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## Alice Is Not Hysterical Anymore: Revision and History in Joan Schenkar's *Signs of Life*

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Joan Schenkar's darkly comic theater inhabits the juncture of history and revision. Blending "untrammelled nastiness" (Diamond 99) with pathos and rage, Schenkar's plays defamiliarize the familiar, eliciting a "shudder of recognition" from spectators as she navigates the politics of gender, sexuality, violence, history, and language. In the play *Signs of Life* (1979), Schenkar creates an embroidery of characters based on nineteenth-century historical figures and juxtaposes them in ways that foreground the misogyny of the Victorian era as well as contemporary hatred of women. Among those figures Schenkar draws upon for the play are the American showman P. T. Barnum, writer Henry James, his "hysterical" sister Alice, Joseph Merrick, more commonly known as "the Elephant Man," and Dr. Marion Sims, the famous gynecologist. In the author's note, Schenkar provides for the reader/spectator the factual information she is drawing on, although she calls the possibility of facts themselves into question in the same breath, collapsing the historical, momentarily, into theater itself:

Art made from extreme situations can often find its "facts" (i.e. the hinges upon which certain of its circumstances swing) in history. Thus, the Uterine Guillotine expertly wielded by Dr. Sloper in *Signs of Life* was invented and named by the founder of American gynecology, Dr. Marion Sims — a man who "performed" countless clitoridectomies and referred to himself in writing as "the architect of the vagina." Thus, too, Alice James's "companion" really was Katherine Lorn-

ing, Jane Merritt, the Elephant Woman, had a male counterpart in the narrative of the Elephant Man by Frederick Treves, and Henry James's burning of his sister's journal happened just as it does in *Signs of Life*.

(6)

The play is a departure from linear narrative, relying heavily on a series of flashback scenes that periodically disrupt the present-time tea party between Dr. Sloper (a character based on Dr. Marion Sims and named after a character in James's fiction), Henry James, and, later, P. T. Barnum. Schenkar's play embeds enough factual information and recognizable people that, as Vivian Patraka suggests, "Her own version of history supplants the real one" ("Mass Culture" 28). More importantly, perhaps, than changing the history books, Schenkar is engaged in the project of revising culturally constructed categories and beliefs such as deformity, hysteria, sexuality, woman, male authority, and patriarchal institutions such as the medical industry. In this essay I will locate specific sites in Schenkar's play where the playwright revises or changes history and where she challenges cultural fictions that pathologize all categories of otherness. Through her exploration of nineteenth-century gender ideology and concepts of deformity, Schenkar reinvents, for example, the very category and definition of "freak" and challenges ideologies that attach disgust to women's bodies. I focus in particular on how Schenkar both incorporates and revises the biographical histories of Joseph Merrick, Alice James, and Dr. Marion Sims as a means of making strange the pathologization of women, freaks, and hysterics.

History, as Walter Benjamin notes, has been written by the winners in any particular era. With this in mind, Schenkar's *Signs of Life* approaches the past from a historical materialist viewpoint: "If one asks with whom the adherents of historicism actually empathize . . . the answer is inevitable: with the victor. . . . [A] historical materialist therefore dissociates himself from it as far as possible. He regards it as his task to brush history against the grain" (Benjamin 257). A totalizing history can never produce anything other than falsehood. Writing about how Columbus's acts of genocide have been subsumed and accepted as part of the price of progress, Howard Zinn argues that "the historian's distortion is more than just technical, it is ideological; it is released in a world of contending interests, where any chosen emphasis supports some kind of interest, whether economic or political or racial or national or sexual" (9-10). Schenkar's play not only intervenes repeatedly in historical occurrences but also interrogates the relationship between history and ideological belief systems. It is through the writing of this antagonistic, antihistorical position that Schenkar undermines the historical and ideological constructs produced by the makers of a patriarchal history. Throughout the play Schenkar plays with the suggestion of shared consciousness. The dissolving of boundaries between characters of the same gender in particular forges various collective identities. For example, Alice James and Jane Merritt share the same props and bedroom, while P. T. Barnum and Dr. Sloper echo each other's words. This blurring effectively locates the familiar in seemingly disparate entities — Jane Merritt's freakishness becomes inextricable from Alice James's hysteria.

Related to Schenkar's critique of categories that pathologize women and people with disabilities is the way she renders spectators complicit in the pathologization of woman/freak/hysteric. As audience members wait in line to purchase tickets and enter the theater, the character of P. T. Barnum mills around the theater's entrance, announcing loudly that he is hawking tickets to a "freak show." The result is that audience members are both constituted as voyeurs and made to feel disappointed when the "freaks" never appear:

Since we are constituted as the freak show audience for *Signs of Life*, and since the freak show is as live as theater is, our own voyeurism as theatergoers is implicated in the construction of normality and what it represses.

(Patraka, "Notes" 31)

The allure of the freak show is dependent on the titillation posed by the promise of deformity or freakishness; those spectators whose interest is piqued by Barnum's promise to present something exotic will, through their complicity with the definition of horror, be disappointed by the fact that the actors, including those who portray the supposed "freaks," all have healthy bodies. Schenkar anticipates that such a disappointment might put audience members in an unreceptive mood, which is partly the point: "The scene should induce in those members of the audience who actually listened to Barnum's spiel and therefore expected something salacious, a sharp feeling of disappointment. If it puts them in an unreceptive mood — so much the better. The actors will only have to work harder at seduction" (11).

In the character of Jane Merritt, Schenkar attacks the historical exploitation of the "elephant man," Joseph Merrick, in the name of medicine, while calling into question categories of freak and woman. At one point Schenkar suggests her own connectedness to her fictional elephant woman, and the comparison helps to collapse the distance between the nineteenth and twentieth centuries. As she has stated in interviews: "even though I speak through thousands of characters I am always displacing my autobiography onto those historical periods" (Diamond 103). Orphaned and forced to join a circus sideshow, the London-born Joseph Merrick was immortalized in the account of Sir Frederick Treves, a doctor who accidentally wandered upon a "freak" sideshow exhibit in London in the late 1800s and discovered the man he would later dub "the elephant man." Treves's initial impression of Merrick was one of condescension and horror: "[it was] the most disgusting specimen of humanity I have ever seen . . . degraded, perverted, repellent, and loathsome" (quoted in Graham and Oehlschlaeger 32). The most obvious "re-vision" in Schenkar's translation of the historical figure of the Elephant Man into the play's Jane Merritt is the revision of gender. In recasting the real-life Victorian male child born Joseph Merrick in London as a "female child born to Jane Elizabeth Merritt of the city of New York," Schenkar foregrounds the nineteenth-century gender ideology that linked women with pathology, pronouncing women

inherently deformed by virtue of their genitalia: the assumption of women's special liability to mental sickness by way of her characteristic

menstrual and reproductive functions pushed all women close to the criminal category. . . . [T]o be a woman was a crime.

(Barker-Benfield 123)

As Vivian Patraka suggests, Schenkar's revision from male to female deformity as expressed through the theatrical body of the Elephant Woman is a "cool" strategy for articulating the inherent connections that deformity has with nineteenth-century ideologies of gender: Jane Merritt's "entire body is deformed, with the exception of her genitalia. In a pun on congenital deformity, Schenkar ironically suggests that *all* women are considered freaks and that their sexual organs are the locus of their abnormality" ("Notes" 67). The revision of gender foregrounds for the spectator the ways women are historically "deformed" by virtue of their biology. Woman and freak have been so slyly linked historically that Schenkar attempts to denaturalize the normality of their relationship by foregrounding and exposing it.

Peter Graham and Fritz Oehlschlaeger take Sir Frederick Treves to task for falsely constructing Merrick's history and denying him both humanity and agency. Having established himself as the expert fit to shed light on this mysterious anomaly of the human family, Treves proceeded arrogantly to define and distort Merrick's identity. The authors suggest an element of the monomaniacal in Treves, who set out to remake his patient as though Merrick were "a ready-made Frankenstein monster to be nurtured and cultured into civility" (34). Once Treves overcame his disgust in the presence of Merrick, he assigned to his life a kind of classical, tragic significance rooted in the fact that Merrick was simultaneously grotesque and "human." What Treves's account both omits and contains is startling in its discrepancies. Graham and Oehlschlaeger make much of Treves's refusal to call Merrick by his Christian name, Joseph, and his decision instead to use "John":

How, then, are we to understand his insistence on calling Merrick John? Did that name fulfill a need for Treves that Joseph could not? Was Treves somehow compelled to rename Merrick, to place himself in the role of father — must Treves become the giver of the true name?

(54)

Schenkar plays with Treves's decision to erase Merrick's name in the play through an imagined dialogue between Doctor Sloper and Merritt's mother. It is here that the playwright suggests that she and the fictional elephant woman are in fact one and the same person:

DOCTOR The name of the child was Jane Merritt. It was not until P. T. Barnum discovered her, that she became known as The Elephant Woman.  
MOTHER Joan, I named her Joan — after . . . someone.

(12)

Schenkar here curiously invokes her own name in the text, suggesting the project of "displacing autobiography onto . . . historical periods" and a strategy of

blurring identity by casting herself among the deformed. Moreover, the shared identities of Merritt and Alice James in the text suggests that Schenkar is casting herself as hysterical. Despite the mother's insistence that the child's name is Joan, Doctor Sloper — at once a reincarnation of Dr. Marion Sims, Treves, and James's fictional Sloper, continues to call Joan "Jane." This basic erasure of Merritt/Merrick's identity is consistent with the account in Graham and Oehlschlaeger of Treves's paternalistic desire to recreate Merrick through his own interpretation. Later in the text of the play the Doctor announces with clinical arrogance and certainty that "Jane, of course, was her name" (20).

Further exploration of the discrepancies between Merrick's life and Treves's narrative reveal the revision of Merrick's biography by Treves — including the story regarding the genesis of his deformity. Treves does not make mention of Merrick's account of his pregnant mother's being kicked or traumatized by an elephant at a circus show. As a medical man, Treves no doubt found this explanation "absurd" (Graham and Oehlschlaeger 41), but it does address a glaring gap in Merrick's history nonetheless. Schenkar restores to a central location Merrick's voice in the construction of his auto/biography — a further gesture toward revising Merrick not as a freak whose only parent was the doctors who housed him but as a human agent born of parents for whom he felt love:

MOTHER She was born at a carnival. I was at a carnival. I was standing near an elephant. He turned towards me, I began to bleed . . . and she was born RIGHT THERE in the sawdust. (Takes a miniature of herself from her reticule and puts it in Jane's good hand.) Try to keep this longer than I kept you.

(22-3)

Another important revision Schenkar makes from Treves's account is to reinsert the love Merrick felt for his mother into the text. F. C. Carr Gomm, a chairman of London's Hospital committee during the time of Merrick's stay there, recalled with certainty in his letters regarding Merrick a miniature portrait of his (Merrick's) mother that he cherished and kept with him at all times. Treves, however, "omits all mention of her miniature portrait" (Graham and Oehlschlaeger 53) in his text. In the play, Schenkar essentially rewrites Merrick's mother back into his life — something that history, through Treves, was reluctant to do. Jane Merritt is equipped with a miniature portrait of her mother which she looks at constantly, even in the moment of her death.

The ambiguous circumstances of Merrick's death provide evidence of what Schenkar exposes as Treves's paternalistic relationship to his patient. Unable to see or accept Merrick as in possession of his own agency, Treves rules out completely the possibility of suicide, concluding: "On Merrick's last night, he must have made the experiment of lying down to sleep. . . . [H]is death was due to the desire that dominated his life — the pathetic, but hopeless desire to be like other people" (quoted in Graham and Oehlschlaeger 59). Schenkar's play stresses Treves's historical arrogance and blindness, suggesting Merrick/Merritt's active participation in the choice between life and death. In the final scene before her death, Jane considers, in what appears to be a contemplation of sui-

cide, the painfully fragmented image of woman/freak she sees in the picture/mirror:

JANE (In her good hand she holds the small picture of her mother which she looks into as though it were a mirror[.]) I am looking at my face in the mirror — a thing the doctor has forbidden — and I do not believe what I see. The sight of my own skin makes me scream. . . . I cannot live a long time. I cannot hold this head up any longer. . . . No matter how often I look at myself, I still do not know what I really see.

(62)

Jane's imagination subverts the doctor's orders here — in real life Frederick Treves forbade Merrick the use of mirrors in his hospital room. Jane, in an act that challenges the oppressively paternalistic doctor-patient relationship, creates a forbidden mirror out of the photographic image of her mother. In opposition to Treves's theory that Merrick died in a "pathetic" gesture of attempted "normalcy," Schenkar proposes that the source of pathos in Merrick/Merritt is actually the fragmentation and denial of a holistic self. In *Signs of Life*, Jane Merritt dies in a defiant proclamation of her own uniqueness, the suppression of which proved ultimately unbearable.

Schenkar further undermines the historical accuracy of Treves's account by collapsing the identities of doctor and "showman." While Treves makes a point of pathologizing those who exploited Merrick in their sideshow act, he neglects to consider his own opportunistic exploitation of Merrick's deformity. The doctor-patient relationship is denaturalized through this comparison to the freak show proprietor, as Schenkar points out the ways in which such a relationship lends itself to the abuse of power and to exploitation. The "showman" who discovers and pimps the body of Merrick/Merritt is not an Englishman, as in the historical case of Merrick, but the American P. T. Barnum. Schenkar's decision to stage Barnum as the showman seems to suggest the extent to which the historical treatment and oppression of freak/woman/other has been an American project; she thereby implicates her audience. Despite the fact that Barnum devoted an enormous amount of his life to the temperance movement, Schenkar creates a Barnum who is drunk and indulgent, and who absolves himself of his role in the traffic of human beings: "BARNUM Damn the fool. I'll have his diploma. Doctors — licensed scoundrels!! That's what they are . . . legal murderers!!" (29). In the text, the doctor and the showman emerge as two halves of a single oppressive agent. Both flourish under the grotesque power they wield:

DOCTOR How is the lip this morning?

JANE It won't stop bleeding. I don't think you should cut it again.

DOCTOR Don't be ridiculous, my dear. You know you're much happier speaking.

JANE I spoke before. You couldn't understand me. (Speaking over the pain of examination) I'd like to read more of the Brontë sisters. Sometimes I think I can hear my father in their books, calling my elephant name across the moors.

DOCTOR (Not listening) What? Oh anything you like Jane. Shift your weight a little please.

(36-7)

This passage reveals what Graham and Oehlschlaeger identify as Treves's contempt and condescension toward Merrick as the latter actively engaged in a revision of himself. Though he was born a working-class youth in London, Merrick's illness situated him immediately amongst the wealthy and the educated. Merrick's fascination with this culture eventually led to his conception of himself as a "gentleman." Schenkar gives the Merrick of her text an appreciation of fine literature that parallels Merrick's fondness for such indulgences as a "silver-fitted dressing bag" (Graham and Oehlschlaeger 56) that included razors, silver brushes, and a cigarette case. As in Treves's account, the Doctor in *Signs of Life* is not impressed by his patient's attempts at crossing class boundaries or in revising her origins.

Through the dialogue with history that the play invokes, Schenkar revises not only the specific historical construct of the Elephant Man/Joseph Merrick but also the very categories of "normality" and "deformity." As Patraha points out, freakishness and deformity are contextualized by audience expectations, and the very structure of the play "demonstrates to the audience the ways we create and dictate both normality and abnormality and how they are to be performed" (Patraha, "Notes" 66). Those spectators lured by Barnum's promise of the grotesque are thwarted not only by the dearth of actual "freaks" on stage but by the playwright's foregrounding of "freak" as a cultural concept. In the final scene before her death, Jane refers to her body as a "costume, a bad fit" (62) — a construction that seems incongruous with her conception of self. In another scene the "freaks" are taught to embody the characteristics collectively perceived by the culture to be specific to the strange and the deformed. This comedic framing of notions of abnormality against normality is what Schenkar defines as "a parody of all parodies" (quoted in Patraha, "Interview" 192):

WARDEN Now the first thing I want you to learn in this class is how to look. You bettah know you all look REAL disgusting. The lesson is HOW TO LOOK. . . . [I]n freak class there's no reason to look down. Everybody in the world is already down on you.

(24)

In a subversion of the category of "freak," Schenkar gives voice to the muted voice of the "other." In the freak class, it is the freaks who ultimately deconstruct and denaturalize the world: "Dr. Sloper!! He's no doctor. . . . He's a ghoul . . . a grave robber . . . a butcher. . . . He's the . . . he's . . . he's . . . he's the freak!!!!" (25).

The demonization of historically revered white male figures such as Dr. Sloper/Sims/Treves and P. T. Barnum forces the spectator to reconceptualize and compare notions of "freak," "deformity," "normality," and "woman." The performance of the freak show and the rehistoricizing of difference in relation to deformity lends itself naturally to "the self conscious performing by women



and men within the narrative of nineteenth-century gender ideology” (Patraka, “Mass Culture” 29). Thus the class in the workhouse in which freaks are instructed in lessons of abnormality and conventional freakishness necessarily suggests the Victorian and modern constructions of “woman.” The blurring of identity that the set’s props reveal leads to the drawing of parallels between ideologies of “woman” and of “freak.” Given nineteenth-century assumptions that located women’s pathology in relation to their genitalia, Schenkar foregrounds misogynistic attitudes through the use of metaphor and parody, reconstructing her own version of history in relation to woman, freak, and hysteric.

Alice James, sister of novelist Henry and renowned psychologist William, grew up in a family where “to be a James and a girl was a contradiction in terms” (Strouse xiii). Though extremely intelligent and precocious, Alice struggled throughout her life to reconcile her talents with her father’s belief that women were “personifications of virtue, innocent purity, and holy self-sacrifice who could dispense with interesting ideas” (xv). Unlike her worldly, successful brothers, Alice would suffer a lifelong condition of mental illness, diagnosed at various times as “hysteria, neurasthenia, spinal neurosis, spiritual crisis, and gout.” Despite a close relationship with his sister, Henry’s letters and memoir reveal a distinct tone of impatience and condescension in matters of intellect and illness: “Try not to be ill,” he urged in 1883, “that is all; for in that there is a failure” (quoted in Strouse x). While historical biographers have focused on the brother-sister relationship as intimate, if not emotionally incestuous, Schenkar’s theater subverts this version, casting a parasitic, jealous Henry against the formidable, defiant genius of Alice. In her biography of Alice James, Jean Strouse notes the anxiety that brother Henry felt with regards to his sister’s most private writings and his terror, following her death, regarding the diary’s publication: “I am almost sick with terror. . . . [W]hat I should like to do . . . would be to edit this volume with a few eliminations of text[,] . . . give it to the world and then carefully burn with fire our own four [un-edited] copies” (322). Schenkar decisively foregrounds the historic fact of James’s displeasure with and ultimate destruction of his sister’s diary, making this act a central metaphor for the sibling rivalry that silenced and pathologized Alice and contextualized her illness in relation to her powerlessness: “HENRY She wanted that journal published, you know. Released into the world from the miasmal swamp of her opinions. Naturally, I burnt it to a crisp” (16). In the play James seems to feel a literary competition with his sister because of the journal, which represents to him a manifestation of her independence from him. Ultimately, the historical James concluded that his sister’s strong will — something Schenkar symbolizes by means of the journal, was the ultimate cause of her downfall. Falling prey to Victorian medical rhetoric that prescribed things such as the “resting cure” for women hysterics who read or wrote too much, Henry blamed Alice’s poor health on the intensity of her will:

[The diary] puts before me what I was tremendously conscious of in her lifetime — that the extraordinary intensity of her will and personality really would have made the equal, the reciprocal life of a “well” person . . . impossible for her, so that her disastrous, her tragic health was in a manner

the only solution for her of the practical problem of life.  
 (Quoted in Strouse 284)

Schenkar's Henry mouths a revised version of this actual letter, this time adding a possessive pronoun as a means of emphasizing that Alice's illness wasn't simply a response to a life that anyone would find difficult but stemmed instead from a particular life led incorrectly in its stubbornness:

HENRY I have always thought that Alice's tragic health was, in a manner of speaking, the only solution to the problem of her life.  
 DOCTOR The only solution we could *accept*, Mr. James.

(61)

Strouse's biography of Alice James is careful not to embrace a wholly lesbian reading of her subject, insisting that James's partnership with Katherine Loring was an example of the nineteenth century's ubiquitous romantic female friendships: "Her loving, playful, even flirtatious language in letters to her friends is characteristic of nineteenth-century correspondence between women and should not be mis-read as literally sexual" (168). Schenkar's version of the Loring-James partnership includes a sexual component: "Alice and Katherine on the bed, barely visible. The twining of their figures produces on the wall behind the bed an image like an elephant moving" (50). While at first this linking of lesbian with the "freak" Merritt may seem like a portrait of lesbianism as monstrous, Ann Wilson suggests that "the image of the elephant is a complex image which is associated frequently with the child's experience of pre-Oedipal love" (84). Furthermore, the construct of "freak" having been denaturalized and vilified for its oppressive characteristics, the linking of lesbian with freak can only be interpreted as a celebratory connection.

On a universal level, Schenkar reconstructs the history of hysteria by questioning the phallogocentric authority of the medical industry and by reversing the gender of the hysteric. For example, as Dr. Sloper and Henry James sit in the genteel setting of a tea room discussing the grotesqueness of Jane Merritt and Alice James, the spectator realizes that the men are themselves hysterical.

DOCTOR My dear Mr. James. How can you compare *your* brilliant sister with *my* freak of nature? More tea?

HENRY No, no more thank you. My brilliant sister, dear doctor, spent twenty years in bed and produced nothing more than a cancer of the breast. If *that* isn't freakish . . .

(14-15)

Schenkar gradually reveals that the biscuits and tea that the men are consuming are in fact blood and bone. James's initial disgust at discovering the content of what he is eating is forgotten with the Doctor's patronizing toast:

HENRY It tastes . . . ossified, it tastes . . . god help us . . . it tastes like *bone*.  
 DOCTOR Impossible, Mr. James.

HENRY (A rising panic.) Dr. Sloper. There is blood in my cup. And there is bone in my biscuit.

DOCTOR *Just desserts*, Mr. James.

HENRY (Calming.) Ahhh yes. Quite right, doctor.

DOCTOR (The toast.) The ladies, Mr. James.

HENRY (Remembering.) Ah yes, the *ladies*, Dr. Sloper.

(17)

Schenkar's reading of historical hysteria is one of resistance and active response. Hysterical fits are depathologized from their historical status. Inscribing herself in the text, Schenkar identifies with Alice and raises the question, as Ann Wilson points out, "of the relation between writing by contemporary women, particularly women writing for the theater, and a malady we primarily associate with the late nineteenth century" (73). Hysteria in *Signs of Life*, then, is transformed from a "malady" that afflicts the passive, pathologized form of woman, to an act that threatens to "disrupt the phallogentrism of the symbolic order." Schenkar situates Alice's attacks within feminist theater's project of articulating the "spectacle." As Liz Goodman has argued, it is around the term spectacle and around "women's deliberate efforts to 'make spectacles of themselves' that much of feminist theater is made possible" (quoted in Wagner 228). In *Signs of Life*, Alice's fits work to revise the balance of power between men and women — the fits shape her brother's actions, rendering him powerless before her will:

ALICE [T]he only way I could stir him up was to have an attack in a public place.

KATHERINE What a performer you are!!

(49)

Schenkar's Alice is prone to fits in which she delivers a "sentence" so grotesque and disturbing it incites horror in spectators who witness it. While the "sentence" is never revealed by Schenkar, its status as spectacle in the play supports a reading of Alice James as a "frightening and rare presence — an unsocialized woman . . . who forces men to be passive in the face of her rage . . . and desecrates herself as the object of their desire, thereby mocking their sexuality" (Dolan 67).

The positioning of Dr. Marion Sims in a play whose project is to revise historical notions of woman and hysteric necessarily expands this revision to include the paradigm of the doctor-patient relationship and the historical reverence for white professional males. Juxtaposing Sims, the self-proclaimed "architect of the vagina," with the pathologized hysteric James, foregrounds the historical construction of woman as an enigma whose puzzle could be solved through proper excavation of the sexual organs. Sharing the popular nineteenth-century belief that a woman's psychology was entirely determined by her biology, Sims embarked on a mission to explore unknown aspects of women's reproductive organs with a relentless determination that Barker-Benfield likens to "monomania" (93). Perceiving himself to be on a God-given mission, Sims

constructed a small shack behind his house where he performed countless experiments upon three black female slaves, one of whom, according to Barker-Benfield, endured no less than thirty operations in four years.

What Schenkar extracts from Sims's life in creating the Sloper character is both his hatred for women and his love of the theatrical, performative quality inherent in surgery. Barker-Benfield notes that Sims harbored a love of things theatrical all his life and that he "had met and been fascinated by P. T. Barnum" (100). In a reversal of the patient-as-hysterical paradigm, Schenkar pits Sims's/Sloper's "hysteria" against the relative health of Alice and Merritt. Sloper is not shy about discussing his maniacal obsession with women's grotesque bodies. As he sits drinking blood and chewing on bones, the doctor's relative insanity grows more apparent: "DOCTOR I've scooped out ovaries without question, extracted uteri without number. . . . [A]hh Mr. James the signs of life are closer to the bone than you imagine. And when you find them, there's no stopping until you're covered with blood" (55-6). Schenkar sets this harrowing confession of mutilation against the historical fact of Sims's notion of himself as genius and savior, undermining the historical authority invested in doctors: "I feel that I am in the hands of god, that I have a high and holy mission to perform" (quoted in Barker-Benfield 109). The psychic/physical mutilation to which the doctor subjects his patients is ultimately pathologized and exposed. Retrieving the historically muted voice of the patient, Schenkar revises the doctor-patient relationship: "ALICE I feel . . . I feel that one has a greater sense of intellectual degradation after an interview with a doctor than from *any other human experience*" (60). Situating the scientific in the performative, Schenkar undermines the supposed truths on which the former is based: "I love the falseness of science. I love how it's no more appropriate than fashion predictions and how everything is always being reversed and denied in science. . . . I love the artificial" (quoted in Diamond 105).

The pathology of historic "madmen" (Schenkar quoted in Diamond 110) such as Sims who hide behind institutions of science, literature, and entertainment gets exposed in *Signs of Life*. The perversion of facts in Schenkar's plays is responsible for the retrieval and preservation of larger truths. While Dr. Marion Sims and Henry James never actually sat down to tea, their role as historical conspirators in the pathologization, mutilation, and suppression of women is made clear. The history constructed in *Signs of Life* is the result of the spectator's negotiation of actual historical representations of woman, freak, hysteric, and so on, alongside the deconstruction (through Schenkar's deliberate perversion) of those representations. Ultimately, *Signs of Life* serves as a commentary on the falseness of history and an exposé of oppressive ideologies of gender and deformity that reached an agitated peak in Victorian society yet still persist today. Given the omission of the voice of the other in the telling of history, all history is essentially in need of revision. By reimagining the boundaries between historical time periods and real and imaginary figures, Schenkar imposes her version of history upon the "real" one. Employing framing techniques, Schenkar engages the spectator in an active dynamic of refusal and/or recognition, inviting us to compare the pathology of hysteria, femininity, and deformity, with that of medicine, showmanship, genius, and masculinity.

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