



Interview with Michelle Hartney

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Interview conducted by Lena Šimić and Emily Underwood-Lee

Interview edited by Lena Šimić and Jennifer Verson

Michelle Hartney's work focuses on women's rights, maternal healthcare issues, and misogyny in art institutions. Hartney works in a variety of mediums, including fiber, installation, community-based interactive performance, guerrilla performances/protests, and the internet. Her interest in using art to address social issues began during her graduate studies in art therapy at The School of the Art Institute of Chicago, where she was an Albert Schweitzer Fellow. Hartney founded the Women's Health Collective in 2016, an organization dedicated to utilizing creative approaches to raise awareness about women's health issues by linking artists, designers, writers, musicians, and activists to work collaboratively on socially engaged, community-based projects. Becoming a mother entirely shifted the focus of Hartney's work. Giving birth was incredibly empowering for the artist and sparked her interest in knowing more about both the state of maternal healthcare in our country, as well as the history of childbirth in America. This research bled into her work as an artist, and was the beginning of combining social practice directly into her art practice.

Emily: Our first question is a really simple one, which is whether you identify as to mother/artist and what is your relationship to that.

Michelle: I definitely do identify as a mother/artist. It's really hard for me to separate the two because they are both very strong parts of my identity. I do a lot of work about maternal health care issues, not specifically mothering, but about pregnancy and childbirth. I don't think I can get away from that label and I am fine with that.

Lena: Your maternal art making is very much tied into your activism, can you speak a bit about your relationship to activism and art, to particular examples of your art practice?

Michelle: I think one example is my work that I've done about the United States' high maternal mortality rate. The way I've used my art to raise more awareness about that issue is through a project called *Mother's Right* (2015), which was a performance and installation piece where I, along with other midwives and doulas,¹ sewed 1,200 hospital gowns, one for every woman who died during childbirth in the United States in 2013. The gowns were hand silkscreened with tiny drawings of the plant derivatives that have been used on labouring women for the past 150 years in the United States, many that were very harmful to women and to children, their babies.

¹ For more information visit [Mother's Right — Michelle Hartney](#).

Emily: When you say plant derivatives, are you referring to pharmaceuticals?

Michelle: Yes, there are little poppy flowers, little plant drawings. Then, for the performance, I had pairs of women standing facing each other and we appropriated the flag folding ceremony that's used at the death of a soldier in the United States. That's a very, very sacred ceremony that I knew was going to be controversial to use. But the piece is also about postpartum PTSD and the fact that women are coming out of childbirth with the same psychological symptoms as men and women who have fought in combat, which is startling and yet a lot of people don't know about it. So that's why I appropriated that ritual. Within that ceremony every fold of the flag represents something. And the ninth fold represents motherhood and women. So, I cut the gown so that they would stop on that ninth fold.

Lena: Where was this performance, where did it take place and how many times?

Michelle: It took place in Chicago in 2015. The first one was a public performance outdoors at Daley Plaza, which is outside our city hall and there's a huge, huge plaza. The performance coincided with a rally that was held nationwide by the non-profit organization 'Improving Birth'. For a few years, they were holding nationwide Labour Day rallies to improve

birth, so that was kind of combined together. I was the rally coordinator for Chicago, and that performance was included in the rally.



Michelle Hartney *Mother's Right* (2015), installation and performance piece, 1,200 hospital gowns, Daley Plaza, Chicago.

Emily: When you talk about 'Improving Birth', can you tell us a bit about what you mean by improving?

Michelle: 'Improving Birth' is a really amazing non-profit organisation that was started by Dawn Thompson. They're fighting for women's rights during childbirth: the right to have consent to what a doctor does to your body. I've done some work with them and they've grown a lot, but they

started off as a small grassroots organisation when there really weren't a lot of conversations happening about obstetric assault or postpartum PTSD in childbirth.

Lena: So, *Mother's Right* is a very explicitly political work. Does the project also involve aspirations to change policy or lobbying around these issues? Does it have attached to it, a letter to sign, a petition or something like this?

Michelle: Not specifically in the project that I did. I know 'Improving Birth' definitely is more tied to actual change within politics. That is an element in other parts of my work, but not with maternal health care. That's powerful and I really want to incorporate that more into my projects.

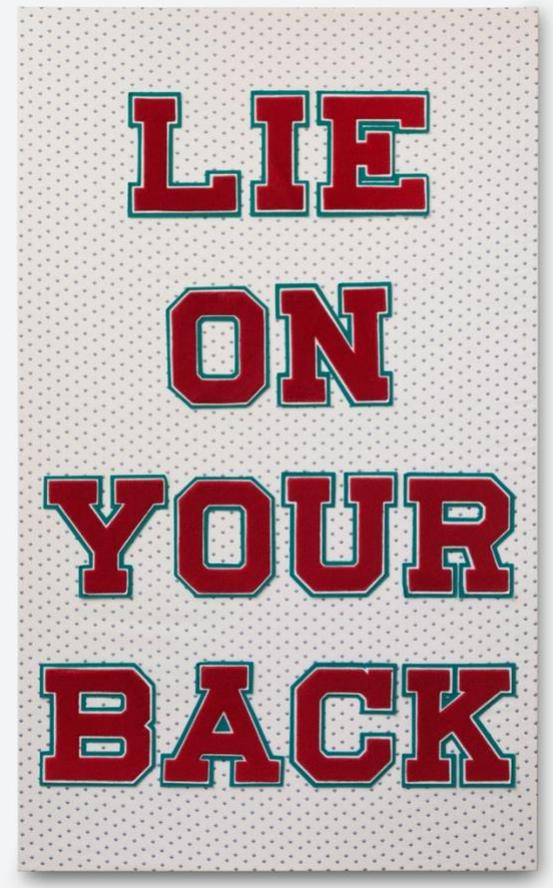
Emily: You said you particularly focussed on birth and pregnancy and not on other aspects of maternal life. So, first of all, I don't know if you have children, if you are a mother, and I wanted to ask about that. But then I also want to talk about why that particular time: pregnancy and birth.

Michelle: I am a mom, I have two kids, I have a nine-year-old and a seven-year-old, and I haven't made work about motherhood yet. I just haven't gotten to that yet. I really started making this work, specifically focussed on pregnancy and childbirth, after I gave birth to my second child.

I didn't have a horrible experience giving birth. I went in very informed and knew what my rights were, the choices that I had. My doctor didn't make it to the birth. It was really fast. So, I had a stranger who had never seen a natural childbirth and they were forcing me to get on my back. I knew that I didn't have to. There was this argument right as I was giving birth to my baby and there were just some other things that were not okay. So that really got me interested in doing research about childbirth and specifically the history of childbirth in the United States. I think that's where I just became obsessed with the topic and why I've been focussed on that right now and haven't gotten into making art about later motherhood. That's definitely coming in the future.

Emily: But it's not autobiographical work, it's very much explicitly about the politics rather than your own experience.

Michelle: I did a series called *Birth Words* (2014). There was a campaign by another non-profit organisation called 'Birth Monopoly' who created 'Break the Silence' campaign, where they asked women to hold up a card that had a phrase that their doctor said to them that was horrible and abusive. I took those quotes and made large pieces out of them. The one quote I did that was mine was "lie on your back". All of the quotes have a tie in to rape culture. A lot of the quotes you can almost imagine a



Michelle Hartney *LIE ON YOUR BACK* (2014)
varsity lettering, custom printed fabric on
canvas

rapist saying to a woman. So, I think that's the only autobiographical bit I have in my work.

Lena: Okay, but, in a way, the desire to do the work has been provoked by your personal experience and particularly by a very visceral bodily experience, because even just this saying “lie on your back” involves the action of the body. So, there is something quite visceral and bodily about the work. It connects to ‘the personal is political’ motto or how the personal then becomes political, that we address it in public works.

Emily: And this bodily work is linked to your activism, which we have already talked a bit about. Do you think that activism is a responsibility or part and parcel of being a maternal artist?

Michelle: No, I would never want to put that responsibility on the shoulders of any artist, especially of any mom and especially of any mom artist. It's hard to be an artist, it's hard to make a living as an artist. I think that your work has to come from really deep within a passion within you.

And if you don't have that passion to make work about something, then, you can't do it.

Lena: To what degree is your maternal making also linked to issues of maternal solidarity and embedded within community or interested in community making?

Michelle: *Mother's Right* (2015) involved the Chicago birth community in a couple of ways. We did these sew-ins with some doulas, midwives and moms. For any woman who wanted to take part, I opened up my studio, invited community members to come in. I had a bunch of sewing machines set up and we all sewed together. I loved having that aspect of the project where women were coming in and using their hands to make the project happen.

Lena: Did you find, beyond the art making, that becoming a mother also creates a kind of community or network? Did this happen to you? This was my personal experience, through the experience of becoming a mother, I was able to join different communities. That was quite an important part for me on my journey of being a mother and then a mother/artist too.

Michelle: I would definitely agree with that. Also, specifically within the art world, maybe even more so than in my personal world. I was really able to find a community of mothers, of mother/artists, not necessarily

in Chicago, but because of social media, all over. I think that being an artist can be isolating. I'm alone in my studio every day and then being a mother/artist, making work about motherhood... 'There's a mother shaped hole in the art world' – that's a quote, I can't take credit for that.

Emily: I think that comes from Lise Haller Baggesen's *Motherism*.²

Michelle: I feel really lucky that I've had that access to the mom artist community. I imagine that has not always been there. Social media has helped us so much to connect with each other.

Emily: That takes us onto the idea of the marginalisation of maternal art, which a lot of artists have talked about when we've interviewed them, the idea that mother art is somehow unacceptable within the art world.

Michelle: Absolutely, but I feel like the culture is starting to shift right now more than ever. I admit that I have had mixed feelings and worry about being pigeonholed. I know how the art world is and the mainstream art world doesn't really want to hear about all the mom stuff. However, I really feel like that's shifting. Because of the pandemic people are paying more attention to the invisible load and all the weight that moms are carrying right now. In the United States, we just had this group start called 'Art Mamas'.³ There are a lot of art mom groups, but

² Haller Baggesen, Lise. 2014. *Motherism*. Green Lantern Press.

³ For more information visit [Art Mamas](#).

this one was started by two non-artists in the art world, and it's grown really fast. It's different because the group includes curators and art lawyers and art fair people, so, it is a more well-rounded representation of moms in the art world. I think there's been a lot of power in artists connecting with those other moms in the art world.

Lena: Cultural ReProducers are another group, who are Chicago based but also international.⁴ Just with the wording of their name, cultural reproducers, they are taking on a more critical framing of mother/artists and I thought that was an interesting and important strategy. There is definitely a proliferation of these mother artist groups. I suppose for each one of us it's a question of how we want to identify, as artists, or as scholars in our case too.

Emily: This is a question about form, you cross a lot of boundaries with your work. You talk about performances, sewing and printing. I know you've been working with text as well. Do you think that there's a particular maternal aesthetic that's present in your work and all that you are dealing with?

Michelle: I would definitely say that my roots are in fibre. I think I started sewing at a very young age and I come from a line of women who made things with their hands, crocheted and sewed and made clothes out of

⁴ For more information visit [Cultural ReProducers](#).

necessity, like my grandmother, and my great grandmother. I think that any fibre-based material is inherently embedded with the feminine and in motherhood for sure. I also think that with performance too. I really don't identify as a performance artist, it makes me uncomfortable because I'm so shy and it really pushes me out of my comfort zone, which is a good thing. And I need to do more of that. I'm in awe of performance artists, so I feel like I'm not very brave in my performance work. But I really do hope to incorporate more performance in my work.

Emily: I'm not sure I agree with you, looking at documentation of your work. Your work incorporates loads of performance.

Michelle: I guess what I'm saying is that I'm not in it often. I have other people perform it and part of me feels that's not cool because I'm making other people put themselves out there and I should be taking that on as well. I took part in *Mother's Right* (2015), but I had another performance I did about obstetric assault and I just couldn't do it. I wasn't brave enough.

Emily: That's the piece *Kimberly Said No* (2016). Can you talk more about that piece?

Michelle: It's a piece about a woman named Kimberly. When she was giving birth to her first child, she had told her doctor that she was a two-time rape survivor and she asked him to be gentle with her. And as she

was pushing – and she wasn't pushing for very long – the doctor was really rude and really impatient and told her he was going to give her an episiotomy. She was begging him not to do it, begging him and begging him. And yet he cut her 12 times. He completely mutilated her. It was all caught on film, which was a really big deal because in the United States you are not allowed to have a camera on when you are giving birth in a hospital. You are not allowed to film your child's birth at all because of potential liability for the hospital. We have such an issue with medical malpractice in this country, and obstetricians are sued more often than any other type of doctor, so they don't want their possible mistakes to be documented. But in Kimberly's case, they happened to have a camera that was sitting there and the whole thing was documented. This turned into Kimberly trying for a year to find a lawyer to represent her because this was assault and it was right there on film. And yet she could not find a lawyer, no one would take her case on. It was eventually 'Improving Birth', that non-profit organisation, that found her a lawyer, the case went to court and Kimberly ultimately did win her case. That doctor is no longer practicing.

What I did was took the transcript from that video. The transcript is really powerful because she's begging him not to hurt her. And I basically hired actresses and an actor to sit and do a table read of the transcript. It was just too graphic to act it out. It's a really disturbing video. I've had people at the performance get really triggered by it because it's horrific. I had Kimberly's permission and we've become friends, and it was ultimately a

really empowering thing for her: to have her story get out there in another form other than a news story.



Michelle Hartney *Kimberly Said No* (2016) performance piece

Lena: I remember your discussion from the forum presentation. *Kimberly Said No* reminds me of the film I saw on Netflix recently, *Pieces of a Woman* (2020). A complex film about a woman that had a child who died at the home birth. She was pushed to sue the midwife, but in the end decided not to. It's interesting what you said about filming not being allowed in the hospital, which is kind of a public space, but then here in *Pieces of a Woman* the childbirth was happening in private. The film gave a narrative that it's very easy to sue the midwife, a birth rights activist,

and that the grieving mother will win. The film was actually about grief more than it was about this issue of suing, but I suppose it was about both. An invasive practise can happen to women and especially when placed in these vulnerable positions, with births in particular. I'm also referring to some of my personal experience and some of my friends too, to do with smear tests. There's a campaign now with cervical cancer screening, about the way that this procedure is done, that it should be done in a much more humane and gentler way and that it shouldn't hurt. I've just noticed there's is a bit of a campaign about it on Twitter recently. Obviously, it's quite different to *Kimberly Said No*, but in a way, there's a similar aspect of how woman's body can be invaded in both cases with these medical instruments.

Michelle: In health care, in general, there's very little attention paid to how gently our bodies are treated. I'm thinking right now about a friend who is a cinematographer and was filming operations for a project. He was really startled by how, when a patient was unconscious, the medical staff were rough with moving the body and it was really upsetting, how there was no care with a human body that was not awake.

Emily: I had a very interesting experience. I had a double mastectomy, but I had the mastectomies done at different times. The first one was quite shocking because it was in an emergency situation with no time to plan or process. When I had my second mastectomy I knew what was coming and I wanted to document it. So obviously I'd be unconscious,

but I worked with my surgeon to document it, and then I interviewed the surgeon about it afterwards. There was a remarkable gentleness from the surgeon that was really interesting. She used phrases like “we put a blanket on you to keep you nice and warm”. She really took care of her patients in a way that was wonderful, but then when I wanted to do things a little differently it also became a sort-of over-protective mothering. The surgeon was reluctant to let me document the operation because she kept saying, “well, I'm not sure it would be very nice for you to look at”. No, no. I want to see it. I know what I'm doing. It's part of my arts and academic practice. I don't like the fact I'm absent from this thing that happens to my body. And when I put these arguments to the surgeon she kept asking: “Are you sure? Because we thought it might be a little bit upsetting”. I understand why she did it, I respect why she did it, but it was also care that had the effect of distancing me from my own body. In the end it was all agreed and I got images of my operation and the surgeon spent time talking me through what I was seeing.

Michelle: That would never happen in the United States, that a surgeon would let you film your surgery. We have such different situations in our respective countries with health care, which is so unfortunate.

Emily: Well, we're moving towards you very rapidly. Our government's really keen on your system of health care at the moment.

Michelle: I'm sorry to hear that. It's a disaster.

Lena: An interesting question arises as to what happens just with these examples of filming under the private health care and under the public health care – who is it for? Who has the ownership of it and of one's body? One would assume that because you are a paying client, then you would be able to get the footage of your surgery. Of course, there's a problem with insurance companies that are oftentimes making us act in a certain way to protect the interests of those that are powerful.

I'd like to pick up on what you say about performance and performance as an art form. I am a performer. I've performed quite a bit and find it's an art form that can seem a bit too much sometimes, it's very direct. On the other hand, just the way you talked about working with your hands and crocheting, it seems there is a different kind of more intimate quality to it than these public acts of performance. Have you found through your arts practice and your different projects, that performance offers itself as the art form that it is suitable to address these maternal matters?

Michelle: Oh, I very much think so. There's such a physicality to giving birth and to motherhood – just the physical toll of the everyday tasks you have to do, of taking care of your children, they are so tied to the body, so physical. So, I think that's why performance is such a great way to make art about the maternal and about pregnancy and childbirth. There's more of an intimacy with performance than with a piece that you're looking at on a wall.

Lena: And do you think that intimacy comes from a human relation in space?

Michelle: Yeah, I think it's both, that human relation in space and it's also that with performance, you're making yourself more vulnerable, and that can change the relationship with the viewer.

Lena: Yes, it's happening there and then.

Emily: Can I pick up on intimacy? I was looking at your work *Separate the Art from the Artist* (2018). In that piece you've taken quotes from Hannah Gadsby on Picasso's misogyny and Roxanne Gay on male artists building their success 'on the backs of women and men whose suffering was ignored', or you make a statement about Balthus' highly sexualised photography of an eight-year-old girl and you place these next to the artworks by these artists.⁵ It's very powerful but also understated, you'd have to be almost looking for it to find it. It's not the big macho expression of genius on the wall. I want to ask you a bit more about intimacy generally and how intimacy can be political.

Michelle: In relation to that work, the reason why it is more understated is probably because what I was doing was not sanctioned by the museums. I was actually making museum placards and attaching them

⁵ For more information see [Michelle Hartney – Correct Art History](#).

to the wall in the museum next to a piece by artist that I was making work about. So, I guess in that sense, it's not super obtrusive in scale. But if a person actually made that connection with that wall placard and read it, I think that's where the intimacy with that sharing of information exists.

Lena: One of our findings in terms of maternal performance is that it's bodily and that it connects with relations, or specifically human relations. We talked quite a bit about that, and that it also connects with time, because obviously with this massive event that happens in one's life which is about becoming a mother, somehow time changes and we can no longer participate in our usual schedules because this infant is constantly demanding our attention.

So, with performance, there is also an issue of time and duration, and that's also linked with lots of other art making processes that are about time, for example how long it takes to do something and how carefully we do it, so intimacy maybe comes out from that as well. What's your relationship to time as an artist?

Michelle: The fact that you're asking this right now – I think the pandemic has certainly messed with our sense of time in many ways. As a mom, it's really affecting me, in the sense that, it's been hard being trapped at home with kids, home schooling and just being 'on' all the time. So there's that, but then it's mixed with this thing I'm going through right

now because of the age of my kids, I'm really feeling like time is truly slipping away –I'm going to cry – they're growing and I'm mourning their youth. They are still little, seven and nine, but it's hard for me to pick up my seven-year-old now as they're getting too heavy. I am really experiencing a different relationship to time right now.



Michelle Hartney *Love in Interstellar Space* (2012) mixed media

As far as my work, I don't think that's manifesting in the work I'm doing right now. But this conversation makes me remember when my first child was born and for the first time in my life, I did not have time to do whatever the heck I wanted. I had to get very focussed and be very purposeful with my time. I couldn't just slack off and surf

the net the way I used to. The first project I took on after she was born was this super labour-intensive embroidery work that took forever. The series was called *Love in Interstellar Space* (2012).⁶ If anything, it made it really difficult to complete. I think I got into that work because I could sit and it was mobile and I could do it anywhere. I chose a project where I

⁶ For more information see [Love in Interstellar Space — Michelle Hartney](#).

was experiencing this new relationship with having no time and then taking on something that was just so time consuming.

Emily: There are two things going on there that I am really interested in. One is that your lived experience is shaping the form: the fact that it's mobile, and you're being pragmatic in your choice. The other is this idea of the never ending, the endurance, the repetition of sewing. I sew and I crochet. I don't do it for anything other than a hobby, I'm not comparing my making of bobble hats with your work in any way. But the thing I love about it is that you are repeating the same action again and again and again and again. The needle goes in and the needle comes out, the needle goes in and the needle comes out. There are some sort of equivalents here with that new baby period. I'm just thinking about that constant repetition and doing that sewing in that period.

Michelle: Absolutely, that period of time with the baby is all about repetition. And the schedule is the same every day. I think the difference is that the repetition that you get from embroidery and bead work is that it's soothing whereas the repetition and those other aspects of my life, like the diaper changing, were not fun. I never thought of it like that, how that different form of repetition brought comfort to me.

Lena: When you first have a baby, time stretches. it seems never ending, it's always there, and there's repetition and you are just in this abyss. And yet as you just mentioned, time is slipping away too. The children

are growing up. This perception of time with children is really intriguing. My youngest is seven, but my oldest is twenty and I'm not having any more children, but, as you say, time with little children is slipping away. It's quite sad, and it makes me want to hang onto that last baby feeling, but at the same time I'm also very happy for the older ones to be moving on.

Emily: I've got a thirteen-year-old and a nine-year-old. My thirteen-year-old is very actively pushing away now. And then there are things like bedtime stories, I'm still desperately trying to read her a bedtime story and she doesn't want one.

Michelle: Oh, that's so hard. Yeah, that's a part of it. I'm trying to prepare myself for that. That makes my heart hurt.

Lena: I think there is a relief in it as well, as more time is reclaimed and new opportunities open up. I'm speaking now from my recent experience of being divorced. Suddenly, I have this extra time, extra space. In the beginning, I was really worried about it, but actually, I'm quite happy.

Michelle: It's some time to yourself.

Lena: And that time becomes this: talking about maternal works. There is a kind of a reflection on mothering when I'm without children.