature: _____		Date: _____

a theory of causation

The epidemiology of autism is the study of factors arrayed as
suns in the code of spectrum. Genetics, vaccines, parental
error, environmental toxins, voodoo, refrigerator moms,
sin. It is rising incidence, or global prevalence, it is one in
a million, 62 cases per ten thousand, a lack of evidence
from low- and middle-income countries. It is a vision of
difference in the very First World. A 4:1 male-to-female ratio.
The number of children known. *Has the number of children
known to have autism increased dramatically since the
1980s?* It is an increasing strain and a prescriptive condition.
Cumulative incidences, point prevalence, p-values, e-values,
editorial error, hopeful outlook, juice boxes and the children
are unknown.

not being she is pageant
this spectacle of elevation of accounting

during / of

us disappearing

They that were in the hospital one more time and one more time and—

I'd had an appointment with my midwife in June and I cancelled because I couldn't slug off the grief or the cumulative exhaustion. It was her birthday and she had stopped walking. We had to give her enemas because her GI stopped functioning. There was an explosion of poop all over the carpet and hallway and it wasn't the first time and Matthew cussed and cursed and scrubbed the birthday away and I walked the park loop with Maya Möbius-ly as she whimpered and screamed and whimpered and was four that day and there was no joy. No party.

There was so much shit in those days. Enemas and Calms™ and a diuretic hum. She couldn't digest anything even with the g-tube. 2200 calories a day and she still was wasting away. The joints of my fingers ached from working the carpet. Weeping and gnashing and plotting the violent act. I was a violent act.

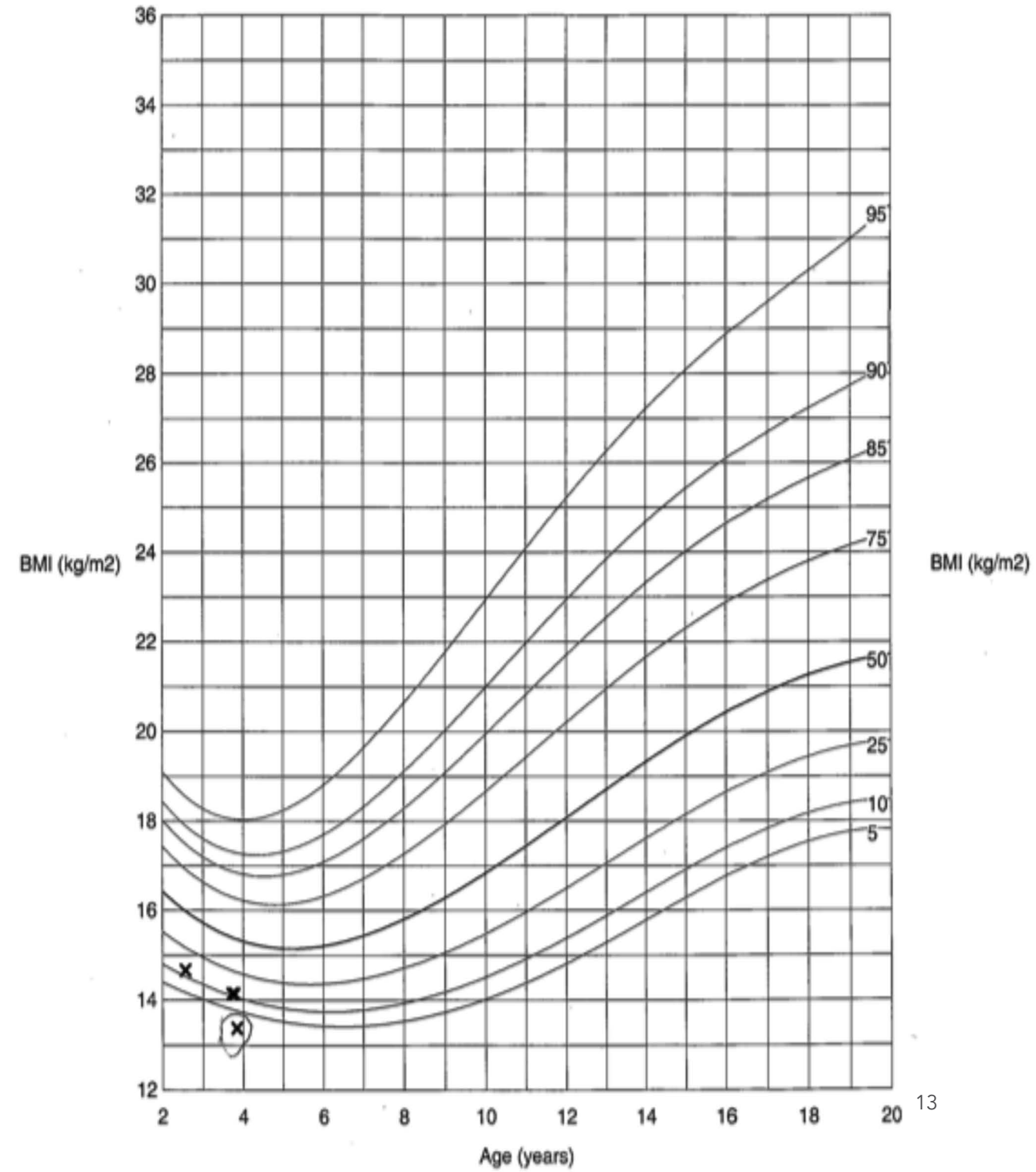
The next day my midwife came and straight-talked, "Aby, I helped bring her into this world; I can help you bring her out."

And we talked about hospice. Talked about removing the feeding tube. Talked about what a future without Maya would be and I said I could never continue as an occupational therapist and I doubted I could continue at all and who knew if a marriage could survive it? We'd have to move away from this house. Far. We would have to go very far away.

Growth Chart: United States
Body Mass Index-for-age Percentiles (Girls, 2 to 20 years)

1126246-Cooperman, Maya Olivia

it is our ethical duty to not escape



most children do not die in children's hospitals
in the air *en route* they die in helicopters
on East Colfax in ambulances they die they do not die
with such a smashing view of the Rockies

the truth of the hospital system is
death prevention and sometimes
death theft and the truth of the
ER more so so acuity
decreases in proportion to the
degree of the field therapy in
the hospital then is polish is a
strategy of low tiers and
sympathizers

arise fluffing the nimbus
helicopter blades whirl up and
up the light soulpuffs

dollars to distance
material affect
pages of reconnaissance

a theory of causation

Hospitals, contemporary and ancient, clear a time and smudge a space. They make a habitable house. Legal credentialing and financing frameworks are established to make structures stay. By individual governments, augmented on occasion by international organizations, churches and blood banks, these stay. The characteristics of any house determine the care of its visitors. Wide windows, colorful hallways, lines on the floor to soothe and direct...a peaceful architecture. Delivery may be by sunlight or angels. Sometimes the angel is mercy, sometimes death. We are waiting in the hall

when we are not with the daughter
we visit the offices of payment and records

we walk walk again

somehow we are walking

we

stunned by the elevators the gift shop the loan library the Jelly Belly food
truck the red wagon and wheelchair station the hand sanitizing station
check in / check out

stare at photos of stars like John Elway and Kermit in fundraisers and patients in
medieval sun chairs and hydro-therabaths and centered in puppies and flowers

we

weaving among the the the cardiums and anti-guides

walk back

again 12x

my forehead tent

I went to the pharmacy she was not there

I went to the surgeon she was not there

I went to the TV the nurses' station the family respite station she was not there I was not there

a WE everywhere

MOCs and FOCs as assemblies of pills

inoperative pillars

with limbs in our various

stumbling mouths

they that visited the Medicaid offices they who suspended themselves hung themselves on pleas for assistance they who hanging there found they needed additional help were Medicaided or not or knotselves knotted we fought a way to lower

our self

a challenge

The cause is unknown and that is vexing to the mother. Further vexing is the youngster's sensory processing disorder [redacted] it is meant that this youngster has mouth and face aversion, does not eat, or process things, for example, exploring toys with [redacted] mouth. [redacted] has some aversion to certain textures, etc. Mother says this pregnancy was normal her second. She did not use any drugs, did not have any threatened miscarriage, [redacted] the baby was born at 42 weeks, almost 9 pounds. [redacted] previous child, a boy, now age [redacted] was large at birth as well, somewhere in the nature of [redacted], large for a first baby.

The mother believes [redacted] head was small at birth and has continued to be technically microcephalic. today just below the 5th percentile, 44 cm.

they that suffered beyond the
blinds the blind themselves the
parents requested watched not
so much the patient though they
recorded her but the MOC and
FOC the unusual parents of the
child they were paid to survey

they surveying the parents
found the surface a veritable
landmine love and the
dove not returning a gaze
of horizon shifts the
surveyors then sat awake
turned inward they
changed professional dreams
like the diapers of a child
they swore or prayed they never
would birth they themselves
afraid of being those parents

they themselves afraid of being the parents became increasingly exuberant showy

de-

-monstrous

-lighted

-stroying

-licious

-liquesce

I went to the neuropsychiatric ward I found us there

The patient _____

- _____ accomplishes some part of self care
- _____ identifies a problem with materials
- _____ indicates a choice by pointing
- _____ sustains an emotion with an adult
(two out of three consecutive trials)
- _____ imitates the sound or action of an animal
or person
- _____ sings in the places of others
- _____ is a wild _____
- _____ engages in a steady thump
- _____ imitates others as they move about the room
to music
- _____ runs, marches, gallops, screams at the music
- _____ expresses suitable emotion
(ex in conflict with another child, child
responds by vocalizations or pugile action)
- _____ makes something with materials

I / They

they that saw the ladies wondered what the ladies in the neuropsych ward did what
they did they did their nails did them daily

they did up their bodies like porn stars like vampires

they are paraprofessionals taking our babies off drugs

vampish

staring

ADLs

tasks are defined as objective representations of all possible activities available in the universe of bodies and minds the daughter will do x tasks in x minutes over a course of x possible data trials with min assist we will make the tasks meaningful tasks are activities in daily living

documents and poems are like -ISTS wet herrings when misconstrued

de-

- structive
- bilitating
- laminated

something in their mean we call it faces faces from the outside poised against glass which is skin my dears I am sorry we are vampirish I wrote this an outside then that's always masking that's all I'm

I am awful glass house not fun not writing not poetry house

during of
group time
participation support

when he is at the she is at the they are at the psych ward

Truly, I was angry, angry and baffled, at the feedback this manuscript received. It was like I was at the hospital again.

Do you mean how the readers said they “weren’t sure we loved our daughter”?

Yes, and that they “wanted to know more” about her. As if we didn’t. As if our attempts at bringing her to the hospital were not an enormous effort at knowing her. As if, if we knew the problems, we might provide the solutions. As if the repeated diagnosis “Not Otherwise Specified” wasn’t such a blow because no one could specify, could lead us to the *her* that was more than ill body, body ineffective. Damned up mind. No one could tell me why my baby daughter wouldn’t eat, wouldn’t sleep, why she screamed out and bruised herself, why she stopped walking, why her taut gut protruded and her legs and arms went to bone. No one could name a thing. We couldn’t treat a thing.

You are breaking my heart, our heart. Should we have known that Maya means “illusion”?
We endlessly wander, looking for her.

We named her, we should have known. This is the deepest pit of hell, wondering if we did this to her. If your genes or my genes, or your drugs or my drugs did this. It’s not that the reader knows anything. We wander and wonder and blame ourselves all alone.

Autism Treatment Evaluation Checklist (ATEC)
Bernard Rimland, Ph.D. and Stephen M. Edelson, Ph.D.
Autism Research Institute
4182 Adams Avenue, San Diego, CA 92116
fax: (619) 563-6840; www.autism.com/ari

Project/Purpose:				
Scores: I	II	III	IV	Total

This form is intended to measure the effects of treatment. Free scoring of this form is available on the Internet at: www.autism.com/atec

Name of Child _____ Age _____
 Last First Male Female Date of Birth _____
 Form completed by: _____ Relationship: _____ Today's Date 12/26-11/8

Please circle the letters to indicate how true each phrase is:

- I. Speech/Language/Communication:** [N] Not true [S] Somewhat true [V] Very true
- N V 1. Knows own name
 - N S V 2. Responds to 'No' or 'Stop'
 - N S V 3. Can follow some commands
 - N S V 4. Can use one word at a time (No!, Eat, Water, etc.)
 - N S V 5. Can use 2 words at a time (Don't want, Go home)
 - N S V 6. Can use 3 words at a time (Want more milk)
 - N S V 7. Knows 10 or more words
 - N S V 8. Can use sentences with 4 or more words
 - N S V 9. Explains what he/she wants
 - N S V 10. Asks meaningful questions
 - N S V 11. Speech tends to be meaningful/relevant
 - N S V 12. Often uses several successive sentences
 - N S V 13. Carries on fairly good conversation
 - N S V 14. Has normal ability to communicate for his/her age

- II. Sociability:** [N] Not descriptive [S] Somewhat descriptive [V] Very descriptive
- N S V 1. Seems to be in a shell - you cannot reach him/her
 - N S V 2. Ignores other people
 - N S V 3. Pays little or no attention when addressed
 - N S V 4. Uncooperative and resistant
 - N S V 5. No eye contact
 - N S V 6. Prefers to be left alone (depends on mood)
 - N S V 7. Shows no affection
 - N S V 8. Fails to greet parents
 - N S V 9. Avoids contact with others
 - N S V 10. Does not imitate
 - N S V 11. Dislikes being held/cuddled
 - N S V 12. Does not share or show
 - N S V 13. Does not wave 'bye bye'
 - N S V 14. Disagreeable/not compliant
 - N S V 15. Temper tantrums
 - N S V 16. Lacks friends/companions
 - N S V 17. Rarely smiles
 - N S V 18. Insensitive to other's feelings
 - N S V 19. Indifferent to being liked
 - N S V 20. Indifferent if parent(s) leave

- III. Sensory/Cognitive Awareness:** [N] Not descriptive [S] Somewhat descriptive [V] Very descriptive
- N S V 1. Responds to own name
 - N S V 2. Responds to praise
 - N S V 3. Looks at people and animals
 - N S V 4. Looks at pictures (and T.V.)
 - N S V 5. Does drawing, coloring, art
 - N S V 6. Plays with toys appropriately
 - N S V 7. Appropriate facial expression
 - N S V 8. Understands stories on T.V.
 - N S V 9. Understands explanations
 - N S V 10. Aware of environment
 - N S V 11. Aware of danger
 - N S V 12. Shows imagination
 - N S V 13. Initiates activities
 - N S V 14. Dresses self
 - N S V 15. Curious, interested
 - N S V 16. Venturesome - explores
 - N S V 17. "Tuned in" - Not spacey
 - N S V 18. Looks where others are looking

- IV. Health/Physical/Behavior:** Use this code: [N] Not a Problem [MI] Minor Problem [MO] Moderate Problem [S] Serious Problem
- N MI MO S 1. Bed-wetting *yes*
 - N MI MO S 2. Wets pants/diapers *yes*
 - N MI MO S 3. Soils pants/diapers *yes*
 - N MI MO S 4. Diarrhea *some*
 - N MI MO S 5. Constipation *some*
 - N MI MO S 6. Sleep problems *huge*
 - N MI MO S 7. Eats too much/too little
 - N MI MO S 8. Extremely limited diet
 - N MI MO S 9. Hyperactive *at night*
 - N MI MO S 10. Lethargic *yes*
 - N MI MO S 11. Hits or injures self
 - N MI MO S 12. Hits or injures others
 - N MI MO S 13. Destructive
 - N MI MO S 14. Sound-sensitive
 - N MI MO S 15. Anxious/fearful
 - N MI MO S 16. Unhappy/crying
 - N MI MO S 17. Seizures
 - N MI MO S 18. Obsessive speech
 - N MI MO S 19. Rigid routines
 - N MI MO S 20. Shouts or screams
 - N MI MO S 21. Demands sameness
 - N MI MO S 22. Often agitated
 - N MI MO S 23. Not sensitive to pain
 - N MI MO S 24. "Hooked" or fixated on certain objects/topics
 - N MI MO S 25. Repetitive movements (stimming, rocking, etc.)

* n.b. wear able to listen to music again after 1 yr +

an outing, 5:17 p.m.
sunlight glint and Freon
off our skinsbreathing

an outing

we love drugs we used to not love
drugs so it was me that didn't love
drugs like other people in our line did
now I love drugs more I love pills
principally for sleep I love them like I
live in a pilloried dichotomy

such complex child

a drug is not necessarily

a child

somebody's fault

we love drugs blue-collar drugs working drugs don't work
the daughter doesn't
eat doesn't sleep doesn't talk she doesn't really work she's on a lot of drugs
we should take her off drugs everyone agrees we should give her more or less drugs
she's after all
self-injurious after all we want to take her home
we are all drugs

Were we going to fail? There were times I thought we were going to fail. I remember thinking if we can just move out of our old house, that dear little house that creaked and trembled with no shelter, if we could just move out of that house it would be all right. We moved out of that house, and it never got "simply all right." NOS. Not otherwise specified, the problem or the solution.

NOS. No one knew. Not if the daughter, the mother, the father, the brother, the marriage, could survive. Only that days keep coming. And some are unspecified.

on the way to the psych ward there are elevators that are glass and elevators that are steel this is clear most designers and children who do not die in helicopters prefer glass elevators

to open

infinitive open

somebody's fault

then / now

Maya has a g-tube, and eats her entire world through something better described as a button on her belly. We feed her unrecyclable boxes of Peptamin Jr.™ or Neocate™, elemental formulas made by Nestlé and Monsanto. In the early days it was the feeding machine, two hours per cycle, five times per day. These days we bolus feed on the kitchen floor, try to wipe up the endless sugary white sticky residue. She is a paradox entire, our little messenger, for now she takes the world into her mouth, railings and door knobs and shirt collars and toys. And yet she does not swallow, obtains and does not obtain the world by mouth.

Maya always wears boots and prefers red ones. She has a few ideas and they always seem novel when they strike her: *Horses?!? Horses!!! Swimming?!? Swimming!!! Drive?!? Drive!!! Ride bikes? We shall ride bikes!!!* Helmet on, standing on the running board of the scooter, she is out front, our messenger. She has mastered the signs for all types of going and no types of staying. She signs, sloppily, quickly and is exasperated with our poor telekinetic capacities. We believe she is from Rigel 4, and her strange hoots and gestures are messages to the Mothership. *These people...*

She pushes and pulls and uses bodies as means to get her will done. We forget that she doesn't speak because she is communicating so sincerely always and we can't explain this to anyone anymore. She still doesn't eat/sleep/talk and she is still in diapers. She is an environmental crisis. We imagine the mountain she's made, she daily makes, of diapers and shit and wipes and shampoo bottles and soiled car seats and plastic toys. She doesn't care. How can such a little pliant body make so much? She pushes and pulls and climbs her diaper mountain to the end.

The Patient _____

- _____ writes using pictures written on air
- _____ is in a letter-like form
- _____ says what a picture says
- _____ is a symbol that represents
- _____ sings simple songs as they please her
- _____ pushes buttons pleasing her
- _____ stacks blocks in sand in paper in water
- _____ identifies with the tag on her sleeve
- _____ identifies as a diagnoses
- _____ is a picture of a simple diagnoses in air in water in slipping

car jacking in the distance
electrical fuzz
oxide and injera
_____ an outing

we are alternating preferred and non-preferred activities being at the ward is called attending MOC is mother of child like me we here at the psych ward call the retarded intellectually disabled disabled too being less preferred than those living with disability

I wish the daughter proffered

pain being universal and being on the floor visits each child personally

a proffer:

blessed are the children

for they shall see god

blessed are the children who see god

for they shall be given drugs

father:

no one loves children

we all love children

packs of overweight parents in the Zebra lot

in the food court passels searching

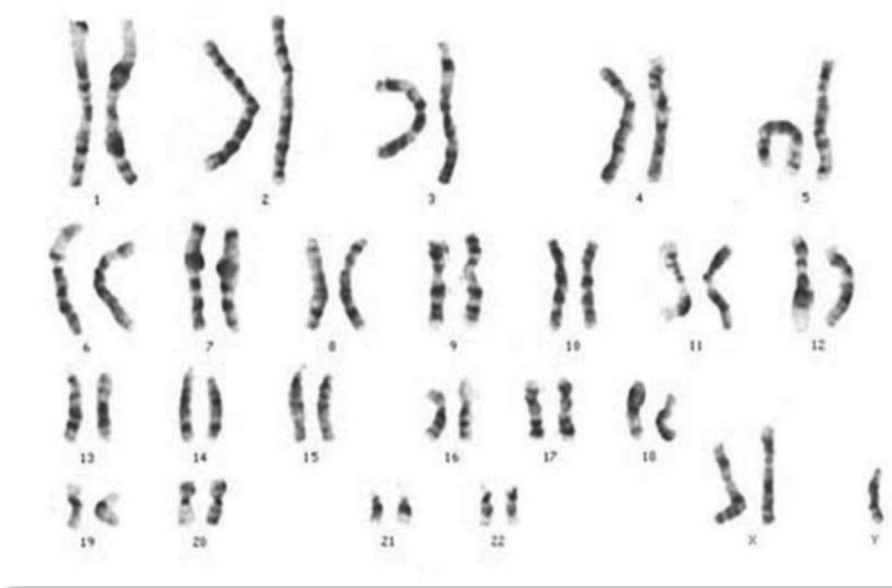
somebody's fault

singular gaunt in the hospital staring

we need wife: I need an outing

they that are at the psych ward are mostly male if they are children mostly female if they brought someone here

one man guards the door 40 woman staff it



stimming and laughter and tantrum and laughter and hooting and grinding your head banging

MOCs/FOCs here your parents



I have multiple degrees and multiple sadnesses I have painted my nails multiple
emotions
though now they are nude and ivory which is a way of
telling though the message is mixed

incriminated by -ISTS I confess histories

more and more histories

I confess I am more

I is angering

someone is absent
during | of
someone is always en route

our -ISTS have never begun to provide solutions

one ruling is a life well lived and a risk in the number of sons all nights are long nights
though the drugs are not long the sadnesses isolatory we seize them repeatedly

we want drugs
working-class drugs
drugs that WORK

she is out front our messenger

she proffers and proffers her glass guillotine

they that were on the fence before began new names Jesus
names and model names names like TeaKettleBlack one
name was a name to be mouthed by a Down's boy the MOC
and FOC thought out his mouth in advance

who are they that enjoy
the sun
everyone enjoys the sun

on an outing
through the glass

Maya doesn't enjoy the sun

WORDS FOR THOSE WHO DON'T SPEAK THEM

when our daughter rises it is with and without her mouth

she sings in phones of plosive thirds that do not complete

the scheme and yet they are awake they are very awake

third third third

she sings with her body and to her body a plateau of sinew

to hold a twitch of song

she moves the bed by pressing everywhere

up up up

she levitates the bed by hanging hours on the bed

our messenger she is out front

Song--

she sings in hunger or wetness

and we rise

AUTHOR BIOS



Aby Kaupang is the author of *Little "g" God Grows Tired of Me*, *Absence is Such a Transparent House* and *Scenic Fences | Houses Innumerable*. She holds masters degrees in both creative writing and occupational therapy from Colorado State University, and lives in Fort Collins with the poet, Matthew Cooperman, and their two children.



Matthew Cooperman is the author of, most recently, *Spool*, winner of the New Measure Prize (Free Verse Editions/Parlor Press, 2016), as well as the text + image collaboration *Imago for the Fallen World*, w/ Marius Lehene (Jaded Ibis Press, 2013), *Still: of the Earth as the Ark which Does Not Move* (Counterpath Press, 2011), *DaZE* (Salt Publishing Ltd, 2006) and *A Sacrificial Zinc* (Pleiades/LSU, 2001), winner of the Lena-Miles Wever Todd Prize. Four chapbooks exist in addition, including *Little Spool*, winner of the 2014 Pavement Saw Chapbook Prize. A founding editor of *Quarter After Eight*, and co-poetry editor of *Colorado Review*, Cooperman teaches at Colorado State University. He lives in Fort Collins with his wife, the poet Aby Kaupang, and their two children.



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