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BLINDFIELD

a multi-screen film installation by Christine Webster

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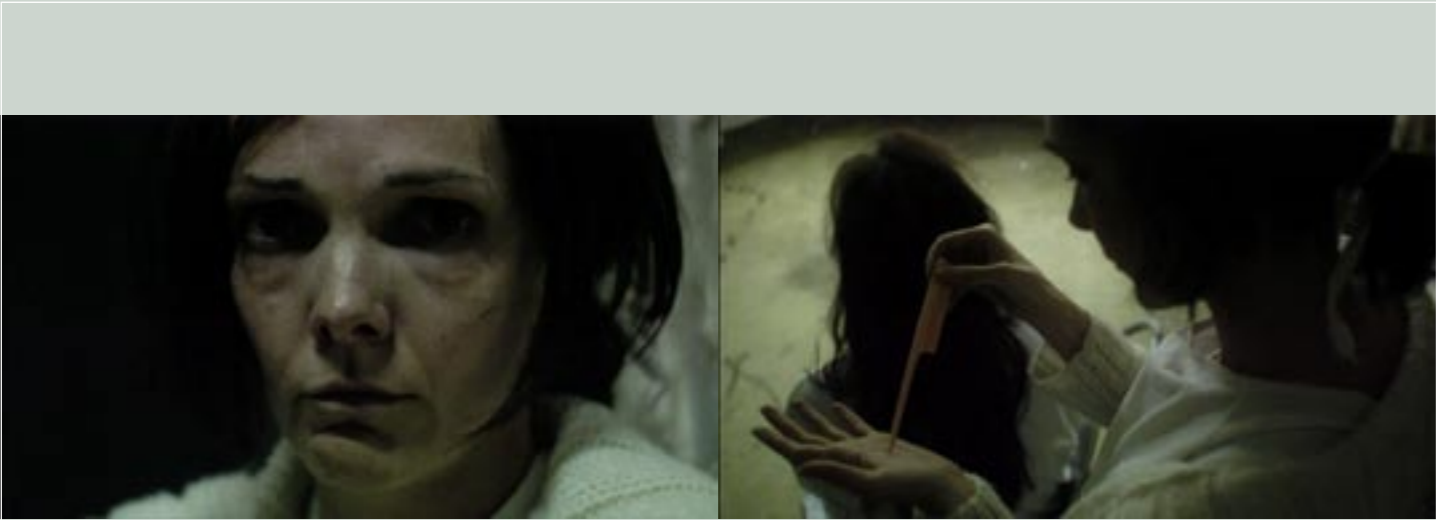
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BLINDFIELD

A MULTI-SCREEN FILM INSTALLATION BY
CHRISTINE WEBSTER





POWER GAMES: CHRISTINE WEBSTER'S BLINDFIELD

Laura Earley

The exercise of power perpetually creates knowledge and, conversely, knowledge constantly induces effects of power

Michel Foucault

In a completely sane world, madness is the only freedom! ...

J G Ballard

The human body is an intersection between art and medicine. Furthermore, as both disciplines have historically been masculine domains, the female body has a significant role. It offers opportunities to challenge and subvert, often operating in binaries such as visible / invisible, clothed / unclothed, normal / abnormal. An analysis of Christine Webster’s artistic practice could easily focus on this aspect – the treatment and behavior of the feminine body – but this would be to foreshorten what she does, and how her works speak of wider sociological constructs and issues. In her work she utilises the human body to reveal the psyche. The subjects she focuses on often ‘perform’ for the camera through role-play, masquerade and other theatrical constructs. Their behaviors, and her relationship to them, are the way Webster has explored how representation is always coded.

The artist’s most recent work, *Blindfield* (2007), moves away from investigations of role associated with gender, to have wider resonance. The subject, loosely, is that of madness, and the action is played out in its home of old, an abandoned asylum. Webster’s use of such a loaded site locates the work in a broader genealogy, most usefully alongside the theories of French philosopher Michel Foucault. Both Foucault and Webster refer to actions – cause and affect – that have shaped ‘modern’ civilization. With the backdrop of the asylum, their interests become focused upon the role of the individual in the structure of power.

Blindfield is a multi-screen film. A loose narrative unfolds that follows three female actors in various scenarios within the asylum. At times these women confront the

viewer, looking directly at the camera, a whole range of emotions crossing their faces; in the opening sequence your gaze is held by the first actor – initially vacant, her expression becomes sad, scared, haunted but always somewhat accusatory. Who is this woman? Where is she? How are we involved? Alongside this, in a different place, are two women. One sits, back-turned, whilst the other plays with a comb, eventually tending to her companion’s hair. Her actions flit between tenderness and frustration, becoming seemingly both provoked and provocative. The seated woman remains still, she does not react; she is powerless.

Blindfield is a metaphor for Webster. It uses a place and a history to ask questions now. She asks us to consider how individuals are controlled by societies, and how ‘madness’ as a description can be used to position people outside of their community. The creation of a deviant – here it is insanity – necessitates a norm. Those who govern the label hold the power, able to deem anyone who contests or opposes as deviant. As a disease, madness also presupposes a cure and the reformation of patients is seen in society as being in the interest of everyone. It gives hope and purpose. Ultimately, *Blindfield* is about freedom and ‘the gap between the individual and the inevitable momentum of a society which doesn’t listen.’¹

The artist came to *Blindfield*’s subject matter via two routes. The first is the use of a place as a trigger to ‘mediate on past events’². Webster visited a number of sites in the Eastern region of the UK before selecting an asylum in Surrey to use in *Blindfield*. Her actual choice is not overly significant, because these sites have a collective history and have witnessed many of the same things. The use of loaded places charged in meaning recurs in Webster’s practice. *Le Dossier* (2006) is set in a French château, chosen because it resonated with media stories of another such place where disturbing, abusive acts had happened. Webster’s piece suggests these acts but is not a factual restaging. She fictionalises and interprets. In much earlier pieces, such as *Craigwell House* (1984), the backdrops are also abandoned,

half-sites; where the artist and her subjects felt free to explore their ruminations. In the years between these Webster’s works centered on her actors, framing them with black backdrops to focus attention on their dress or pose.

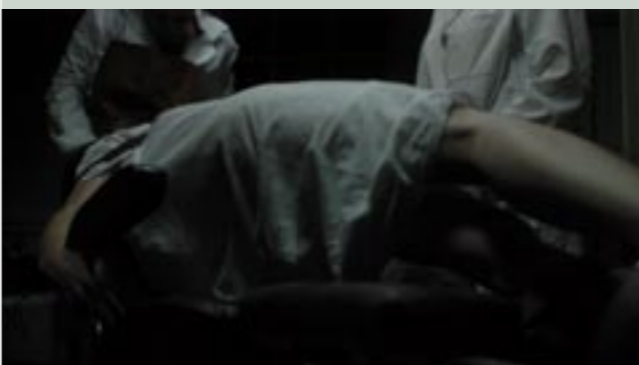
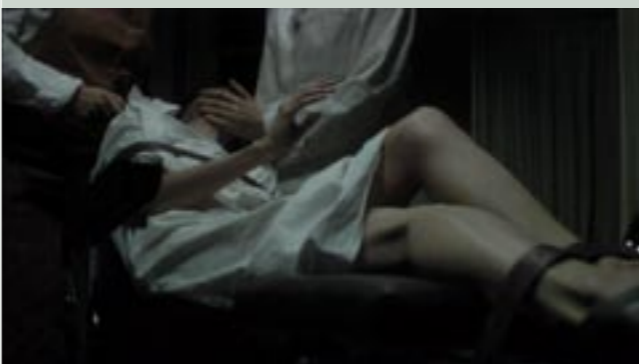
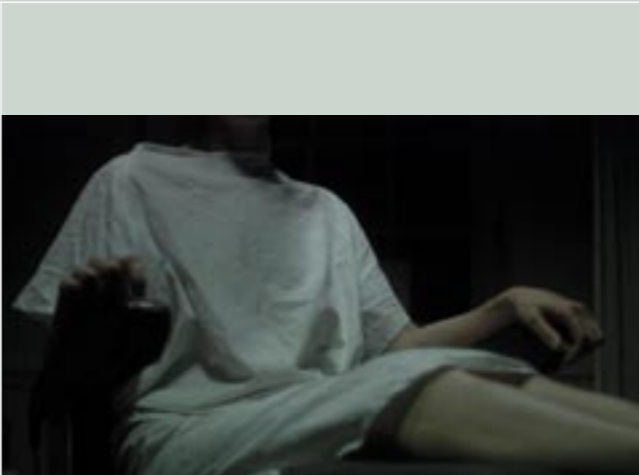
The other way Webster came to this work was a more literal mediation on past events: the uncovering of a silenced family history. On discovering that her Grandmother had been institutionalised and subjected to Electric Compulsive Therapy (ECT), the artist began thinking about what this meant. Her Grandmother had been a strong, intelligent woman, who acted as town clerk during the war. When her role returned to wife and mother she was seemingly unable to cope and deemed to need treatment. With this knowledge, Webster set about trying to understand this state and its implications. Two generations have since passed meaning her investigation can perhaps occur more comfortably. However, this is not to suggest that *Blindfield* is a sentimental film. It is instead a cautionary tale that gives visibility to the voiceless; uncovering what resides in residues.

Through his writings (published between the 1960s – 1980s) Foucault studied the constructs of madness, crime, and sexuality to analyse the relationship between power and knowledge. His work focused on public institutions such as prisons, hospitals and schools, tracing their development to examine how they have shaped the constructs of modern culture. Foucault asserted that knowledge and power are a nexus – mutually providing and supporting one another – understanding power as exercised rather than possessed. In *Discipline and Punish* (1977) Foucault used the prison and the asylum as key examples where the knowledge/power relationship is manifested and can therefore be critiqued.

Foucault describes disciplinary power as exercised directly on the body, not necessarily through acts of violence but violation – particularly surveillance and examination. He considers such discipline to create ‘docile bodies’, objectified and constantly watched. The patients we see in *Blindfield* are arguably docile; they are watched by us and their role is a helpless one, becoming dis-abled by a loss of identity; their clothing, personal objects, even names have been removed. The idle and useless acts they undertake – Hoovering, sitting, combing another’s hair – fill time but do not fulfil them. They do not seem to be cures.

The docility of Webster’s patients is underpinned by time. Throughout *Blindfield* there is a constant sense of waiting and foreboding. Not by choice, the women are caught in spaces, isolated and seemingly unsure of what is happening or why. One traces shapes across the floor as if it is a piano, another picks and pushes the flaking walls of her tiny room, and even when with another person there is no sense of dialogue or pleasure. There are occasional moments of tenderness but these are always tinged with something darker; combing another’s hair is preceded with menacing movements of the comb between fingers, and the anonymous hand placing a clown’s nose on the face of a patient is playing a game, but it is unclear how participatory it is.

Moments of activity happen but these relate only to treatment. Two nurses force a patient into the ominous ECT chair; her movements have been slowed, evoking something sexual or



akin to drowning (submersion was another technique). The soundtrack that accompanies this sequence has also been slowed. It is barely recognisable as human cries, instead seeming almost animalistic, to further suspend the pace.

Chairs are a recurring object in the film. It is into a chair that the ECT patient is placed; in another scene a faceless patient sits waiting – her fingers tapping the chair’s arm idly – while its structure forces her posture to become something almost regal; we see a lone woman on a domestic chair, her dress is pulled up but she yanks it down before wrapping herself in and around the chair, as if it is a protective shield or a comfort. From what is uncertain but abuse is implied.

Blindfield is an emotive piece because so much is inferred. Many things remain unclear, including the role of the viewer: are we implicated in the scenario? A repeated sequence shows a lifeless patient on the floor. She is straitjacketed, eyes wide and staring but we do not know if she is dead or alive. Has she been abandoned after treatment? The camera pans in and around her with dizzying effect. On the accompanying screens is footage of a rollercoaster, its movement contrasts with her stillness. Is this a metaphor for escapism or a reference to time passed?

Everything occurs inside the asylum. At one point we see the view from a window, as if a patient searching for an escape; later the camera traces a corridor, moving towards a hazy window at its end, suggesting some sort of hope. The women however seem never destined to leave; their clothing looks like nightware and they are either barefooted or wearing slippers.

Webster chooses particular rooms in the asylum. Rather than focusing on the communal spaces or the building’s decrepit yet grand architecture, it is the domestic ‘cells’ that become her backdrop to the action. Often empty, these rooms force attention back to the behaviours of the patients – their situation being heightened by the lighting and hue of the filmed imagery.

One scene takes place in what the artist termed the ‘surveillance room’. During the filming process this small space was rigged with cameras and CCTV and given to the actor for her to perform. The resulting sequence sees her pushing at the walls; bits of wallpaper fall away, and it is as if she wants to make it perfect but the impossibility of this is frustrating. As the activity and emotion reach a crescendo, she begins to cry and starts saying something that we can not hear. She is voiceless, powerless and alone. In these moments the camera becomes a tool. It can manipulate and intrude, relentlessly ‘knowing’ its subject. Foucault too recognised this power relation in his discussions of surveillance as an institutional technique.

Foucault’s discussion of the asylum looks at distinctions made between classes rather than gender. However many feminist theoreticians have used his work because it explores the relationships between power, the body and sexuality. Similarly, other writers have demonstrated how the female hysteric, or madwoman, is a historical construct. Beyond medical contexts, images have long appeared in art and

literature that align women with emotion and irrationality. As the historian Elaine Showalter terms it, there has been a “cultural history of madness as a female malady”.³

Although *Blindfield* focuses upon the condition of three female protagonists it is not a gender-specific piece. In the asylum women and men would have been kept separately, so perhaps Webster focuses only on a part of the institution’s remit. However, the relationship between women and hysteria is worth considering because aspects of it arguably still permeate today. It speaks of methods that create and control an ‘other’. The female malady related to sexual difference; women were psychiatrically condemned through supposed vulnerability and delicacy that opposed masculine rationality.

As asylums developed during the 19th century the female patient was central to medical teaching. At the Salpêtrière clinic, Paris, psychiatrist Dr Jean-Martin Charcot used them to visually demonstrate the symptoms of madness; a number of paintings document Charcot as the principal figure amongst a group of male medical students, all turned to watch the female patient fainting in a moment of hysteria. As a pathological infliction the diagnosis of madness was problematic. Consequently photography became a significant tool, and was pioneered by Dr. Hugh Welch Diamond in England during the 1840s. Viewed as empirical and truthful, it was considered to be the only way of making such diseases visible; “the advent of photography provided a valuable aid in the management of women”.⁴ Women were caught on camera displaying their madness through pose and action. Today we understand such images as obvious endorsements of doctorial authority that reveal how the camera can be used to exploit. *Blindfield* responds to these staged images through the use of camera and performance but the role-play Webster initiates subverts the intentions of doctors like Diamond and Charcot. Instead we are given the power to question what we see.

Laura Earley, November 2007

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1. Webster in conversation with the writer
 2. Ibid
 3. Showalter, Elaine, *The Female Malady*, Virago, 1985, p5
 4. Ibid p86

