

www.julieshiels.com.au

#### Acknowledgements



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#### PROJECT SPACE/SPARE ROOM

BUILDING 94: 23-27 CARDIGAN STREET, CARLTON



Supported by

Managed by the RMIT School of Art

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**GALLERY OPENING HOURS** Monday – Friday 10.00am to 5.00pm, Saturday 12.00pm to 4.30pm



#### PROJECT SPACE/SPARE ROOM



#### Cusp

JULIE SHIELS

To be opened by JASON SMITH

Director and CEO of Heide Museum of Modern Art

FRIDAY 4 TO THURSDAY 24 JUNE 2010

**OPENING THURSDAY 3 JUNE 5-7PM**

**FLOOR TALK THURSDAY 10 JUNE 12-1PM**

**ADDITIONAL OPENING HOURS SATURDAY 12-4.30PM**



*Cusp* invites us to explore a modern liminality — the surgical procedure — by giving form to empty spaces in surgical technology. Embodied here are not the implements themselves, but the spaces they once occupied in sterile plastic packaging. By making these spaces manifest in resin the artist has created metaphors of the body spaces these machines themselves occupy and transform.

Anthropologists have a long fascination with ritual associated with significant junctures in individual lives ranging from initiation to illness and ultimately to death. These *rites de passage* as Arnold van Gennep called them, typically display a three-part structure of separation, a threshold or liminal phase, and reintegration.

Victor Turner alerted us to the power, the marvel, of the liminal — that space (and time) in-between, in-between the life of the novice and the life of the initiated, the life of the sick and that of the cured — the life of the patient or one who endures suffering. Liminality is the space of elsewhere, the domain set apart and given its own rhythm to establish its own tempo. In ritual, it's typically music that does this. Consider how we intuitively recognize the chanting, drumming and bell-ringing as markers of a ritual process even when the ritual itself is unknown.

Most powerful of all liminalities are the rituals of life and death. Not surprising to find, therefore, that life crises both preoccupy religions and are steeped in the aesthetic. And this is just as true for the modern as for the ancient; just as true for the hospital operating theatre as it is for the church or temple.

Liminality is thus the domain of the sacred, including in zones we moderns imagine to have dispensed with the sacred and to be entirely rational and scientific. Even the most skeptical strive for transformation and take comfort from those momentary experiences of what Michel Foucault called “other spaces”. The world may have its god-botherers and its believer-botherers, but they all share a liking for the liminal, be it in a cinema, an ocean or on a mountaintop, in a shrine or at a cemetery, the hallowed ground of the “G” or on a treadmill in the gym. Step outside the ordinary and surrender to a new, albeit temporary, rhythm and you are on the cusp of a transformation from one mode of being to another. And at the heart of any surrender and any transformation there must be the aesthetic. For the aesthetic experience organizes the space and time of the liminal. And this is why the liminal phase in *rites de passage* from all over the world is so intensely symbolic. Masks, sand paintings and sculptures predominate and commonly their technique is one of inversion. Large becomes small, small becomes large, sexual ambiguity and exaggerated features abound. The novice learns what really matters.

Think about a hospital for a moment. With its uniforms and jim-jams in the daytime, the hospital marches to its own beat and offerings abound — flowers (the ritual object *par excellence*) enough to suggest a Neanderthal gravesite! The operating theatre is the sacred inner sanctum, where the costumes are different again, the barriers strong and the transformations extreme. Surgery, that most radical of violations, the invasion of a living body by a team of other humans who cut and prod and probe and look at organs and body parts on television. It's called a theatre because it's a way of seeing, and, as the Greeks knew, all ritual

is theatre (although not all theatre is ritual). Its sacra are body parts. The internal made external and set against a Platonic ideal — the perfect liver, the healthy heart. The artworks here describe empty spaces that at once speak of the liminal phase of a surgical procedure and highlight the patient's “dead to the world” presence through that procedure — her being on the cusp, the procedure being about her, while she has become so thoroughly objectified to the point that she disappears; rendered into body parts.

Don't say that medical technology is only pragmatic where a ritual mask is... well, decorative? These are all technologies. They simply depend on the larger system of knowledge of which they are a part. Shiels invites us to stand outside our knowledge and look with fresh eyes, not simply at the material culture, the artefact, but at its mould, its imprint, its fossilised remains.

Because in surgery our ritual objects are our bodies, the heart of the medical aesthetic is the an-aesthetic. The space of elsewhere is rendered absolute when the patient surrenders to a drug-induced psychosis. It seems to be painless, but surely that knife, that needle that hammer blow on a hip bone cause pain. Yet we patients don't know, because, like shamans, we've gone on a journey. Unlike the shaman, though, we found no friends and reached no destination, that is, of course, if we survived. We can't remember anything and that's a sign that it was a success — the transformation was achieved.

#### Rohan Bastin

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Inside Pages, Left to Right  
*Under the knife — Monday's List* (detail), 2010  
Resin  
45 x 485 x 8 cm

*All thing considered 2* (detail), 2010  
Plaster  
75 x 75 x 5 cm

Outside Pages  
*Under the knife — Tuesday's List* (detail), 2010  
Resin  
50 x 510 x 8 cm

