Abstract

This article examines the embodiment of pain in artist Máiréad Delaney’s performance *At What Point It Breaks* (2017). Drawing upon the gender-based violence of symphysiotomy and its resulting pain, Delaney’s work employs an affective aesthetics and negotiates a breach in representation, thus facilitating viewer engagement with the performance as a means of critiquing the insidious control of women’s bodies and the resulting reproductive injustices in Irish society.

Keywords

Performance Art, Pain, Gendered Violence, Ireland, Childbirth

Introduction

Máiréad Delaney is an Irish-American artist whose performance works are highly engaging in their nuanced and exquisitely raw focus on gendered violence. Over the last number of years, Delaney’s practice has centred on the highly controversial surgical procedure of symphysiotomy, performed on the bodies of birthing women from 1944 to 1987 in Ireland. Delaney’s performances are not a retelling of survivor experiences, there are no testimonies that unfold in front of the viewer. The artist does not narrativise pain, nor does she employ tactics of violent spectacle or gratuitous pain for...
the purpose of shock value. Instead, Delaney’s performances engage an affective aesthetics of violence and pain as a way of provoking awareness and prompting the interrogation of insidious patriarchal power and reproductive injustices in Irish society. In *The Body in Pain* (1985), Elaine Scarry states that “[w]hatever pain achieves, it achieves in part through its unsharability, and it ensures this unsharability through its resistance to language” (4). Trauma, similar to pain, resists language and in its unknowability, it generates a tension between “the impossibility of telling and the ‘impossible silence’” (Reason 2017, 92). According to Matthew Reason, aesthetic representations of traumatic experiences from art, theatre and dance insert themselves into this in-between space “precisely because as an aesthetic representation [they are] abstracted, stylised, potentially beautiful” (Ibid.). The embodiment offered by performance art enables the audience to view the body in pain or the traumatised body in new ways, particularly when the performance asserts the corporeal as a site of resistance (Oliver 2010, 128).

What of the affective response when one is confronted with a representation of a body in pain? For the purposes of this essay, affect is defined as an automatic, non-conscious experience of intensity. According to Massumi, whose conceptualisation of affect is indebted to the work of Spinoza and Deleuze, affect is a “prepersonal intensity corresponding to the passage from one experiential state of the body to another” (1987, xvi). Teasing out Massumi’s ideas on affect, Shouse describes that the transmission of affect is essentially how bodies affect one another: “When your body infolds a context and another body (real or virtual) is expressing intensity in that context, one intensity is infolded into another” (2005). Art that engages pain or trauma through embodiment generates an affective aesthetics, one that is not purely intellectual or solely centres on emotional visual interpretation, but instead relies on the activation of the bodily, sensuous and tactile faculties in a creative encounter that extends beyond the subjective (Golańska 2015, 785). Jill Bennett’s work on affect, trauma and contemporary art is particularly useful here for thinking about an affective aesthetics which, building upon the intensity of affect produced by a work of art, thrusts the viewer involuntarily into a mode of critical enquiry (2005, 11). One purpose of art, as explained by Simon O’Sullivan, is to switch our intensive register, to reconnect us with the world. Art opens us up to the non-human universe that we are part of. Indeed, art might well have a representational function (after all, art objects, like everything else, can be read) but art also operates as a fissure in representation (2001, 128; emphasis in the original).
A fissure can be understood as a breach, a space in-between where there is the possibility, as O'Sullivan suggests, for a transformation or refiguring of our sense of self—if only for a moment. This potential for recalibration is particularly apt with regards to how performance art operates, given the responsibility it demands from the viewer. Furthermore, as this article will demonstrate, art that engages affective aesthetics opens up a space where one can move beyond the intensities of affect to encourage critical reflection on what is being represented. Arguably, Delaney's performances embody pain and employ affective aesthetics to produce fissures, breakages and breaches in representation, prompting a critical examination of the ongoing reproductive injustices in Ireland.

In response to engaging with women who have experienced gender-based violence, Delaney says: "Many times I have returned to hearing these stories told [...] An imaging occurs in the telling. The stories open the same way flesh does, it's a dehiscence, they open a wound, freshly splitting and then yawning warm tissue. Raw. Hemorrhaging".¹ This article analyses Delaney's recent performance *At What Point It Breaks* (2017), considering the historical context of the "reintroduction" of symphysiotomy in Irish society, the definition of obstetric violence and its applicability to the practice of symphysiotomy. Detailing the bodily gestures utilised in the performance, this work considers the concept of a shared responsibility that makes the viewer complicit in the actions that occur. Furthermore, it investigates the aesthetics of affect that emerge from Delaney's work with particular reference to the affective encounter of the body in pain. This article also argues that Delaney's performance negotiates a fissure, or breach, in representation, a space in-between that facilitates viewer engagement with the performance as a means of critiquing the insidious control of women's bodies and the resulting reproductive injustices in Irish society.

**Symphysiotomy in Ireland**

Symphysiotomy is a surgical procedure employed by obstetricians on birthing women during obstructed labour. It splits the symphysis ligaments, the joint at the junction of the two pubic bones that connects the two sides of the pelvis, in order to widen it by means of cutting with a scalpel or a small saw. It came into use in the 17th century in Europe but was only rarely performed in developed countries by the 20th century, by which time caesarian

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¹ Unpublished conversation between the artist and the author of this essay.
section was widely considered to be a safer method of delivery. By 1930 caesarian section had become accepted practice for difficult deliveries in Ireland (SoS 2014, 5), but it carried the risk of uterine rupture, which increased with each subsequent delivery, therefore limiting women to no more than three births. Doctors in Ireland adhering to Catholic moral doctrines opposed the caesarian delivery method because it led to contraception, sterilization and therapeutic abortion to prevent further pregnancies. In 1944 symphysiotomy was reintroduced at the National Maternity Hospital (NMH), Holles Street, a Catholic institution under the direction of the Master Dr. Alex Spain and his successor Dr. Arthur Barry (who became Master in 1948 and carried on the practice) and later at other Catholic institutions. From its foundation in 1922, the Irish State worked closely with the Catholic Church to regulate the reproductive bodies of Irish women, as demonstrated by the legislation prohibiting the distribution of publications with information about birth control (1929) and the sale and import of contraception (1935). Article 41.2 in Irish Constitution (1937), which states that women best served the nation by their duties in the home, symbolically constructed a vision of Irish women and their societal value as bound to their fecund bodies. Catholic Archbishop John Charles McQuaid, one of chief architects of the Irish Constitution and chairman of the board of the NMH during the reintroduction of symphysiotomy, asserted in no uncertain terms that birth prevention was a crime (Cooney 1999, 340).

In a submission to the United Nations Committee Against Torture, the Survivors of Symphysiotomy (SoS), an organization supporting women who have directly experienced obstetric violence (SoS 2014), detailed the widespread ongoing physical pain and psychological damage suffered as a result of symphysiotomy. Often performed under only local anaesthesia and frequently in front of large groups of male medical students, these women were subjected to post-operative pain, incontinence, gait problems, significant physical disabilities, nightmares, flashbacks and an inability to bond with their newborn babies. Some instances resulted in permanent brain damage or infant death. It was problematic not only for its risks but also due to the failure of the medical profession to gain patients’ informed consent—“[n]ot one mother reported that her consent had been sought prior to surgery” (O’Connor 2011, 25). Historian Jacqueline Morrissey, who first uncovered the use of symphysiotomy in the course of her research into the

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2 Symphysiotomy was exported by doctors trained in Ireland to countries in Africa where access to maternity hospitals is limited.

3 The procedure had a 10% infant mortality rate (O’Connor 2011, 80).
influence of Catholic ethics on medicine in Ireland, broke the story in 1999. Many of the survivors, now in their late 70s and 80s, first learned that they had undergone symphysiotomy at that time, or even later when the RTÉ Prime Time documentary *Brutal Procedure: The Symphysiotomy Scandal* (2010) gave details of the nearly 1,500 women who had been subjected to the barbaric practice.

The State established a redress scheme for survivors with compensation ranging from €50,000 to €150,000. The justification for an ex-gratia scheme, no blame admitted, was “to ‘relieve’ the survivors of the burden of pursuing their case through the courts” (Russell 2014). 399 women have been compensated through the scheme, though a number of independent claims have been taken by individuals. The UN Human Rights Committee Report (2014) expressed concern at the State’s failure to initiate an independent investigation into symphysiotomy and to hold accountable perpetrators who performed the operation without obtaining patient consent. Furthermore, the report called for remedies to survivors for the resulting damage from the practice. The perpetrators of obstetric violence are essentially “held harmless”, their actions excused, while the pain and suffering of those whose bodies were violated continues. Delaney’s desire to focus on the gendered experiences of suffering in an Irish context places her practice within a dialogue with the work of other Irish performance artists concerned with these issues, for example Amanda Coogan’s *Medea* (2001), Aine Phillips’ *Redress* performances (2010–2012), Dominic Thorpe and Sandra Johnston’s *Due Process 2* (2011), Helena Walsh’s *796 Pages* (2014), Sinead Keogh and Pauline Cummins’ collaborative performance *Remembrance* (2015) and Léann Herlihy’s *A Glove is a Gift* (2017). These works, like Delaney’s performances, critique the Catholic-controlled institutional erasure and silencing of survivor experiences (Antosik-Parsons 2014). Symphysiotomy can be understood as part of a pervasive climate of control of women’s bodies that underscored Irish society over the course of the 20th century, particularly when one considers that women who were perceived as having transgressed strict, Catholic-inflected social mores were detained in carceral institutions like Magdalene Laundries, or sent to Mother and Baby Homes to birth their illegitimate babies in secret.

**Affective Aesthetics in At What Point It Breaks**

*At What Point It Breaks* (2017) was performed as part of the performance exhibition *Fertile Ground* (Fumbally Exchange, 9 April 2017) which featured four live artworks centring on women’s bodies as a site of control by Church
and State. All four artists included in *Fertile Ground* are known for work that directly addresses issues surrounding female bodies in Irish society, including abortion, maternal subjectivity, interrogation of gender relations and violence against women. The fact that this exhibition was held the day after the International Women’s Day “Strike for Repeal” action (March 8, 2017)—an abortion rights protest in which 10,000 people, myself included, stopped traffic in the centre of Dublin for over an hour, meant that the recent activist events advocating for women’s bodily autonomy were still fresh in people’s minds. Curator Ciara McKeon’s statement set the context for these performances and detailed their aim of activating female bodies as sites of agency and sites of resistance to patriarchy. In addition, the statement provided specific information about *At What Point It Breaks*, defining the procedure of symphysiotomy and referencing the advocacy work of SoS. This ensured that audience members were informed prior to the commencement of the artistic actions, whilst the performances preceding Delaney’s foregrounded the issue of reproductive bodies and their perceived responsibilities to the Catholic Church and, by extension, the Irish State. The 25-person audience, composed of both women and men, was instructed by McKeon to stand within a square-shaped area marked on the floor of the gallery. Delaney, barefoot and in a black dress, entered the gallery carrying a bundle of about 25 tree branches, stripped of leaves and twigs, approximately 4 and half to 5 feet in length and between half an inch to 2 inches in diameter. Hugging the skeletal forms against her body, the branches pressed into her flesh, establishing a connection between form and body. Walking the perimeter of the space, she silently made eye contact with each person as she handed out individual branches. Once distributed, she stood in the middle of the space slowly scanning the room as she turned in a circle. As she approached, I met her gaze unflinchingly. She extended her hand expectantly and I conceded, returning the branch to her. Repositioning herself in the middle of the space she pressed the branch lengthwise against her and enfolded her body around it. Then, with a swiftness that took me by surprise, she bent at the waist, using the full force of her body to snap

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the branch in half. With the sudden and unanticipated violence of this action, I exhaled breath I hadn’t realised I was holding. A hollow sound resonated throughout the space as the two halves of the branch fell to the floor. A variant of this interaction between viewer and artist was repeated throughout the forty-minute performance. Audible throughout were the haunting cracks of splintering branches, the involuntary sounds of physical exertion, and when the struggle subsided, a radiating silence.

Fig. 1. Máiréad Delaney, *At What Point It Breaks* (2017), Fumbally Exchange, Dublin. Performance still. Photograph by the author.
Delaney’s performances render visible the invisible experiences of violence and pain. Violence is an injurious physical force or action, an unjust or unwarranted exertion of force or power. In respect of symphysiotomy, the violence is an egregious action perpetrated against birthing women’s bodies. Pain is physical suffering or distress from injury, mental or emotional suffering or torment. Violence is the cause and pain is the effect. The multiple types of pain associated with symphysiotomy are the result of this unjust exertion of power over and against women’s bodies. Delaney’s performance references a very specific figuration of violence, obstetric violence. The legal term “obstetric violence” was introduced with Venezuela’s 2007 “Organic Law on the Right of Women to a Life Free of Violence”, which defined it as “the appropriation of the body and reproductive processes of women by health personnel, which is expressed as dehumanised treatment, an abuse of medication, and to convert the natural processes into pathological ones, bringing with it loss of autonomy and the ability to decide freely about their bodies and sexuality, negatively impacting the quality of life of women” (Pérez D’Gregorio 2010, 201). A specific violation of women’s rights, obstetric violence occurs at the intersection of institutional violence and violence against women in pregnancy, childbirth and the post-partum period in both public and private medical practices. However, sociologist Linda Connolly notes that the term has caused divisions, “ranging from positions that advocate the superiority of midwife-led care over modern obstetrics to those who uphold the principles of modern medicine as a necessary form of power over women's own agency and choice, in the best interests of safe childbirth” (Connolly 2018). Breaking or sawing a woman’s pelvis during childbirth constitutes obstetric violence and breaches her right to bodily integrity. This violation of women’s bodies, in addition to the withholding of post-operative care, undoubtedly further compounds women’s postpartum vulnerability. In simultaneously embodying violence and vulnerability, At What Point It Breaks brought the pain manifested through Delaney’s actions in close proximity with women’s experiences of obstetric violence, and this encounter resonated within the body of the viewer.

That there are other chilling examples of obstetric violence in 20th century Ireland demonstrates that women’s birthing bodies and their reproductive capabilities were a site of control. The obstetrician gynaecologist Dr. Michael Neary at Our Lady of Lourdes Hospital, Drogheda, carried out 129 peripartum hysterectomies over a 25-year period (from 1974 to 1998). Tom Inglis observes that “[t]he reality is that the experiences of the women [subjected to this] were personal and confidential and, consequently hidden
from each other and the general public. But what is most disconcerting is that the vast majority of those who participated in or witnessed the regular removal of wombs, said or did nothing" (2008, 203). Not only does this illustrate that obstetric violence was largely hidden or erased but, as Inglis rightly points out, it demonstrates that the existing structures of power and the culture of the maternity unit were part of a wider system of control in which consultants went unchallenged. This illustrates how the obstetric violence, coupled with the pervasive patriarchal Catholic ethos of medical institutions, enabled these practices to appear normative and to continue without question. On the subject of violence perpetrated against such women harmed in childbirth Delaney asserts: "When individual voices are silenced in this way, we are left with lived violence. This violence resonates on a collective level" (Delaney 2016). The obstetric violence of symphysiotomies and non-consensual peripartum hysterectomies can be understood as part of a wider systemic violation of the reproductive bodies of Irish women, located in injustices perpetuated by the carceral Magdalene Laundry institutions, the Mother and Baby homes and the subsequent involuntary adoptions of the children born there, as well as the insertion of the pro-life 8th amendment in the Irish Constitution (1983).

As with any visual art created in response to human suffering, there is an obligation to address potential ethical issues that might arise. The germination of Delaney’s body of work began when learning about this brutal chapter in Irish history lead her to contact SoS. Since 2011, Delaney has spent a considerable amount of time cultivating relationships and building trust with the advocacy group and its members. These women know of Delaney’s artistic practice and she is creating work collaboratively and in solidarity with their struggles for justice. Furthermore, the artist has met individually with survivors who expressed an interest in discussing their experiences with her. While Delaney’s embodied performances are informed by these conversations, they are not literal translations or direct testimonies of the violence and pain these women have endured. As Delaney stresses, "[s]urvivors experienced brutalisation and erasure. When explicit and graphic details are extracted from them for use in the courtroom or to be broadcast to the public they not only stand to be re-traumatised, they stand to be excoriated, and disbelieved again".5 The performances themselves cannot, and should not, be understood as a direct transmission of witnessing personal stories of violence and pain, and Delaney acknowledges the impos-

5 Unpublished conversation with the artist.
sibility of this. As with any art that deals with pain and violence, there is a process of mediation, of distilling ideas about power, violence and subjectivity into embodied actions. Delaney reflects on this when she states: “I came to performance as a practice of embodied speech acts, gestures which attempt a simultaneous holding-at-bay of crushing violence and an affective entrance into the structure of feeling”.

This push and pull between violence and affect sets up an impossible bind, a pressure that builds throughout the performance that cannot be resolved.

Pain in Delaney’s performance of *At What Point It Breaks* was multiple, enacted in different ways. In an earlier piece entitled *Hold Harmless* (2015), performed over a series of days outside the National Maternity Hospital and Four Courts, she struggled to walk with rose thorns embedded into her inner thighs. In a related action, also titled *Hold Harmless II* (2015), she bore the burden of a heavy sink split in half, strung on a wire round her neck. In *Breach* (2017), red hot sparks from an axel grinder cutting through a bathtub arced against her pelvis, and of course in *At What Point It Breaks* she used her body to break branches. Women who endured symphysiotomies, which were primarily performed during the “trial of labour”, experienced two types of pain: the gendered pains of childbirth resulting from the contraction of the muscles of the uterus and by pressure on the cervix, and also the “unnatural pain” that resulted from the splitting of the pelvis. Historically, religious objections to pain relief during labour centred largely on the grounds that pain relief violated nature, that “the Old Testament demanded pain during childbirth as punishment for Eve’s surrender to temptation in Genesis” (Skowronski 2015, 26). The pain associated with symphysiotomy is also an exclusively gendered pain resulting from obstetric violence. Survivor Mathilda Behan described the brute force of what she was subjected to: “I had a local anaesthetic, but I was awake through it. The pain? It was excruciating... I was just held down like I was just a cow. My whole person was violated, like as if I was raped” (Holland 2002, 3). Furthermore, survivors have detailed how they were forced to walk shortly after surgery and that their experiences of pain were dismissed by the doctors meant to provide care for them. Another survivor, describing the lasting effects of symphysiotomy, “thought this was her fault, along with her unbearable backache, frequent incontinence and sense of shame” (Ruane 2002, 14). That survivors blamed themselves for their maternal bodies not functioning as expected in childbirth, only to later learn some thirty to fifty years later of

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6 Unpublished conversation.
the unauthorised surgery they were subjected to, contributes a massive psychological burden to the violation of trust. Contrary to the dismissals women faced when they voiced their experiences of their broken bodies, pain in Delaney’s performances facilitates an affective experience that provokes a greater awareness of gendered violence in Irish society.

*At What Point It Breaks* engaged in a bodily and tactile affective aesthetics that manifested in the tension felt throughout the performance. A physical, corporeal tension was apparent when the artist held each branch along the length of her body in turn, adjusting it repeatedly before snapping it. It could be felt in the ways her body increasingly struggled with the branches; sometimes she had several attempts before she succeeded in making the break. Tarja Laine has described the interplay between the affective disposition of the viewer(s) and the performance itself suggesting that

> [i]n an aesthetic experience, the spectator’s intentional attitude gets entangled with the affective attitude that is embodied in the work of art. This entanglement enables an emotional response, which in turn facilitates philosophical reflection—although not necessarily in a linear fashion. This reflection is simultaneously a matter of feeling and thinking, of “thinking-feelingly” and “feeling-thoughtfully” (Laine 2015, 10).

This “entanglement” was certainly at play in *At What Point It Breaks* and resulted in the deeply uncomfortable psychological tension that built up throughout the performance, and was collectively manifested in the bodies of the viewers, such as in the ways people uncomfortably shifted their weight as they stood to watch, in the tightening of fists and the wringing of hands. It could be felt in the way gazes were diverted from Delaney’s body to the floor, the wall and even the bodies of other viewers when bearing witness visually through eye contact with the artist seemed impossible. Fighting against the impulse to turn away, I clenched my jaw, swallowed to clear my throat and continued to focus on the performance before me.

Recoiling, wincing, grimacing, shifting with discomfort, these are all deeply affective embodied responses that can arise from such a performance of pain. What purpose do they serve in the context of performance? Jill Bennett envisages the “micro bodily reactions”, like squirming or recoiling, as a way of distancing oneself from the pain or violence of the action. It functions either as a pause or as a “regrouping of the self” and a “condition of continued participation”, in that it lets the viewer “feel the image, but also
maintain the distance between self and image” (Bennett 2005, 43). The intensity associated with this performance was a mutually constructed atmosphere that oscillated between the actions of the artist, the willingness (or reluctance) of the audience to continue to participate in the performance and the atmosphere that permeated the space after each breakage. The performance of pain in this context engenders an emotional reaction that counters the supposed “objective” detachment of the medical professionals who advocated the practice: the breaking of each branch collapsing the viewers’ objective distance. Discussing the use of pain in Marina Abramović’s Lips of Thomas (1975) Bennett says the body functions as a “ground of inscription, experienced as sustaining sensation”, and that it promises to emerge as something other than the site of pain. However, the viewer cannot read the body as an object separate from the process of wounding, and therefore experiences the tension of the affective encounter, reading the artist’s body as simultaneously a body in pain and an image of representation (Bennett 2005, 38). Though the viewers of At What Point It Breaks could not directly feel the artist’s pain, one observed the strength required to break the branch, witnessed the embodied struggle against the upright force of the branch, and perhaps, most importantly, anticipated with some trepidation, the jarring sensations of the next break. And despite knowing what was to come—a sharp inhalation of breath, the exertion of the body, the crack of the branch, and the resulting pain after the break—the viewer’s body still involuntarily flinched when it happened.

At What Point It Breaks also demonstrated there is no singular definition of pain, but that it is multiple, layered and nuanced. It pointedly dismissed pain as a universalising experience and yet each audience member was able to read the body in pain in front of them, suggesting that while we all had our own perceptions of what pain meant, we connected those perceptions and affective responses through the embodied gestures of the performance. It allowed us to think about the pain located at the pivot of a woman’s body while watching her produce a jarring and terrifying crack from precisely this place. Affective responses to this encounter propelled the audience toward cognitive reflection. Although they could turn away from the sight of the performance, it was not possible to escape the reflection that intense pain had been inflicted on women’s bodies in the name of religious authorities. Many of us witnessing that performance brought with us a prior awareness of the symphysiotomy cases, including the government’s failure to admit wrong-doing in State-run hospitals. Given the lack of an independent enquiry and deliberate time-wasting tactics on behalf of the compensation
scheme, resulting in elderly women facing the possibility of not seeing justice done before they die, the performance provoked a palpable sense of outrage.\textsuperscript{7}

At what point, though, does the viewer break? The notion of a breakage or a breach in terms of this performance can also be used to refer to the interactions and responses between viewer and artwork, and the potential for unexpected responses. In her book on the history of Irish symphysiotomy, O'Connor raises a relevant point: “these operations were often performed during labour under the gaze of large numbers of staff. Two generations of midwives and doctors [...] must have stood and watched as obstetricians sundered women’s symphises or split their pubic bones” (2011, 25). As we stood round the artist, handing her branch after branch, I wondered to what extent we assumed responsibility for what continued to transpire before our eyes? Were we complicit in inflicting violence and pain? At a certain point in the performance I became aware that it was likely the artist’s intention was to break every branch. I felt a certain crushing intensity in my own body with this revelation. Casting my eyes around the room I located the branch that seemed to be the thickest in diameter. Based on my perceptions of her body language and the direction of her gaze, it was obvious the person next to me had reached the same conclusion and our bodies turned slightly toward each other, for but a moment we were united in that feeling. In that instant, I shared an intense moment with a fellow audience member that was secondary to the immediacy of the performance. Perhaps it was fear, uncertainty or bewilderment, but that silent acknowledgement of an exchange between us profoundly shaped my understanding of this work.

According to Doris Kolesch, performance art collapses “the perceptual convention of aesthetic distance that is fundamental to conventional aesthetics” because the artist’s body functions as both the medium and the subject matter (2011, 242). The audience are understood as participants and therefore bear a shared responsibility “for the events that occur, and for what they have heard and seen in each case, since no central perspective, no dominant version, and no authoritative interpretation is offered” (Ibid.). That artist and audience share responsibility for the events that occur suggests the potential for ethical dilemmas to arise in the course of the performance. The woman holding the thickest branch appeared to be somewhat appre-

\textsuperscript{7} For a detailed discussion on the issues of time in relation to symphysiotomy survivors, see Máiréad Enright (2018), ”‘No. I Won’t Go Back’: National Time, Trauma and Legacies of Symphysiotomy in Ireland”, [in:] Law and Time, eds. Siân M. Benyon-Jones and Emily Grabham, Routledge: London, pp. 46–74.
hensive, she shifted her weight nervously from foot to foot and her grip tightened on the branch she held in her outstretched hand. As the performance continued and the artist struggled both physically and mentally with her endeavour, the woman holding the thickest branch made a decision. In what can be read as a gesture of compassion or empathy, she stepped back from the performance’s perimeter, quietly propped her branch against a wall out of reach of the artist and quickly exited the gallery without a backwards glance. It appeared that the intensity of the embodied actions had pushed that particular viewer to her breaking point.

Fig. 2. Máiréad Delaney, *At What Point It Breaks* (2017), Fumbally Exchange, Dublin. Performance still. Photograph by the author.

How can the concept of a breakage, a fissure or a breach be used in performance to think through the obstetric violence and enduring pain inflicted upon women’s birthing bodies? In the context of *At What Point It Breaks*, breakage encompasses a duality, since it was both the act of breaking and the state of being broken. It implied the physical violence perpetrated against mothers and the recurring and chronic physical and psychological pain resulting from that breakage in and on the body. Break and fix are
binary oppositions. However, in this performance the manner in which the branches were shattered suggested an inability to fix or rectify the damage done. Using her own body as the instrument of blunt force, Delaney mimicked the ways in which doctors violated the bodies of birthing women. Within the performance there was a split between the body that breaks and the body that is broken, and yet Delaney’s body occupied both subject positions. Erin Hood argues that performance generates both embodied and subjective knowledge as a result of the emphasis on the body and contextual factors of representation: “By highlighting that embodiment and subjectivity work together, performance provides a way of recognising that there is a connection between pain and self and that the connection is complex, not casual” (2013, 77). If a breach or breakage provides a space for transformation, there is another subject position at stake in performance, particularly when pain pushes beyond the limits of representation. The lack of a “clean” break with the splintering of each branch suggested the potential for affective experiences triggered by pain and violence to collapse the boundaries between self and others. This illustrates that performance art has the capacity to move from the individual to the collective, and from the personal to the political.

Fig. 3. Máiréad Delaney, *At What Point It Breaks* (2017), Fumbally Exchange, Dublin. Performance still. Photograph by the author.
Conclusion

The simultaneous violation and vulnerability of the embodied gestures in *At What Point It Breaks* were deeply felt. Though the audience cannot know the actual physical pain and psychological suffering of survivors, the brutal violence and pain of Delaney’s performance produced intense affects that provoked responses to the silencing and erasure of obstetric violence in Irish society. As Máiréad Enright argues,

> the women have a right to reparations, which must be proportionate to the violence done to them. Reparations ought to be satisfactory to the majority of survivors. They can also include a guarantee of non-repetition and appropriate law reform: for example, the Irish State might ensure that pregnant women will never again be subjected to invasive medical treatment against their will (2014, 14).

As Delaney’s embodied performance suggested, although the State might intend to make nominal restitutions, there may never be a satisfactory redress of the violence and pain these women endured. Ultimately, nothing can “relieve” the burden of suffering. In analysing *At What Point It Breaks*, there were a number of important issues raised regarding how viewers experience embodied gestures and respond to the affective encounters with their own bodies. Additionally, Delaney’s performance addressed the issues of shared responsibility and questioned how wider society might bear responsibility for the pain and suffering of these women. This article argued that Delaney’s performance utilised the concept of a breach in representation as a means of critiquing insidious patriarchal power and reproductive injustices in Ireland.

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Bibliography

