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ANA PAULA ARNAUT
(ORG.)
CAILÍS MO CHUID FOLA/ THE CHALICE OF MY BLOOD. STIGMATIZED FEMALE IDENTITY IN CELIA DE FRÉINE’S FIACHA FOLA

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Abstract: The speaker in Fiacha Fola suffers from Hepatitis C, contracted through blood transfusions administered as a medical treatment during pregnancy. Through no fault of her own, her contaminated blood infects her quotidian life. Simple pleasures such as the rituals of courtship or the development of children fall under a grey pall of ill-health. The speaker’s campaign to achieve redress in the aftermath of this cruel accident also features prominently. In this mordant collection of nearly 60 poems, a world-weary anger sustains a voice contemplating and commenting on disparity and unfairness that never yields to polemic. The poems consistently contrast the human dimension of women’s lives with a bureaucracy struggling to contain and discredit its victims. Drawing on a wide range of references to build solidarity with women across time and cultures, the poems connect powerfully with the patriarchal oppression that pervades women’s lives. They reject the stark unceasing conflicts waged on the site of their bodies by opposing ideologies that contribute to a continual

DOI: https://doi.org/10.14195/978-989-26-1483-0_10
stigmatization of female identity. Referencing the work of feminist critics such as Máire Mhac a’ tSaoi, Susan Sontag, Sherry Ortner and Susan Hogan, this paper explores the ways in which the speaker in the poems recounts a tragedy that invokes ‘shame and guilt in us’ (Mhac a’ tSaoi, 2004: 10) as readers of this powerful work.

**Keywords:** Culture, Medicine, Hegemony, Scandal, Hepatitis C, Poetry

The idea of illness as a metaphor is a compelling one, and one that in forms the collection of poetry *Fiacha Fola* that I will discuss in what follows. According to Susan Sontag, ethnic groups could be seen in terms of contagious diseases (Sontag, 1990: 82). Citing Mary Douglas (1966), she points out that people who pollute are invariably wrong (1990: 136) another idea that pervades this series of poems. I will argue here that such ideas express a kind of stigmatization of female identity. Through patriarchal systems of domination, women are treated as individuals with a compromised identity that resembles the dominant and correct male identity but that differs in some crucial aspects, notably in the power to give birth and to be mothers. This capacity differentiates them from males and marks them as inferior and ultimately unacceptable.

In case it might be thought that I am over-interpreting this idea, it may be as well to give a reminder of the status women have had in Ireland throughout much of the twentieth century, from the establishment of the State in the 1920s until advocacy groups campaigned successfully for change in the nineteen seventies. Women were accorded status as wives, mothers and homemakers in article 41.2 of de Valera’s 1937 constitution, with punitive laws such as the ‘marriage bar’, prohibiting married women from working in the public service and in banks from 1932 to 1973, thus ensuring
that greater numbers of them remained in the home. This was one prominent example of the treatment of women as secondary inferior beings. Even in the home, their supposed sanctuary, women were not secure. Their husbands owned the property and could sell at will without any legal obligation to have their wives’ welfare taken care of. Additionally, they could not collect their government children’s allowance nor did they have free access to contraception. In the religious sphere, Catholic women who gave birth were subject to being ‘churched’ forty days after their confinement. That is, they were brought to church and in a special ritual were blessed so that they could rejoin the congregation. According to New Advent, this was considered a blessing and a thanksgiving for happy delivery and the bounty of God, but popularly a sense of shame often hung over the event, with the idea that the ritual represented a ceremonial cleansing not far under the surface. This idea also informs Fiacha Fola.

Rapid modernisation in Ireland from the nineteen sixties resulted in better living conditions for more people with women’s rights cropping up as a significant issue then and in the decades that followed. Women’s rights took significant leaps forward thanks to the work of activists who campaigned for changes in such harshly discriminatory legislation. By the eighties, it seemed as if things were improving, but women in Ireland, as everywhere, could not claim they had full equality. Although women had greater access to education and career opportunities than ever before, deeply entrenched patriarchal structures ensured that they were still often considered lesser beings, incapable of independence and suspect because of their bodies and their capacity for producing life – a deep contradiction given the special status accorded their role in the constitution. Although not unique to Ireland, or rather, the Free State and subsequently the Republic of Ireland, the Irish case is a particularly interesting manifestation of the workings of a patriarchy
that both deliberately and inadvertently ensures the circumscription of women's bodies and, consequently, bestows on them an inferior and stigmatized identity.

Sexuality and gender are key issues in understanding this question and the work of feminist critics can help elucidate how such stigmatization endures by examining the assumptions that underlie it. Developing de Beauvoir's proposal in *The Second Sex* Sherry Ortner argues that women, that by virtue of their being restricted by pregnancy, childbirth and nursing, 'seem to stand for everything that humanity (both men and women) is trying to escape and transcend.' (Ortner, 1996: 14). Ortner also argues that the rise of the state is paralleled by a corresponding rise in patriarchy, 'where the role of the father as an essentially political role emerges' (Ortner, 1996: 15). The idea that women's identity is a stigmatized one derives from Erving Goffman's work on stigma. Women's status as carriers of human suffering who embody the burdens from which humanity seeks to be released, places them in a stigmatized position. On the one hand, they share the dream of liberation from bodily frailties and debilities, while on the other, they represent the very epitome of such weaknesses.

According to Erving Goffman, a stigmatized identity is based on a contradiction. A person that belongs to a stigmatized group has a double identity, one that is encouraged to identify with the 'normal' group but that at the same time is considered different by that group (Goffman, 1968: 124). In our collection of poems the normal male identity is conceived through the patriarchal structures of kinship bonds, of religious affiliations and their projected hegemonies duplicated and reinforced through the nation and the state. The idea of the State promotes the ideology that it serves the common good, the good of all its citizens. However, it is clear from de Fréine's poems that this is a fundamentally flawed idea, and that female identity, and indeed the female body, is seen as deviating from the
male norm. The State invested considerable resources in attempting
to hide this error and did not take sufficient steps to prevent it. It attempted to mislead those who had suffered because of its neglect of their interests, so that some of the victims died as a result. The case of Brigid McCole received particular media attention at the time and when she died, before a ruling was given on her case, that proved to be a turning point in gaining attention and sympathy for the victims. The view that a female identity is a stigmatized identity that both conforms to and departs from normative male dominated dispositions pervades the pessimism in this collection of poetry.

Although this essay is concerned with the poetry as a response to the Hepatitis C scandal and not with the facts of the case, it is none the less instructive to have a summary of the events, which took place over a thirty year period. Here is a brief synopsis from Anne-Maree Farrell, who has written about the case from a legal and political point of view (2006, 166-7):

In 1976, it first came to the attention of the Blood Transfusion Board of Ireland (BTSB) that one of the donors whose blood had contributed to a batch of Anti-D had been diagnosed with ‘infective hepatitis.’ Notwithstanding their knowledge of the episode, senior staff continued using the donor’s blood in the manufacture of subsequent batches of Anti-D. In 1977, the BTSB were notified that a number of women who had received Anti-D had developed hepatitis. Senior staff at the BTSB attributed such diagnoses to ‘environmental factors’ and took no further action. A blood test to establish the presence of Hepatitis C became commercially available by the early 1990s. In 1991, senior staff at the BTSB that blood samples retained from the 1977 Anti-D incident were positive for Hepatitis C. Again, they elected to take no further action to investigate the matter. In a separate incident in the early 1990s, another donor’s blood, which had tested
positive for Hepatitis C but was believed by staff to be a ‘false positive result’ was used in the manufacture of multiple batches of Anti-D. In January 1994, a member of staff at a regional blood bank reported on a study she had conducted which showed a high incidence of women donors testing positive for Hepatitis C. The one thing they had in common was that they been administered Anti-D (Report of the Expert Group on the BTSB, 1995: Report of the Tribunal of Inquiry into the BTSB, 1997).

Farrell’s account goes on to indicate that the Expert report published in 1995 pointed out clear mistakes were made by BTSB staff with significant departures from good medical and scientific practices concerning the production of Anti-D. A group called Positive Action, formed in 1994, sought redress for the Anti-D contamination which had inflicted Hepatitis C on so many women. The organisation had three demands 1. Full disclosure, 2. That compensation be given statutory recognition and 3. That government accept responsibility for what had happened. Brigid McCole, a Donegal mother of eleven, took a case against the government and had it listed for trial. The government continued to stall but when Mrs. McCole died in October 1996, just as her case was coming to trial, it brought the case into full focus in the media and in the public mind. Eventually, a tribunal investigated the matter between December 1996 and February 1997, exposing, according to Farrell, ‘a seemingly callous disregard for women who had placed their trust in a state institution’ (Farrell, 2006, 167).

Celia de Fréine’s work in both the Irish and the English languages, often centres upon women’s issues although her writing is not always specifically autobiographical. She is an award winning dramatist and script writer and has published two collections of poetry. De Fréine tackles insidious forms of patriarchy in her writing, revealing the ways that inequalities persist in modern Irish women’s lives, despite
gains that give the appearance of their achievement of full equality. The idea of equality as a front for more deeply entrenched societal and cultural bias against women is well observed in *Fiacha Fola*, de Fréine’s second collection of poetry, written in Irish and not so far translated. This volume concerns a single important episode in Irish public life, popularly ‘regarded as one of the most shameful episodes in the Republic’s medical history’ (Mitchell and Sexton, 2014: 26). It is an event that began as a matter of medical and scientific interest only, but which, for a number of important reasons, linked to rapid changes occurring in Irish society, developed into a national scandal that resulted in an increase of public distrust in Government and its institutions (Farrell, 2006: 164-5).

The title *Fiacha Fola* gives a clear indication of the subject of this volume. This is an Irish language expression translated into English as ‘blood debts.’ The term may refers to those duties of care that relatives are expected to perform toward one another. The implication is that the poetry here is about family and its responsibilities, the obligations that a kinship unit carries to watch out for its members and ensure their wellbeing. Indeed, this is a significant theme in the collection. It relates the story of one woman’s experience of her long term illness, Hepatitis C, a disease she contracted by having been injected with contaminated Anti-D. This blood product is given to mothers with Rhesus negative blood who are carrying Rhesus positive babies. The reactions that occur between mixing of rhesus positive and negative blood in the mother’s blood stream can give rise to Rhesus disease, a dangerous condition with sometimes fatal consequences. The product known as anti-D prevents these difficulties from developing and is universally considered a safe and successful treatment for this condition.

In the case of *Fiacha Fola’s* protagonist and narrator, who speaks in the first person in all fifty seven poems, the unintended but unavoidable consequence of her injection with the contaminated
blood product is the contraction of Hepatitis C. This imaginative response to a seemingly callous disregard for women successfully comes to grips with one woman’s experience of this debilitating condition over a period of 20 years or so, from 1980 to about the year 2000. The poetic voice is sustained, deftly deploying references from the period’s contemporary and popular culture to help the reader date the unfolding of an impressionistic sequence of lyrics with this single focus.

The speaker’s voice is that of a modern urban Irish-speaking woman, materially comfortable, well-educated and independent, used to her freedoms and, if not quite taking them for granted, accustomed to exercising them without question (Mhac a’ tSaoi, 2004: 10). Her decision to marry and have children evokes joy and a sense of equality with her partner, a man that she has freely chosen as much as he has chosen her (de Fréine, 2004: 13). Hints of mutual agency, the joy in the equality of their choice, are, however, suffused with pathos, because the incompatibility of their blood types has given rise to this threat to their future. Enjoyment of an open air student performance of a miracle play transforms into a waking nightmare where the actors appear as victims of a plague transmitted by fleas on the shroud as they proclaim the moment of resurrection. This premonition prompts the speaker to return a borrowed cloak to her friend the very next day (de Fréine, 2004: 14-15). A portentous sense of imminent betrayal pervades the poem, the idea that the miracle of resurrection is contaminated, spoiled and impossible to realise. The vocabulary of the liturgy of the Mass appears in the title of the first poem and again in a later one, “cailís mo chuid fola/ the chalice of my blood”, in which the speaker mourns her Rhesus negative blood type. She laments that had she known that her blood was not like that of other girls, that her body was being sustained by fuil iasachta – foreign or alien blood (de Fréine, 2004:13), she would have attempted to prevent herself falling in love until she
had found someone who would be a match for her, by attracting her choice of man, to find out if their blood types matched. She would have prayed to Hymnaeus, the god of marriage, to quench the torch of love, to send the celebrating participants away and to prevent the wedding. Nevertheless she would still have begged to be united with her children at any cost.

Like much of the referential framework in this volume of poetry, the irony of a woman choosing the words ‘the chalice of my blood’ reveals a strongly feminist approach to the work. Although the title ‘blood debts’ or also, the debts of kinship, at first glance seems to endorse family values, the values enshrined in these particular bonds are staunchly patriarchal, a view reinforced by the reference to the ‘chalice of her blood’ in the first poem. This is further emphasized by the reference to *fuil iasachta*, foreign blood, revealing an internalized obsession with purity and an absence of contamination in the blood lines. Clearly, patriarchal supremacy in family relationships parallels Catholic hegemony in the religious sphere. The homology between these two powerful dispositions alludes also to another larger mirroring of images, that of the role of the State in the decision-making that profoundly affects women’s lives for worse in many cases. The ‘nation’, a group sharing common ethnicity, culture and history may also be viewed as the family unit writ large. If the state can be imagined as a patriarchal entity, politically fulfilling the role of a father, the nation has frequently been invoked as a mother. Nation and state are often equated, so that a sovereign political entity may also be seen in familial terms, with its laws and institutions seen as more elaborate and institutionally established configurations of a family unit. The duties of such a macro-entity towards its citizens may also be considered to emulate the blood ties that bind kinship groups together as the root ‘*natio*’, that which is born, implies.

Consequently, without progressing beyond the opening poem, the underlying stance of the whole work is laid out, a view that
implicates these powerful entities in the subordination of women. The ties that bind constrain more than they support, an idea underlined by the words *cailís mo chuid fola*, ‘the chalice of my blood’, placed in the mouth of a female speaker – a complete impossibility in a ritual liturgical context, the site of the most powerful utterance of this central phrase in the Catholic Mass. Additionally, the trope of the woman’s body as a vessel containing blood is also implied. This foreboding of the beginning foreshadows another later poem titled ‘Is é seo mo chorp/This is my body’, a second subversive liturgical reference, undermining the idea of the body as a sacred container (de Fréine, 2004: 56-57). The body carries the genes of her ancestors and has carried the children she gave birth to. But it also carries the thoughts that she cannot overcome thoughts, that she has been betrayed, and that a wound has been inflicted that cannot be healed.

The fact that pregnancy and childbirth are centrally concerned in the misfortune that has been inflicted on the narrator of these poems is therefore necessary to the sombre tone that pervades the poems. As Susan Hogan remarks:

> childbirth was, and remains, (perhaps because of its very liminality), a political, and ideological ‘hot-spot’ and a contested site with regards to male/female power relations, and the application of rituals; consequently, every aspect of the management of the event was potentially highly inflammatory, and subject to rival proscriptions (2008: 141).

Hogan’s claim of woman’s pregnant body acting as a conductor of political and ideological disagreement and controversy resonates again and again throughout this collection. The initial independence of mind and agency that this speaker emits is repeatedly rendered null and void through her engagement with the health system, by
implication a patriarchally organized hierarchy, in which patients are to be seen and not heard, and especially so if they happen to be female and pregnant. The representation of the conflict in the poems constitutes a portrayal of a major denial of individual identity, compounded by a suspicion of gender that amounts to nothing less than a stigma.

The Hepatitis C virus affects mainly the liver. It can remain asymptomatic but can also cause many debilities including cirrhosis after many years. It can be treated and between 50 and 80% of cases can be cured. Due to the refusal of professionals in the health system to acknowledge her concerns about her health, her condition therefore remains undiagnosed for many years. In a poem titled ‘Linn Bhuí na gCaolán,’ an idiomatic phrase signifying literally yellow bile, but figuratively indicating a matter of extreme sensitivity, the dual meaning of the phrase is exploited to remind the reader that the idiom at root refers to body fluids, the humours of medieval medicine. In this poem, the everyday demands of a suburban mother with a husband and children to care for are briefly outlined (de Fréine, 2004: 18-19):

‘m’fhear is m’iníon ag súil lena ndinnéar / my husband and daughter expect their dinner
Mo mhac ag caoineadh ina chliabhán / my son crying in the cot
An triúr acu ina mbulla báisín/ the three of them making my head spin

This already stressful situation is complicated by her feelings of nausea that causes her to retch so strongly that she must go to the doctor. Unsuccessfully, she tries to persuade the doctor that her skin has turned yellow. Because of her insistence, the doctor brings her out into the direct sunlight to look closely at her, and replies that there is nothing the matter with her skin, that is has a natural
colour. The last line of the poem observes drily that the doctor is an Indian. Although amusing, the point is made that the doctor is male and that he represents the system. His status as a post-colonial subject, a person of colour, operates in a subversive and bitterly humorous critique of the system in which he, like the speaker, is enmeshed. Because of the power of that system, masquerading as her benefactor, while contributing simultaneously to her oppression, her protesting voice remains unheard despite her certainty that something is seriously wrong.

Another poem, ‘Coinnigh ort/Keep Going’ (de Fréine, 2004: 21) reinforces the effects of a surreal relationship between the female patient and the medics. The obstetrician asks her how she is and she replies that she is both sick and tired and that she believes she is suffering from jaundice. He replies that he is an obstetrician, that he knows nothing about jaundice but that she has no gynaecological problems and that she may undertake her dualgais an phósta ar an bpointe boise / marital obligations again immediately. The specialist’s focus on his own area of expertise, effectively the reproductive and sexual organs, and his seeming utter unconcern for any other illness, or for a holistic view of the patient’s welfare, accentuates the deeply paternalistic debilitation that the system of patriarchal values enforces. Although mostly conceived as a male female divide, the system has its female enforcers too. In another poem, Achainí /Plea, dealing with the birth of another son, to whom she refers as ‘Iúdás beag eile/another little Judas, because he is born on Spy Wednesday, the Wednesday before Easter, the feast of the Resurrection, a central religious festival in the Catholic year. The idea seems to be that all males betray women and that even sons are not trustworthy. This again emphasizes the irony of the volume’s title. The recurring problem of jaundice surfaces once more. The speaker implores the nursing sister, a nun, for a liver test. The sister patiently explains that her jaundice was an
exception that occurred during her pregnancy and that it will not occur again. The narrator observes wryly:

éisteann sí le m'achainí cé go bhfuil sé / she listens to my plea although it is
thar am aici a paidreacha a rá / past time for her to say her prayers
is tabhairt faoi chosa deisceabail Íosa a ní / and to begin washing the feet of Jesus' disciples.

Comhairlíonn dom gan a bheith buartha / She advises me not to be worried
Ach nach féidir feidhmiú m'ae a thástáil / but that she cannot test the working of my liver
Nuair nach bhfuil tada micheart leis / when there is nothing wrong with it.

The patient’s request and thus her involvement in her own health and welfare emerge as peripheral to the working of both the health system and the religious duties required of clerical nursing professionals. This liminal status gains added intensity and ironic bite by being juxtaposed with the story of Christ’s washing of the feet of the disciples before his own betrayal and crucifixion. The speaker reminds us of Cassandra, the daughter of King Priam, who was doomed to foretell the future but whose prophecies would never be believed. A curse put on her by Apollo for rejecting him led her to be considered insane. The allusion reiterates the idea that women’s lives are blighted by the tyrannies of patriarchal structures invested only in perpetuating their own power and authority. The speaker’s situation is compounded by a host of skin disorders, an annual rash, raised purple marks on her neck that cause raised eyebrows and wagging tongues in the supermarkets (de Fréine,
2004: 31). Such backbiting implies doubts about her fidelity to her husband, as her lesions resemble *ailp na seirce*, a love bite. Additionally, she suffers from lupus, a disease named because of the resemblance of the marks it leaves on human skin to wolf bites. Moreover, she suffers from being ridiculed during a warm spell. While others expose their skin to the sun, she remains covered wearing long sleeves and a broad brimmed hat. Her skin conditions are attributed to a host of causes, even to her laundry detergent or her fabric softener ironically known by the brand name ‘Comfort’. There is no point in even venturing to explain that she has tried all possible permutations of laundry detergents and softeners to no avail. Such quick diagnoses of the conditions as autoimmune reactions, considered psychosomatic expressions of hysteria in the early twentieth-century, are now treated with anti-histamines. This treatment actually exacerbates Hepatitis C through its suppression of immune defences. (de Fréine, 2004: 35).

The pervasive irony in ‘Mochthráth an Mhic Tíre/ The Wolf’s Early Hour’ again takes a dialogical form. Her specialist asks her if she knows what lupus is and she answers that a friend of hers died because of it. He dismisses this reply saying that no one dies of lupus currently. Disagreeing silently, she remembers how her friend’s sister, during the course of the funeral, remarked that her physician had told her that those affected rarely lived beyond middle age. Her own specialist recommends cortisone, which bloats the body, and the speaker imagines herself as inflated Michelin woman floating above his bald crown, while he squeezes her (de Fréine, 2004: 43).

The timescale of the long suffering narrator is marked by references to popular cultural events and Irish sporting achievements. *Fame*, the hit musical film produced by David da Silva and directed by Alan Parker in 1980, acts as a date marker. The speaker, however, emphasizes the contrast between her own existence and the charismatic characters in the film. The poem ‘I wanna sleep
forever’ paraphrases the title song ‘Fame’ by Irene Cara, in which the line is ‘I wanna live forever’. The speaker’s chronic fatigue means she cannot even bear to see close friends (de Fréine, 2004: 26/27). Their anthem is invalidated. John Treacy’s silver medal win in the marathon race at the 1984 Olympic Games in Los Angeles, provides another temporal sign. Like ‘Dráma Miorúilteach’, this powerful poem contrasts the excitement generated by the success of an Irish athlete at a major global sporting event with other sinister events that unfold simultaneously. The narrator feels so ill she cannot share in the buoyant mood of her family and neighbours at Treacy’s achievement. Her mind is on her debility, represented by her macabre and surreal Alice in Wonderland-inspired description of how the neighbour’s white rabbit has escaped into her own garden and that the large German Shepherd from the bottom of the housing estate is chasing it (de Fréine, 2004: 32). This powerful and horrifying image reinforces a strong sense of cognitive dissonance, a slippage between the simple joy and pride of collective, communal happiness in an Irish sporting figure’s international win, and her own helpless exhaustion and inability to engage with the either the victory or the general mood of celebration it has engendered. Furthermore, it emphasises the profound disconnection between the majority’s shared sense of ethnic and national identity, reinforced by unusual achievement of an Irish athlete’s Olympic achievement, and the acute individual feelings of alienation and estrangement she experiences that distance her from such an integrated consciousness.

The complexity of her distress and suffering are relentlessly documented in language so simple and unadorned as to appear unartful. Such plainness is not accidental, but a carefully chosen strategy to emphasize the extreme banality of the suffering endured. The careful use of medical jargon, not usually practised in vernacular spoken Irish, is highly effective in emphasising the narrator’s predicament. As one critic has observed:
Sometimes the medical terminology is alien and threatening to the reader in Irish, but users of lesser-used languages are like guerillas in turning weakness into strength: this weakness is used to great effect, and de Fréine uses the cold clinical technical dictionary words to indicate threat: Is deacair a thuigbheáil go bhfuil / galar uathimidhionachta orm/ [it is difficult to believe that I have an autoimmune disease]. (Ó Dúill, 2005: 75)

Despite her long suffering however, an account she hears on the national radio airwaves finally proves that her conviction has not been groundless. Titled ‘Morning Ireland’, after the main morning radio programme on the national station, RTÉ1, she recognizes her own situation in the news item. Her confusion is palpable at this report. The initial headline story is confirmed by further news broadcasts. The pessimism of the initial poems is now augmented by a specific reflection on the enormity of the impact of these revelations:

Ba chuma cá mhéad scéal scanrúil / Regardless of how many frightening stories
A shleamhnaíodh isteach id chloigeann /That slipped into your head
Níor taibhríodh duit an tromluí seo - / You never imagined this nightmare –
Bhí cónaí ort i ndaonlathas, /You lived in a democracy
tú féin is do chúram, faoi rialtas iontaofa / under a trustworthy government
a chaomhnaíodh gach saoránach / that cherished each citizen
I bhfadh ó shaotharlanna fhir na seachbhuitaisí / far from the laboratories of the men in jackboots

The confirmation of the betrayal of her trust in the protection afforded her by her citizenship paradoxically acts as a positive
motivating force that allows her some hope. Recovering some of her sense of independence, she can now re-activate her previous desire for some influence over the management of her own health. This early enthusiasm is soon frustrated however, by the tortuous bureaucratic delays engendered by the enquiry. Her blood samples are sent back and forward from Ireland to Scotland for a period of six months. She is sent to a new physician, a professor, who finally tells her that she has not been mad, and that all the previous diagnoses regarding the symptoms of the rashes, the jaundice, the pain and fatigue are not the result of auto-immune disease or unsuitable detergents, as she had insistently been told, but are directly attributable to Hepatitis C. Her relief at being vindicated is immense, so much so that she weeps:

Éistim lena bhfuil a rá aige. / I listen to all he is saying.
Breathnaim ar a bheola ag fabhrú na bhfocal –/ I look at his lips mouthing the words
An heipitíteas ba chúis leis na hairíonna uilig. / Hepatitis caused all the symptoms
Fáisceann an faoiseamh deora asam. / The relief wrings tears from my eyes. (de Fréine, 2004: 77)

The cheque she receives as compensation for her suffering feels like an inordinate burden. She cannot bear to touch it for fear she will collapse and expire under its weight. The idea of putting a valuation, a price on the suffering she has endured prompts a series of stark questions:

Cé faoi é luach a leagan ar mo bheatha? / For whom is it to put a value on my life?
Cé faoi é luach a leagan ar m'intinn? / For whom is it to put a value on my mind?
Cé faoi é luach a leagan ar mo chorp? / For whom is it to put a value on my body?
Cé faoi é luach a leagan ar aon chorp? / For whom is it to put a value on any body?

The questions lie at the heart of the poems in this volume – the deep and continuing distrust emerging from the victim toward a State that has fundamentally betrayed its own citizens. The travesty of a democracy and of its responsibilities toward its participants is evoked through the figure of Shaharzad, the female slave, whose ingenuity as a storyteller earned her a stay of execution from her master for a 1001 nights. Shaharzad tells the truth, that the contamination was discovered and that no new blood was taken from those who provided the infected samples. But she also says that the existing samples, those with the potential to expand the disease to unwitting receivers of that blood, were not recalled, thereby ensuring that the disease would spread. The idea is unconscionable, and yet the flat, undramatic style in which the poems are written make it entirely believable and acceptable. While it may be an abomination that should be shouted aloud and widely publicised, the ordinariness of the horror paradoxically becomes an entertaining story, one more narrative in the game between female slave and male master, one more small victory creating a delay that stays her execution.

The penultimate poem in the collection is a free translation of the Russian poem Maria Tsevtaeva, an address to all women, whose very being, as women, renders them as predestined for hell.

Diúghadh na deora dar súile. / The tears were sucked from our eyes.
Tarraingíodh an ghruaig dár gcloigne /The hair was pulled from our heads
Sracadh an fheoil dár gcnámha. /The flesh was torn from our bones.
Cnaífear de shíor ár n-aenna. / Our livers will be gnawed forever
Go deimhin, a dheirfiúracha dhilse, / Indeed, dear sisters,
Níor éirigh linn éalú as ifreann. / We have not succeeded in
escaping hell (de Fréine, 2004: 86).

The collection has indeed been prophetic. Other cases have
emerged where the health system has been found to have treated
issues around pregnancy in ways that can only be regarded as cruel,
unjust and unfortunately institutionalized. There is the case of the
women who were given an obligatory symphysiotomy – a surgical
procedure that breaks the pelvis in order to facilitate an easier
birth and others, to enforce, what is then called a “natural” birth,
instead of taking a small pelvis as an indication for the necessity
of a caesarian section. And there was, in 2012, the case of Savita
Halapannavar, a young Indian dentist who requested a termination
because she was miscarrying, but who was refused because a foetal
heartbeat still remained. She was told by a staff member that it
could not be done because ‘Ireland was a Catholic country.’ Other
details have emerged since then, but the shock produced nationally
and globally by her death indicates the horror felt by millions at
what happened.

Nor have the horror stories of poor treatment for mothers giving
birth stopped. Portlaoise Hospital’s maternity unit made national
headlines because of a number or babies who dies in childbirth.
Another Asian woman Dhara Kivlehan, in Sligo, died in 2010,
because of complications arising from childbirth resulting finally in
an apology from the Health Services Executive. On a related front,
the story of the Tuam Mother and Baby Home and the treatment of
its occupants shocked the nation, coming in the wake of Philomena,
by Stephen Frears (2013) the story of Philomena Lee’s experience in
a mother and baby in Roscrea in Co. Tipperary. Ms. Lee’s son was
taken from her through the agency of an adoption arranged by the
nuns who ran the home. Based on the facts of Philomena Lee’s life,
the film details her subsequent search for her child and how she eventually found him buried in the cemetery of the very place where he and his mother had lived for his first years, before they were separated. De Fréine’s collection, detailing the banal ordinary nature of other serious, if non-fatal cases, highlights the misogyny that is present in the system, which no legislation can truly improve.

References


Frears Stephen (2013). *Philomena*. USA.


