

## ON CURATING PAIN: THE SICK BODY IN MARTIN O'BRIEN'S *TASTE OF FLESH/BITE ME I'M YOURS*

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### Abstract

This article discusses the sick body in performance art and ethics, in *Taste of Flesh/Bite Me I'm Yours*, 2015 by London-based artist, Martin O'Brien, which was commissioned by The Arts Catalyst as part of 'Trust me, I'm an Artist', a Creative Europe funded project exploring ethical issues in art that engage with biotechnology and medicine, such as medical self-experimentation, extreme body art, and art practices using living materials and scientific process. It considers the bodily categorisation 'sick', particularly in relation to when the markers for such categorisation are rendered invisible through illnesses, in this context, Cystic Fibrosis. Through performing this illness, important ethical questions are raised for the performing 'sick' body, which include complicity, subjectivity and the situation-behaviour dynamics present between a performer and an audience.

"Illness is the night-side of life, a more onerous citizenship. Everyone who is born holds dual citizenship, in the kingdom of the well and in the kingdom of the sick. Although we all prefer to use the good passport, sooner or later each of us is obliged, at least for a spell, to identify ourselves as citizens of that other place." [1]  
Susan Sontag, *Illness as Metaphor*, 1978

Representations of the 'sick body' have dotted the scholarship of pain and, in her book *Illness as Metaphor*, Susan Sontag highlights the disparities between healthy and sick bodies that centre on victim blaming, which becomes evident in an analysis of the language used to describe 'disease'. More recent scholarly research considers how diseases are used in artworks, revealing the ways used to express and mediate on the human condition, furthering Sontag's analysis on societal relations to the sick body [2]. The sick body, its categorisation, representation and articulation, seems a suitable point of departure when considering Martin O'Brien's, *Taste of Flesh/Bite Me I'm Yours*, 2015. When considered in relation to masculinity, the sick body is viewed as that which strips the male subject of his strength, presenting him as 'weak', 'vulnerable' and 'lacking'. All of these stereotypes are challenged by the artist through taking ownership of his regulated body through endurance-based performance work.

I was interested in furthering my research interests into 'the evolution of the body' within the discourse of performance art, alongside considering how the status of 'the body' is continually evolving alongside science and technology, and how this in turn, informs both socio-cultural and political understandings of the body. This interest in bodily categorisations and definitions, led to revelations about how bodies are governed (legal), managed (medicine), controlled (cultural), leading to conversations around the ethical, its relation to participatory performance, alongside body ownership [3]. This exploration of body ownership led to the performance practice of Martin O'Brien, who, by staging his everyday experiences of being born with the congenital disease, Cystic Fibrosis (CF), brings both the sick body and illness into the performative. O'Brien brings tropes of CF into his performances by carrying out actions



Fig. 1. *Taste of Flesh/Bite Me, I'm Yours*, Performance by Martin O'Brien in London, April 2015. (© Martin O'Brien.)

(cutting, coughing, piercing, bruising, wounding etc.) which have been adapted from medical procedures used to produce samples. These actions are staged as part of durational performances and occur in front of an audience. *Taste of Flesh/Bite Me I'm Yours* was a slight departure for the artist as some aspects of the performance involved participation, one that required an active involvement from his audience.

*Taste of Flesh/Bite Me I'm Yours* was performed over three hours and although a fear of contagion and its physical manifestation were a point of departure, it visualised this fear through employing some of the aesthetics associated with medical procedures related to treating and managing CF. Throughout the performance, the artist was chained to a fixed point, and it was from this fixed position a series of actions were repeatedly carried out. These actions included; *painting circular marks with head, biting and being bitten by audience members, piercing the mouth with hypodermic needles and coughing up mucus into sample dishes*. All of the actions elicited a variety of response from the audience ranging from 'shock' to 'disgust', 'nervous laughter' to 'wincing', but overall, there was a sense of empathic connection towards this body which endures beyond the art context where it was being witnessed. The setting for this performance, a purpose-built and semi-contained quarantine room, created a space without a physical separation between the performer's actions and his audience. This led to a constant movement of people through

the space and at certain points, allowing for an active participation, although there were no restrictions imposed on the audience entering and exiting (Fig.1). In performance-theatre scholar Fraser Ward's book, *No Innocent Bystander: Performance, Art and Audience*, he describes experiences (and behaviours) that might otherwise be viewed as free of context i.e. acts of mundane violence or pathological behaviours which have been legitimated, due to their framing as art [4]. Ward goes on to further disseminate this point i.e. 'framing as art' by calling into question the ways in which and by the fact of such framing, extreme performance works due to their sheer unapologetic and seemingly disregard for ethics and audience, are readily attacked as playing out pathologies or deemed as fetishistic [5].

Performances such as *Taste of Flesh/Bite Me I'm Yours*, which operate at intersections of the medical, socio-cultural and political, where the 'artist's body' naturally takes centre stage as both subject and object, with the sick body, spoken of in this context categorised medically (and culturally) as one that is disabled [6], raise important questions about how bodies are categorised, highlighting the complex relationships between the body and its governance. This bringing together of medical, social, cultural and political is not new within the genre of performance art, and whilst important work has been done historically, specifically in the field known as disability arts, a readdressing of the invisibility of these artists within the theoretical discourse of performance studies is still one that is ongoing. In framing the sick body in within the context of masculinity and emasculation due to illness, a discussion of disability is needed in order to reveal the nuances in trying to understand the complexities present in a work such as *Taste of Flesh/Bite Me I'm Yours*. A work that is staged by a disabled artist, in so far as the markers for disability to which the work might be attributed are invisible i.e. the sick body that looks well is made explicit through performing the illness, CF. Martin O'Brien's endurance-based performances, continue a lineage in the history of (Western) performance art, that test the limits of the performing body through durational works. Alongside this, his works contest its status of 'sick' body by bringing this invisibility to the foreground, within this context of contemporary art.

In Greek ethics, people were concerned with their moral conduct, their ethics in relation to themselves and to others. What they worried about, at the time, was to constitute a kind of ethics which was an aesthetics of existence. Today, an ethical framework for performance art is discussed in relation to addressing the limits of 'watchability' and 'bearability', longitudes approaches towards administering informed consent, with regards to how much information should be made available to an audience prior i.e. *What do you consent to when you set out to be an audience member, especially when performances are of an extreme nature?* In this regard, considering the ethical implications of this artwork, through post-performance discussions and audience feedback, the focus centred around how much information surrounding the 'biting-participation' sequence should have been made available to the audience prior, and whether or not this participation was more to do with shifting power dynamics between O'Brien and his audience. I feel more inclined to conclude on a speculative note, by not questioning the artist's intentions, nor setting out moral codes of conducts as to what is watchable, bearable and acceptable. I consider this shift in power dynamics, through the notion of 'collective gazing', which might have brought about an inner

experience of the 'gazed-at' object (the sick body). All whom were present perhaps experiencing something similar, when all of our eyes point towards the same object, then, by perceiving another's gaze and following their line of regard to the gazed at object, this actually brings about a meeting of minds: at one level, people will share a similar visual experience of one aspect of the world, regardless of our varying ethical positions.

## References and Notes

1. Susan Sontag. *Illness As Metaphor* (New York: Farrar, Straus and Giroux; 1978).
2. See Lucy Panthakay "On the Evolving Cultural Relevance of the Sick Body in Contemporary Art Forms", *Academia.edu*. Available at: [https://www.academia.edu/7291458/On\\_the\\_Evolving\\_Cultural\\_Relevance\\_of\\_the\\_Sick\\_Body\\_in\\_Contemporary\\_Art\\_Forms](https://www.academia.edu/7291458/On_the_Evolving_Cultural_Relevance_of_the_Sick_Body_in_Contemporary_Art_Forms). Accessed July 1, 2015, 8.21am.
3. When I speak of body ownership, I am referring here to that which concerns what individuals are able to do to their bodies both in terms of subjecting it to pain or its modification. English law is very careful not to talk about body ownership.
4. Frazer Ward, F. *No Innocent Bystander: Performance, Art and Audience*, 2011, Dartmouth College, University Press of New England, pp.15.
5. *Ibid.* pp.16.
6. In *Disability and Contemporary Performance: Bodies on Edge*, Petra Kruppers describes the term "disability" as something that cannot easily be pinned down i.e. it is never fixed. Is it a thing that happens to someone? Is it a culture? Or is it a way of being in the world? Rather than view disability as "being fixed: in time, in a condition, by specific symptoms" (8-9), Kruppers suggests that performance has the capacity to create meaningful interventions in the flow of time and space. To be seen as actively becoming, rather than as a stagnant metaphor for illness or brokenness, is to make visible the instability of the experience of the body and selfhood regardless of a performer's ability. Disability as a social category for Kruppers is deeply contested as it is used to describe individual's (or a people?) who are in a position of difference from a centre and further highlights the complications of even pinning down this centre from which the disabled grouping differs from. She sees disability as different from, but operating similarly to other societal categorisations such as race and gender in that there are shared aspects with ways of knowing difference.