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Doctor Who and the Creation of a Non-Gendered Hero Archetype

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DOCTOR WHO AND THE CREATION OF A NON-GENDERED

HERO ARCHETYPE

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This thesis investigates the ways in which the television program *Doctor Who*

forges a new, non-gendered, hero archetype from the amalgamation of its main

characters. In order to demonstrate how this is achieved, I begin with reviewing some of

the significant and relevant characters that contribute to this. I then examine the ways in

which female and male characters are represented in *Doctor Who*, including who they

are, their relationship with the Doctor, and what major narrative roles they play. I follow

this with a discussion of the significance of the companion, including their status as equal

to the Doctor. From there, I explore the ways in which the program utilizes existing

archetypes by subverting them and disrupting the status quo. I then go a step beyond this

and consider that, based on my previous findings, the Doctor and Companion rely upon

one another, creating a symbiotic relationship, and thus fusing the characters of the

"Doctor" and "companion" into one symbolic entity. Finally, I make the argument that, if

we accept the ways in which the characters and plot invert stereotypes, and the idea that

the Doctor and companion form a cohesive unit, *Doctor Who* creates a new and unique

hero archetype that is not defined in gendered terms and is free from stereotypical notions

of gender that often permeate descriptions of female and male heroes when identified

separately by sex.

DOCTOR WHO AND THE CREATION OF A NON-GENDERED

HERO ARCHETYPE

ALESSANDRA J. PELUSI

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DOCTOR WHO AND THE CREATION OF A NON-GENDERED

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can both agree; speaking of which, thanks so much for driving, Dr. Cheri Simonds!),

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<div align="right">A. J. P.</div>

CONTENTS

CHAPTER I

INTRODUCTION

This thesis seeks to examine the ways in which the television program, *Doctor Who*, has created, and actively continues to create, non-gendered hero figures for contemporary television audiences. The program's popularity and accolades will underscore the significance of the reinvisioning of mythic archetypes and what that means for contemporary audiences, while a feminist lens will be used to examine the world of *Doctor Who* and how it relates to the reality of its viewers. I will also describe how, in a current television climate in which women are still marginalized, *Doctor Who* is a vivid exception; a postmodern phenomenon which is at the forefront of a movement toward equality in gender representation on television.

Rationale

Doctor Who is a science fiction television program produced by the British Broadcasting Corporation that ran originally from 1963 to 1989. In 2005 it was re-launched with Russell T. Davies at the writing helm. Throughout its nearly fifty years on the air, it has been a cult favorite, an integral part of British popular culture, and has seemingly been growing exponentially in popularity outside the UK, especially in the US (Collins, 2012). Part of understanding the significance of the messages shared between the program and its audience is an appreciation of its popularity and of some of its many accolades in numbers: the program is listed in the *Guinness World Records* as the longest-running science fiction television show in the world (BBC News, 2006) and as

the "most successful" science fiction series of all time—based on its over-all broadcast

ratings, DVD and book sales, and iTunes traffic (Miller, 2009). This program, I will

demonstrate, stands apart from the gender status quo in television and is leading a trend

of further discussion and portrayal of gender representation in media, suggesting new

ways to look at gender for an audience that is in a climate open to receiving those

messages. In a sense, the new *Doctor Who* series is a response to the original series aimed

at a different audience than when it originally aired. It could also be considered a break

from the formulas of other television series both past and present. The creators of the new

Doctor Who series are also constructing it with a new aesthetic that, true to our definition,

both reflects and actively shapes prevailing patterns of thinking, which I will elaborate

upon in this thesis.

In demonstrating how *Doctor Who* has created a new kind of hero, I believe it is

also necessary to examine what it means to be a hero. While by the end of this thesis I

will conclude that the new hero archetype that has been created can be defined in non-

gendered terms, it will first be necessary to become acquainted with other contemporary

hero examples in film and television, which for the most part, have been rendered in

accordance with a female/ male dichotomy.

Women are still marginalized on television. All of this fits into a greater and

ongoing societal issue of women being marginalized on television. A recent study by

Smith, Choueiti, Prescott, and Pieper (2012) analyzed the content of 11,927 speaking

characters for gender roles across three media. The analysis included 129 top-grossing

family films, 275 prime-time programs, and 36 children's TV shows and found

staggering gender disparities. The authors of the study looked for three types of

information: (1) the prevalence of male and female speaking characters in popular media, (2) the nature of those portrayals, determined by measuring common media stereotypes associated with male and female speaking characters, and (3) the career pursuits of characters and the degree to which men and women are shown working in a variety of prestigious industries, including STEM fields. The study summarized five findings which demonstrate the marginalization of women in television and film:

- Females are still sidelined in popular entertainment,

- females are still stereotyped and sexualized in popular entertainment,

- females still suffer from an employment imbalance in film and prime-time TV,

- females are still limited by the glass ceiling, especially in family films,

- few females work in scientific fields (Smith et al., 2012, pp. 1-5).

The numbers identifying the gender imbalance are quite striking. Smith et al. (2012) enumerate:

Gender imbalance is alive and well across media. …Multiple indicators point to the fact that females are not as prevalent as males on screen in popular media. This is illustrated by the percentage of speaking characters that are female in family films (28.3%), prime-time programs (38.9%), and children's shows (30.8%) as well as the percentage of narrated stories voiced by girls or women. Perhaps most problematic, few stories are "gender-balanced" or show females in 45.1-55% of all speaking roles. Only 11% of family films, 19% of children's shows, and 22% of prime-time programs feature girls and women in roughly half of all speaking parts. Imbalance is far more normative. A large percentage of stories are "extremely" male centric, casting boys/men in 75% or more of the speaking roles (50% of family films,

20% of prime-time programs, 39% of children's shows). Looking across prevalence indicators, prime time is more egalitarian than family films or children's shows (p. 1). These figures describe the media ecosystem in which *Doctor Who* exists, and as I will demonstrate, this program stands wholly apart in its unique portrayal of gender roles. Although Smith et al. (2012) analyzed media in the United States, *Doctor Who*, is more relevant than ever in its impact on American audiences. The program was featured on the December 9, 2012 cover of *TV Guide Magazine* after winning the magazines annual "Fan Favorites Cover Poll."

Smith et al. (2012) summarized the importance of examining gender portrayal in the media as well as the need for the balance to shift, stating, in essence, that young females need more role models encompassing a wider range of leadership positions across a variety of occupational fields and media platforms. Additionally, both young girls and boys should view female political leaders, decision-makers, managers, and scientists as the norm, rather than exception. In short, content creators have the power to influence the ambitions of girls and women by increasing the number and diversity of female role models and leaders on screen.

The Buffy Effect. A recent study by Ferguson (2012) supports the notion that "strong female characters" are beneficial to both men and women, albeit in different ways. The study involved showing 150 undergraduate students—half of them men and half of them women—episodes of sexually violent television shows with weak or passive female characters (*The Tudors* and *Master of Horrors*) and of similarly violent shows which featured strong women (*Buffy the Vampire Slayer* and *Law & Order: Special Victims Unit*). For comparison, Ferguson also showed them episodes of *7th*

Heaven and *Gilmore Girls*, which did not contain any violent or sexual content. Ferguson then gave students a questionnaire to measure their attitudes toward women, asking them how much they agreed or disagreed with statements such as, "The intellectual leadership of a community should be largely in the hands of men" or, "There are many jobs in which men should be given preference over women in being hired or promoted", in addition to screening the students for anxiety and depression (Ferguson, 2012, p. 899). The study found that men who watched the shows with sexual violence and no strong female characters, felt more negatively towards women afterwards than those who watched an episode of *Gilmore Girls*, which contained no sexual or violent content. This was not the case, however, with the men who watched shows with strong heroines. Ferguson suggested that a possible reason for this "may be that negative depictions of women reawaken negative stereotypes that some men hold about women, whereas positive depictions challenge those stereotypes" (p. 895). He has described this idea as "the Buffy Effect," based on *Buffy the Vampire Slayer* and its eponymous lead character (North, 2012).

Interestingly, the sexually violent shows did not seem to affect women's attitudes toward other women greatly, which Ferguson speculated might be because they "have set opinions about the value of women, too much so to be influenced by media" (p. 895), although this is just speculation. Women in the study also showed less anxiety after watching the shows that featured strong female characters, compared with the shows with more submissive women. The opposite was true for men, who actually showed more anxiety in response to the programs with strong women, which Ferguson proposed might suggest that they feel threatened by such roles.

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While Ferguson acknowledged the need for—and, indeed, encourages—further study into this subject, he told BuzzFeed Shift that his study "offers tantalizing clues that strong women's roles in fictional media is related to reduced sexism among male viewers at least in the short-term" (North, 2012, n.p.). Ferguson stressed the importance of continuing to research this area as well as making the prevalence of such portrayals greater, as, he believes, these messages in fictional movies and television are more influential than a more straightforward educational message (North, 2012).

Before examining the ways in which *Doctor Who* creates a framework that enables, and often encourages, such characters to be prevalent, we must first look at our own framework that will be instrumental in understanding and dissecting our findings, and placing them into context. In the next chapter, I will begin my review of literature by discussing the nature of myth and archetypes.

CHAPTER II

REVIEW OF LITERATURE

This section will begin with reviewing important literature on myth and its related concepts such as symbolism as these are essential to the creation—as well as the interpretation—of *Doctor Who*. Within this, I will discuss the science fantasy genre, and then continue with an examination of relevant archetypes. From there, I will explore the concept of the "strong female hero," the nature of the current television landscape, and feminist studies of television. I will then give a brief summary of *Doctor Who*, provide some historical and cultural context for the program, and, finally, review previous academic research on *Doctor Who* and its companions.

Myth

Campbell (1949) described myth as "the secret opening through which the inexhaustible energies of the cosmos pour into human cultural manifestation" (p. 3). Approaches to defining the phenomenon of myth are many and varied; though when viewed in relation to one another, they create a more complete landscape in which to examine particular archetypes and symbols. "The archetypes to be discovered and assimilated are precisely those that have inspired, throughout the annals of human culture, the basic images of ritual, mythology, and vision" (Campbell, 1949, p. 18). Contemporary myths are quite different in appearance than, say, the mythology of Ancient Greece, yet the power of myth is such that throughout its evolution, it is still

comprised of the elements that ring true to the human psyche and offers insights into
deeper questions that transcend time. As Campbell (1949) stated:

> The wonder is that the characteristic efficacy to touch and inspire deep creative
> centers dwells in the smallest nursery fairy tale–as the flavor of the ocean is
> contained in a droplet or the whole mystery of life within the egg of a flea. For the
> symbols of mythology are not manufactured; they cannot be ordered, invented, or
> permanently suppressed. They are spontaneous productions of the psyche, and
> each bears within it, undamaged, the germ power of its source. (p. 4)

Because of the timelessness of myth, as well as its ability to provide insight into
aspects of the human condition, its study will be applied in this thesis to the investigation
of the British television program *Doctor Who*; in particular, the way in which the
program is engaged in the process of redefining the concept of the hero, especially in
non-gendered terms, and even—just as the program reinvented itself after years off the
air—the reinvention of myth itself for a contemporary postmodern age. These ideas will
be explored further, but it is first necessary to look at some other descriptions of the
elements of myth so that they may be recognized in their various guises. As Campbell
(1949) argued, "as the new symbols become visible, they will not be identical in the
various parts of the globe; the circumstances of local life, race, and tradition must all be
compounded in the effective forms. Therefore, it is necessary for men to understand, and
be able to see, that through the various symbols the same redemption is revealed" (p.
389).

The other purpose of this thesis will be to look at the persuasive aspect the unique representations of heroes and myth in general have and— intended or not—the influence of these messages on *Doctor Who*'s enormous audience. For this purpose in particular, Barton and Turman's (2009) description of Hart's (1990) conceptualization of myth as "the realization that identifying and understanding myth shines a light upon the ways and reasons that appropriate behavior is taught and reinforced while illuminating the values from which this behavior emanates" (p. 11) will prove useful in this context. Furthermore, Hart (1990) stated that all rhetoric depends on myth, and that these myths function as the master stories that depict exceptional people doing exceptional things, thus serving as moral guides (p. 318). Barthes (1957) suggested that mythical speech is "made of a material that has already been worked on so as to make it suitable for communication: it is because all the materials of myth presuppose a signifying consciousness, that one can reason about them while discounting their substance" (p. 110). As Barton and Turman (2009) point out, Barthes claims that, in addition to helping us understand something, myths also impose that something upon us.

In expounding the function of myth, Barton and Turman (2009) look to Burke (1947) who "suggests that myths can serve as the foundation or essence of society" (p. 12). Barton and Turman conclude that Burke's argument is "that a myth can establish the ideal society by referring to the past" (p. 12).

The Science Fantasy Genre

There have been many attempts to distinguish the differences and similarities of the Science Fiction and Fantasy genres. Rod Serling, the creator of *The Twilight Zone*, described a perceived difference between the two: "It's been said that science fiction and

fantasy are two different things: science fiction the improbable made possible; fantasy, the impossible made probable..." (TV Tropes). One trait of Science Fiction might be that the story includes technology that does not exist in the time period in which it was written (TV Tropes). Screenwriter and director Terry Gilliam, well known for his work with the Monty Python comedy troupe, has said "Fantasy isn't just a jolly escape: It's an escape, but into something far more extreme than reality, or normality. It's where things are more beautiful and more wondrous and more terrifying. You move into a world of conflicting extremes" (TV Tropes). The line between the Science Fiction and Fantasy genres is ambiguous, and *Doctor Who* has elements of each. Science Fiction and Fantasy are both genres within Speculative Fiction. The hybrid of the two forms the genre Science Fantasy, for which *Doctor Who* may be appropriately placed. Additionally, because *Doctor Who* exists in the overlapping genres of Science Fiction and Fantasy, references to one of those genres individually may still be considered applicable in analyzing the series.

Robb (2009) posits that "Doctor Who earned its place in the affections of British TV audiences because underneath its fantastical adventures was a critique of contemporary social, political and cultural issues, from the 1960s through to the twenty-first century" (p. 12). Robb (2009) also points out the misconception that fantasy is separate from reality or the everyday; instead, fantasy is extremely socially relevant in that "the best fantasy—like all stories we tell ourselves—has a subtext that deals with important realities and that makes it more engaging for the audience" (Robb, 2009, p. 12). Interestingly. Robb (2009) suggests, under "the guise of a family adventure," that integral to the success of the revived series is its "willingness to engage with modern

social, political and cultural (even consumer) issues in a way not seen since the early-to-mid-1970s," while simultaneously doing this through a wide array of media from books to radio programs (p. 10, 14).

Layton (2012) devotes a chapter to myth and archetype and how they might be defined with regard to *Doctor Who*. The term "archetype," Layton (2012) explains, "refers to certain 'universal' symbols, those that appear in various guises repeatedly in stories, rituals, and dreams across cultures and historical periods. The archetypes symbolize the primal experiences of all people" (p. 102). "Layton (2012) states that "myth functions to give meaning and shape to the cosmos in terms an individual person can understand given his or her culture and historical setting" (p. 97). Layton (2012) describes *Doctor Who*'s adaptation of mythic principles for a post-modern age, as well as the reasoning for retaining that framework:

> *Doctor Who* relies upon the modern understanding of life, not on the ancient. Its symbolism is often more modern and its outlook contrary to ancient mythic views. When it is working well, it bypasses the faux mythology of a Star Wars for a more mature, enlightenment view of humanity's place in the cosmos. However, the mythic functions still operate, providing organization and structure to the stories, plus a handy set of quick references to convey themes (p. 121).

Lewis and Smithka (2010) make further arguments of support for the relevance of this topic and suggest areas for future exploration:

> "Though there has been no official social-science study on the subject, there's a clear and established link between portrayals of violence in the

media and violence in the culture that consumes the media. Couldn't there

also be a link between portrayals of hope and perseverance and those

qualities being evinced by the British culture at large?" (p. 342).

They continue by stating that science fiction, being more than escapist fantasy, has

become a form of social commentary, which allows us to look at *Doctor Who* as a work

of social criticism (Lewis and Smithka, 2010). Furthermore, Lewis and Smithka propose

that the program's popularity has made elements of the show "ubiquitous emblems of the

British people, recognized around the globe" (p. 342).

Archetypes

The universality of myths is such that we see recognizable characters recurring as

well as other familiar mythic elements. These elements, as well as familiar archetypes,

are present in *Doctor Who*; however, the program utilizes the shorthand language of

mythology to construct something that is new, while remaining relatable to the audience.

Archetypes are more often characters within a story, rather than inanimate objects;

Layton (2010), explained why this is:

The archetype presents complex nests of ideas concentrated to be apprehended at

once. Archetypal meanings are mostly psychological, in that they relate to

common human experiences of the body and environment, and thus strike the

viewer or reader as being "true" regardless of what logical or scientific discourse

has to say on the matter. Thus, many archetypes are characters rather than things

because a personality is more polysemous than an object. (p. 6)

Furthermore, this analysis, like Layton's, will consider "archetype" to mean "great symbol," or, as Layton described, "an idea that perhaps predates history and has been perpetuated in history and culture through myth, ritual, and storytelling" (p. 5). While Layton asserted that the cost of the use of archetypes and other mythic elements is that conservative ideas about human nature and social organization often remain unchallenged and even get reaffirmed. I have found that *Doctor Who* has utilized the awareness of these archetypes to disrupt this status quo; creating new myths and characters against mythological type. It should be noted, however, that at Layton's time of writing, there were fewer episodes of *Doctor Who* to examine, and the program was only moderately popular in the United States, so it is not known whether his views on these matters would be different if discussing it now. It must also be mentioned that *Doctor Who* does indeed, at times, perpetuate gender stereotypes and is not immune to clichéd archetypes. Nevertheless, the instances in which various writers, actors, and other contributors to the show have succeeded in creating new archetypes, as well as disrupting gender norms, are noteworthy. While these aims do not always succeed, the key point here is that *Doctor Who* is *allowing* for a different script, and is part of a larger trend of gender swapped roles.

Layton's discussion of male and female archetypes in *Doctor Who* is centered in the archetypal framework set forth in Frye's (1957) "center of archetypes," a collection of "universal symbols" (as cited in Layton, 2010). Layton (2010) observed that "many of these archetypes are male or female gendered, and an audience both expects there to be and receives ideas about what defines 'male' and 'female' through contact with these archetypes in narrative form" (p. 6). If we accept this to be true, then it would follow that

the alteration of these archetypes has the power to invite the audience to view gender in new ways. The portion of Layton's analysis that I find most intriguing, however, and to which I will return later, is the idea that in storytelling, different characters can combine to form one personality. Layton gives the example of *Doctor Who*'s very first year of broadcast in which there were "four main characters: the Doctor; Susan, his granddaughter, also with high intelligence and unusual abilities; Barbara Wright, Susan's history teacher in England; and Ian Chesterton, Susan's science teacher in England" (p. 9). While I will demonstrate that many of the characters of *Doctor Who* are often well-rounded in and of themselves, this idea will also prove central in understanding why the Doctor does not stand alone as the sole hero of the mythology, and why the role of the companion is not a lesser one.

Many of the stories within *Doctor Who* are influenced by mythic archetypes embedded in Western culture; as such, Layton (2010) acknowledged that critics will often consider such characters to be clichés. However, I agree with Layton's defense of these characters, which he asserts, "persist even in modern storytelling because they provide a convenient means for audiences to identify common behavioral patterns" (p. 13). As most of the sources for *Doctor Who* stories draw heavily upon mythic archetypes common to Western culture, many archetypes are indeed embodied by the characters. Layton posits that the Doctor himself often closely resembles Campbell's (1949) "artist-scientist", which Campbell described as "the hero of the way of thought – single-hearted, courageous, and full of faith that the truth, as he finds it, shall make us free" (p. 24), although, as is the case in many myths, characters can assume the roles of other archetypes. While archetypes were studied as far back as the time of Plato, Swiss

psychiatrist and psychotherapist Carl Jung established a framework for understanding

psychological archetypes that continues to be extremely influential to this day. Jung

described archetypes as "primordial, structural elements of the human psyche" (Sharp,

1991, p. 27). Campbell, a student of Jung, was influenced by his ideas of archetypes as

reoccurring characters in the dreams of all people, and in turn, the myths of their cultures;

thus, because they reflect the human mind, they always have inherent psychological

validity.

Campbell (1949), a prolific writer himself and mythology scholar, of course, built

upon these ideas. In addition to enumerating various archetypes the hero may encounter

along his journey, he asserted that the hero himself could also embody other archetypal

transformations, which include: the human hero, the hero as warrior, as lover, as emperor

and tyrant, as world redeemer, and as saint. While these hero roles Campbell described

will be applicable in our later analysis of the characters of *Doctor Who*, and not limited to

discussing male characters, other archetypes explicitly assigned as female by Campbell

that the hero may meet along their journey include: the goddess, temptress, Cosmic

Woman, the hero's prize, and mother or Cosmic Mother.

Puer Aeternus

The Doctor has a sense of childlike wonder despite his advanced years. The idea

of someone who is an adult on the outside, but childlike on the inside, is a theme that is

familiar in popular culture, but has also existed throughout history, all the way back to

ancient mythology. The term for this recurring character is "puer aeternus," which is

Latin for "eternal boy." In the context of mythology, it denotes a child-god; one who is

eternally young. In a psychological context, it may refer to an adult whose emotional life

is more like that of an adolescent's. The term comes from Ovid's Metamorphoses in reference to the child-god Iacchus (von Franz, 2000). In addition to being a figure of divine youth, the puer is also a god of resurrection, which one could parallel to the Doctor's regenerations as a means to extend his life. The puer figure appears again in Egyptian mythology in the story of Osiris as a god who is killed and then resurrected. The puer figure, throughout its various appearances throughout mythology and popular culture, often avoids attachments or commitments in order to minimize the chance of being trapped in situations; thus, the puer reveres freedom and independence, and rebels against boundaries and limitations (Sharp, 1991). Jung wrote a paper on the puer aeternus (its female form is "puella aeterna") (Hopcke, 1989). In analytic psychology, or Jungian psychology, the puer aeternus is described as a one of Jung's archetypes. Jung described the puer archetype as exhibiting a polarity of positive and negative aspects (Sharp, 1991). We will further examine this side of the Doctor in the analysis.

Peter Pan Syndrome

Related to the concept of the puer aeternus is that of Peter Pan syndrome, popularized by Dr. Dan Kiley (1983). While not classified as a mental disorder by the Diagnostic and Statistical Manual of Mental Disorders nor the American Psychiatric Association, this pop-psychology term is often used in a more casual sense to mean a socially immature adult.

As the term comes from the character Peter Pan, the boy who never wanted to grow up, in Scottish writer J.M. Barrie's work, it follows that "Wendy" is the name Kiley (1984) and other authors such as Craine (2006) use in reference to the more mature female character who is involved in some way with the Peter Pan figure. This dynamic is

very often seen in the relationship between the Doctor and his companions; the Doctor being the Peter Pan figure, of course, and the companion Wendy.

The Strong Female Hero

Another issue which must be discussed in order to move away from defining the hero archetype in gendered terms is the idea of the "strong female hero." While it is an improvement that others are writing about the insufficiency—both in numbers and dimensional quality—of female heroes in modern stories, the gendered language that is used to label such heroes reinforces the divide between the male/default hero and the "other"/female hero. While fairly little has been written on this dilemma, McDougall (2013) recently called attention to this issue. McDougall dislikes the one-dimensional nature of female characters, as well as the unquestioned need to preface "female character" with "strong" when describing a female character that is relatively more empowered. She pointed out that this need to make the distinction of "strong" for female characters, but not male, "is because he's assumed to be 'strong' by default" (McDougall, 2013, para. 9). This issue, however, is multifaceted, and also begs the question: what is *strong*? I also acknowledge the conundrum that if the term were eliminated, one would not be able to distinguish which literature addresses the topic of female heroes. This would undoubtedly inhibit the visibility of this discussion that is already receiving too little attention. The other option would be to create a replacement term, but this would also perpetuate the otherness of female heroes. Even when a "strong female character" actually does turn up in a movie or television program, the added character traits often stop there. As McDougall (2013) summarized "Sherlock Holmes gets to be brilliant, solitary, abrasive, Bohemian, whimsical, brave, sad, manipulative, neurotic, vain, untidy,

fastidious, artistic, courteous, rude, a polymath genius. Female characters get to be Strong" (n.p., article abstract).

Many writers either struggle or do not care to write multidimensional female characters, which is perhaps why the few dynamic female heroes of relatively recent films were roles that were originally written for men. Science-fiction, the genre that is most often open to experimenting with archetypes and tropes, offers several well-known film examples of "ass-kicking" female leads, although many viewers do not know that these characters were originally meant to be played by men. These roles that were originally written or pitched as males are: Ripley, played by Sigourney Weaver in the *Alien* series; Sever, played by Lucy Liu in *Ballistic Ecks vs. Sever*; Dean Hardscrabble by played Helen Mirren in *Monsters University*; Secretary Delacourt, played by Jodie Foster in *Elysium*; Major Anderson, played by Viola Davis in Ender's Game; a male-female couple at the center of *Ringu* (remade in the US as *The Ring*), while the original conception centered around two male friends; Evelyn Salt, played by Angelina Jolie in *Salt*; and Dizzy Flores, played by Dina Meyers in *Starship Troopers* (Moore, 2013). Indeed, this is not Jodie Foster's first time playing a role originally written for a man: the lead character she plays in *Flightplan*, a mother searching for her child on a plane, was originally written to be a father. This is not entirely by chance as for years Foster actually asked her agent to seek leading-man scripts that could be adapted for a female lead (Smith, 2013). This is not surprising given the often more multidimensional nature of such roles, which must arguably be more interesting for an actor to play.

The idea of "strong female heroes" also does male heroes a disservice in that the type of strength male heroes are presumed to inherently possess is rather arbitrary and

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fails to recognize other forms of strength that would make a character a more well-rounded individual, with higher expectations of one's potential. I assert that while strength can actually be considered many things, such as cleverness or the bravery of showing one's vulnerabilities, it is more often represented by physical feats, action, and violence. As we will see later in the analysis of *Doctor Who*, the Doctor himself is unique in his disinterest in these latter interpretations of strength, setting him apart from numerous male hero figures in film and television.

The Current Television Landscape

While women have made further progress toward gender equality since the era of the Classic Doctor Who series, political, social, and economic gender equality has still not been achieved, and that is reflected in the modern television landscape. While there has been greater awareness and acceptance of LGBTQ rights issues, thanks in part to popular television programs Ellen and Will & Grace, although there is still admittedly a ways to go. There have also been a couple fantasy series which featured dynamic female leads: Buffy the Vampire Slayer, as well as Xena Warrior Princess.

Munson (2013) explained,

In theory, television should provide an escape from the hardships of daily life—unless you're a woman, that is, and nasty gender roles and stereotypes are repeated and reinforced on screen. Female characters are still sidelined in television and film, especially women of color. Despite being 51% of the US population, women account for only 37% of prime-time characters. Many female characters are tokenized, objectified, sexualized, and otherwise treated like less than human (para. 1).

Munson pointed out that the act of creating television holds the potential to create

characters however you like, without real life consequences, and scripts do not

necessarily need to follow any rules; therefore, to apply gender biases and stereotypes to

fictional spaces, thus leaving the status quo unchallenged, is a lazy form of creation.

This issue extends to film as well. Aja Romano (2013) coined the term "the

Exclusion Myth" to describe that *thing* Hollywood keeps doing"; that is,

> a longstanding notion in Hollywood that boys won't go see movies about girls. In
>
> fact, many Hollywood screenwriters are actively taught *not* to pass the Bechdel
>
> Test, an unofficial baseline measurement for whether movies contain multiple
>
> female characters with agency whose parts don't revolve around the *actual*, male
>
> stars of the movie (para. 2).

This is problematic in a number of ways, one of which being that the numbers actually

prove that boys and men *are* watching movies and television programs starring female

characters. Following a year that had multiple female-led films succeed at the box office,

such as *The Heat* and *Gravity*, *Catching Fire, The Hunger Games* sequel, and

Disney's *Frozen*, two female-dominated films, both in 2013, broke the 14-year-old box

office record held by the first *Harry Potter* film.

To honor the success of Catching Fire earning $300 million, the New York Film

Academy released a detailed infographic about gender inequality in Hollywood which

makes glaringly evident the systemic gender inequality, both in real life and in film. The

graph examines the top five-hundred grossing films produced over the last five years in

Hollywood, and the results revealed stark correlations between the objectification of women on screen and their lack of power, both as characters and behind the camera:

> The results reveal stark correlations between the objectification of women on screen and their lack of power, both as characters and behind the camera. Only 10 percent of movies featured an equal number of women on-screen, and only a miniscule 20 percent of jobs within the industry have gone to women in filmmaking. Only 31 percent of all speaking characters in film are women—and a third of female characters who speak have to take their clothes off at some point (Romano, para. 6).

Returning to how female and male characters are represented on television, producers for the most part think that boys will not watch female heroines, so Copeland (2013), following an in-depth examination of children's television and found that striking proof to the contrary. "Supposedly, girls will watch so-called boy's content, with male leads and action-packed adventures, but boys won't watch girls shows, starring girl protagonists and girl-friendly storylines. And research suggests that this assumption still influences the choices of those making children's fare" (Copeland, para. 3). Nickelodeon over the years has had a number of programs that star female characters and were viewed equally by girls and boys. Some of these are *Clarissa Explains It All*, which was about a smart and quirky teenager, and most recently, *The Legend of Korra*, an animated series featuring a fighting heroine, which, in fact, has even more boy viewers than girls.

Copeland turned her investigation to identify what it was about the children's with female leads that compelled boys to watch. Comparing her findings with the research of several children's television executives, a few common themes emerged: active heroines,

humor, and emotional resonance. Another factor, Copeland identifies, is whether is the program is labeled as male or female. A 2001 study by Oliver and Green showed that "boys who were less likely to label *Beauty* a 'female' film were more likely to enjoy it, and the same for girls labeling *Turtles* a 'male' film" (as cited in Copeland, 2013, para. 18). There is a pervasive tendency in our culture to assign gender to even inanimate objects that can have no inherent gender, such as picking out pink clothes for a baby girl; one of the benefits that would come from decreasing this practice, Copeland concluded, is that television executives could greatly increase their viewing numbers once they stop marketing their programs to specific genders.

Feminism and Television

Despite improvements, Sarkeesian (2010), feminist media critic and creator of the video blog "Feminist Frequency," as well as the "Tropes vs. Women" video series, pointed out that "representations of gender on television are still clearly binary with very little blurring. This is disappointing considering that for over a century-and-a-half feminist theorists have highlighted how what we now call 'gender' is not biologically determined but rather socially constructed" (p. 10). Another obstacle for the depiction of strong female characters on television is the criterion for determining hero traits that are still biased primarily on what are traditionally considered "masculine" characteristics. One may find an occasional female hero character in television or film science fiction, but it is likely she will have noticeable masculine traits that are integral to the identification of her hero status. Sarkeesian (2010) explained that there is more involved in the shifting of power dynamics than simply inserting a woman hero into a storyline:

While these female action hero roles are welcoming over the 'damsel in distress',

placing women in traditionally masculine roles without disrupting the male value

systems associated with them maintains male dominance. Female action heroes,

although not helpless, are still subject to the male gaze in a way that male heroes

are not. Placing women in these non-traditional roles makes it more acceptable for

women to emulate masculine power dynamics, not necessarily a positive step

towards solid, complex and positive representations of women. (p. 12)

Science fiction is a genre that lends itself to experimentation, particularly in terms

of the representation of male and female gender traits. Perhaps because it offers a sort of

"parallel world" that is both similar and different enough from our own, science fiction

might be considered safe ground on which to question normative notions of gender.

Layton (2012) described science fiction as "the literature of our times" (p. 7).

Furthermore, "science fiction is in large part a response to the cultural shock created by

the discovery of humanity's marginal position in the cosmos" (Rose quoted in Layton,

2012, p. 7).

Before investigating the complete reinvention of the hero figure, as we will see

exemplified in *Doctor Who*, it is beneficial to consider modifications that have been made

in how women are being portrayed on television. While there is certainly much room still

for further progress, there have, however, been some instances of strong women in

science fiction programs, which is notable, because in the not-too-distant past, it was

unquestioned that women in television programs were there to swoon, be rescued,

provide comic relief or support, or to further emphasize, by way of contrast, the

masculine and heroic nature of the male lead. Sarkeesian (2010) noted that while much

has been written on women in science fiction/fantasy television and films, including articles about particular characters, there aren't as many full texts or anthologies that directly address women in science fiction as a whole. This thesis seeks to expand this conversation, and the popularity and long-running nature of *Doctor Who* makes it an appropriate extension due to the vastness of its audience. As Sarkeesian (2010) has written, "society is influenced by how female characters are written, cast and developed" (p. 10).

It is partly for this reason that an examination of both gender and hero depiction in *Doctor Who* is necessary, because the program, while it certainly on occasion depicts "masculine" characteristics in its female heroes and vice versa, moves beyond this gimmick of simply swapping stereotypical gender roles, and not only creates a gender spectrum along which you will find men and women, but it reforms completely the rubric upon which the audience is conditioned to identify heroes.

A Brief Summary of *Doctor Who*

Doctor Who is a science fiction program that follows the adventures of the Doctor. Though the Doctor looks human, or rather, humans look like *him*, as he says, he is in fact an extraterrestrial; to be specific, a Time Lord from the planet Gallifrey. The Doctor travels through space and time (usually in a somewhat serendipitous way, looking for adventure) in his TARDIS (an acronym for Time And Relative Dimension In Space), a time machine and spaceship that has the appearance of a blue police public telephone box from 1960s England and has been depicted on occasion with a degree of sentience or consciousness. The TARDIS looks like a blue police box because it can blend in with its surroundings, but its chameleon circuit got stuck and, therefore, since a trip to 1960s

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London, it has remained a blue phone box. The TARDIS, however, is much bigger on the inside (a favorite exclamation of his new travelling companions), with a main console room and corridors with other rooms leading from it.

When the Doctor is mortally wounded, he has the ability to regenerate his body, taking a new appearance in the process. The Doctor never really knows what he will look like with each regeneration, but he retains his memories, though his personality changes to some degree. The regenerations are also useful for the *Doctor Who* creators because it allows for a new actor to play the Doctor, which adds artistic interest, as well as practicality, given the almost fifty-year run of the show. The current Doctor is the eleventh incarnation, and when fans refer to a particular incarnation of the Doctor, they regularly just call them by their number (e.g. "11").

The first episode of *Doctor Who* aired on November 23, 1963, which, incidentally was the day after the Kennedy Assassination, and was re-launched on March 26, 2005, with nearly 800 total episodes to date. The re-launched series references a war that presumably happens between the original series and the re-launch, "the Last Great Time War," between the Time Lords and their enemies, the Daleks, which wiped out both races (though due to the complicated nature of space and time, we see them again in various episodes, especially the Daleks). When the re-launch begins, the season numbers for the series begin at "one" again, though in the UK, it is called "*series* one," and so on. Series one of the re-launch begins with the ninth incarnation of the Doctor, or "nine" as fans of the program might say. The Doctor references the war occasionally and states that he is the last of his kind; the last of the Time Lords.

Throughout the program, one learns that the Doctor is extremely powerful and, though he laments being the last of his kind, he was the one who brought about the fatal conclusion of the Time War, thus ending his once-great race, which had become corrupt and power-hungry. While the Doctor has some powers specific to being a Time Lord, such as regeneration, having two hearts, and being able to pilot a TARDIS, most of the time he "saves the day" by being extremely clever and by having assistance from his companion as well as his trusty "sonic screwdriver."

Historical and Cultural Context

As stated previously, part of the analysis will be historical. The companions span fifty years; thus, the only way to understand them fully is to have an awareness of their historical and cultural contexts. Clayton (2010), in his article on the changing media and culture in Britain after 1945, painted a fascinating look at the media landscape into which *Doctor Who* was born. He stated that since the rise of mass media, some of the changes included increasing scrutiny of public figures in Great Britain, the rise of television news broadcasting in the latter portion of the 20th century, and the increasing popularity of political satire, celebrity culture, and sex scandals, as well as their role in undermining deference to politicians, the British royal family, and religion. Clayton described how the news "was a staple part of early television, and news bulletins became longer and more regular. The legalization of commercial television in 1955 and commercial radio in 1973, of satellite and cable television in the mid 1980s, and of digital television after 1998, all added to the sheer quantity of news and entertainment broadcast" (para. 3). In 1945, Clayton continues, the BBC was a monopoly broadcaster. Then, the launch of commercial television and radio "meant that broadcasters had to sell advertising space

rather than rely on the License Fee as the BBC had done, competition for advertising was then further increased by the dramatic increase of internet use in the late 1990s" (Clayton, 2010, para. 4).

Clayton (2010) concluded that these changes, on top of the 'satire boom' of the 1960s, as well as several other factors such as placing leading figures of authority on a par with entertainers and ordinary members of the public, "have encouraged a decline in popular deference" (para. 8). Thus, satire has been a prominent feature of British humor for a very long time, although, as Clayton pointed out, the intended audience has changed with time: "The crucial difference between earlier forms of satire and that inspired by a handful of Oxford and Cambridge educated comedians in the early 1960s, was the intended audience: whereas the satirical prints of Hogarth or Gillray were intended for an elite audience, the adaptation of Peter Cook and Dudley Moore's satirical stage shows for television was designed for popular consumption" (para. 6)

Also of significance is the post-war period (1945–1959) in Britain during which women's film criticism flourished according to Bell (2011) who, made the argument in response to Antonia Lant, who claimed the immediate post-1950 period to be "a barren time for female-authored publications on film and cinema" (p. 399). Feminist film theory, she explains, is widely believed to have started in the late 1960s and early 1970s when the "Images of Woman" debate, associated with critics such as Marjorie Rosen, provided the foundation for later developments in feminist film theory. Bell goes on to draw connections between the post-war period and later film criticism informed by second wave feminism. Bell's thesis is that high-profile women critics in this period were similarly preoccupied with screen representations of women and women's roles within

the film industry, anticipating the later concerns of Rosen and others (Bell, 2011). She summarizes: "I argue that a cross-media focus is a productive method for generating insights into women's critical agency at this time, and conclude that women's film criticism demonstrates something of the wider shifts taking place in gender relations in British society" (Bell, 2011, p.399).

Many important changes were set in motion in Britain during the late 1960s, not least of which was the British Women's Liberation Movement, which Rees (2010) observed received very little attention from historians—much less than its American and Australia counterparts— and somewhat surprisingly, Rees noted, considering the wealth of published firsthand accounts. Additionally, Beatlemania was changing culture forever and on an unprecedented global scale, and the Beatles' impact on gender should not be underestimated. Stark (2005) detailed the factors that enabled the Beatles to change youth, gender, and ultimately the world: their signature falsetto "oooh"s; the fact that many of their songs were written from the view of the traditionally female role; they covered a number of songs by American "girl groups" of the early sixties; their relatively long hair that was considered feminine and was of constant fascination to all, particularly when they shook their heads during performances; they did not elect one person to be the leader; their respect for the women in their lives; John and Paul's early loss of their mothers: all of this came together in a gender revolution that allowed men and women to think about masculinity and femininity differently (Stark, 2005). The women in their songs were called "friend," they were mothers or meter maids; in short, a wide range of fully formed characters that transcended stereotypes and in which girls and women could find liberation in ways never before seen in rock. Stark (2005) quoted Marcy Lanza, an

early American fan of the Beatles: "The women's movement didn't just happen. It was an awareness that came over you—that you could be your own person. For many of us, that began with the Beatles. They told us we could do anything" (p. 137).

Stark (2005) observed facets of Britain's cultural history that contributed to the specific kind of environment that could produce a band with the unique qualities ideal to bringing about such a revolution. Comparing the Beatles with Elvis, a performer who exuded male sexuality, Stark stated that the Beatles, by contrast, did not flaunt machismo and, at the time, were considered quite feminine in appearance. Stark (2005) explained that not shying away from appearing more feminine than one's contemporaries was a tradition embedded in English culture; for example: "mumming" in Elizabethan times (a practice of the sexes cross-dressing during the holiday season), all-male casts performed Shakespeare's plays, these traditions being passed on to the music halls, and J.M. Barrie's creation of "the perpetually boyish and androgynous Peter Pan whom one scholar later called the first of the preteen heroes and who was played in the Broadway version by a woman" (p. 134). I posit that it is also this unique cultural history that enabled *Doctor Who* to be what it is, from the flexibility to experiment with gender norms and roles, to the level of influence the program has managed to achieve even abroad, which, I suggest, has likely been made even more palatable abroad due to it being flavored with that characteristic satire discussed previously; humor and wit in the perfect recipe to effectively call awareness to wider issues in society.

Once again, war shapes the cultural landscape in which *Doctor Who* appears, but this time it is the re-launched series, on March 26, 2005, sixteen years after the original series ended. Charles (2008) made a case for the ideological positioning of the re-

launched *Doctor Who* by Russel T. Davies and the atypical way in which it directly

addresses contemporary politics, in particular, the Al-Qaeda attacks on September 11,

2001. Focusing on two concepts central to *Doctor Who*'s narrative, utopia and family,

Charles (2008) makes the argument that the new *Doctor Who* "argues against the

totalizing strategies advanced by both sides in the war on terror, denouncing violent

modes of pseudo-utopian fundamentalism in favor of pluralist and personal solutions to

global problems. Yet it has also remained aware of its own protagonists' potential to

succumb to such forms of fanaticism" (p. 465); similar to its American television

contemporaries, Heroes and Battlestar Galactica, it was a reflection of the times. A

recurring theme from this *Doctor Who* era that Charles (2008) highlights is also timely:

"one side's utopia is the other's dystopia, and that the only possible outcome of either

form of fundamentalism is total and endless war" (p. 457)

Academic Research and *Doctor Who*

Part of what I will be examining in the analysis is how *Doctor Who* disrupts the

status quo in terms of its characters and messages. There are a variety of ways a narrative

can do this. Layton (2010) asserted that, while archetypes, or "great symbols," along with

other mythic elements, usually perpetuate the status quo, *Doctor Who* on the other hand

has utilized the awareness of particular archetypes to disrupt the status quo. The result, he

explained, is the creation of new myths as well as new characters against mythological

type.

Ways of examining and evaluating the companions. As I look at the ways the

companions and their relationship with the Doctor utilize various archetypes to go against

mythological type and form a new archetype, it will first be necessary to come to the

understanding that the companions are equals to the Doctor, rather than his assistants. Colie (2013) noted that one change that has taken place over the years is that the companions had previously been called "assistants" (p. 83). Colie argued that in the program, women are underrepresented in the role of "leading heroes," and laments the fact that she could not achieve Doctor status as she is a woman. While it is true that the Doctor has yet to be played by a woman actor, it appears she does not consider the role of companion to be of leading hero status, as it is the Doctor himself who usually steps in at the very end with the last step needed to save the day, although she noted that she does not mean that the show is entirely without admirable female characters. Colie proceeded with an investigation of the female companions in the rebooted *Doctor Who*, including romantic feelings towards the Doctor, the dynamic between Idris and The Doctor in "The Doctor's Wife," and, perhaps most importantly, a call to action for the show to expand upon the already strong presence of women in the universe of *Doctor Who* by creating a "woman on top" (i.e. top hero status) character so that the show's larger than ever female fan base, who flock to "conventions dressed in classic Doctor garb," can experience the "power of seeing one's sex made heroic on-screen" (McCaughey in Colie, 2013, p. 98) While I agree with many of Colie's points, I, however, hope to demonstrate in my analysis of the companions that they can (and are often intended to) be seen as sharing equal hero status with the Doctor, and that they do not have to be seen as mutually exclusive.

Layton (2010) concurred that the gender of the Doctor's companions is a much discussed topic among fans and critics, and he points out that while they may be desexualized in relation to the Doctor, they are, however, often sexualized for the

audience (p. 28). Additionally, Layton (2012) posited that in *Doctor Who*, a character may be in one of three characteristic positions in defining the relationship between the individual and the universe:

- "I think; therefore, I am.

- I will; therefore, I am.

- I do not think; I obey" (p. 209).

He stated that the Doctor typically takes the first position, and it is this privileged position as moral center of the program that encourages the viewer to accept his attitude as fundamentally "correct." Furthermore, Layton explained, "adopting the 'I think; therefore, I am' perspective is a necessary component to the humanist and existentialist ethics consistently at work in *Doctor Who*" (p. 209).

While Layton examined the companions in a non-chronological way, utilizing them as examples of ideas like ethics, justice, and how good and evil are manifested in *Doctor Who*'s narrative, Cartmel (2005), one of *Doctor Who*'s former script editors during the Sylvester McCoy years, organized his study of the Doctor and his companions, as well as their shared adventures, chronologically, and by selecting certain episodes for a discussion of their strengths and weaknesses, as well as the cultural context in which they initially appeared. In the analysis of the companions, including some other significant characters in *Doctor Who*, I hope to build upon this past research as well as offer a new approach to surveying these topics.

Britton (2011) stated, "As a narrative, *Doctor Who* is overtly structured around the celebration of difference and non-conformity, around notions of personal liberty and ideals of individualism" (p. 110). Britton (2011), however, is of a different opinion than I

am, believing that the re-launched series "was disturbingly close to the old in its enforcement of heteronormative roles for women, an unfortunate reversal of the change in the gender dynamics between the Doctor and his female companions which occurred in the last years of the classic series" (p. 111). Heteronormativity is, as Britton described, "that cluster of institutional practices which enjoy authority as unquestioned norms in contemporary societies" (p. 113).

In preparation for this thesis I have watched all of the episodes of the rebooted *Doctor Who* series. In the next chapter I will explain how Grounded Theory informed my selection of the texts to be analyzed.

CHAPTER III

METHOD

Much has been written about *Doctor Who*, including discussions on gender and heroes. This thesis seeks to not only explore these ideas in much further depth, but to also propose how these implications can be pursued further, particularly in terms of what is happening on an even larger scale in the reinvention of a dominant and traditional ideology (including, but not limited to, an invitation from the program's creators to consider gender itself invisible). To do this, a feminist lens will be utilized in the examination and deconstruction of a selection of episodes within the re-launched series of *Doctor Who*. As this study is primarily qualitative, the selection of the texts (episodes from the re-launched series) will be approached through the use of Grounded Theory (Glaser and Strauss, 1967). Huxford (2006), in explaining the grounding and benefits of an exegetical, or critically explanatory, method of analysis such as this, stated that it offers:

> a theoretically unified yet empirically eclectic perspective directed towards examining characteristic features of selected but representative texts… This is perhaps the most common method of qualitative research and the basis of a large body of seminal work, utilizing what Glaser and Strauss (1967) call 'strategically-chosen examples' to illuminate theoretical concepts. (p. 270)

Having watched all of the episodes from the seven series of the rebooted *Doctor Who*, plus specials, and including all of the Doctors from that time frame, I have selected numerous examples from episodes in all of the series, representing all of the Doctors to help in my exploration and illustrate the findings to my questions. Additionally, part of the context of the analysis will be historical and cultural.

The Text

As stated previously, this thesis will make the argument that *Doctor Who* itself is consciously reconstructing notions of gender for the characters it depicts, and discuss how the viewer identifies a hero, whether the program is perhaps attempting to make gender invisible entirely, and how it attempts to reconfigure contemporary viewers' ideas about myth itself. To do this, an in-depth examination of the characters of the Doctor and of his travelling companions will follow, as well as an examination of the emerging and recurring themes in the program, which will be accomplished through the use of specific examples from the re-launched series. In support of this approach, Lewis and Smithka (2010) argued that the virtue of discussing popular culture in philosophical contexts is that it provides an accessible way for anyone to challenge dominant paradigms of thinking. "The Doctor's proclivity for seeing his companions and adventures through the lenses of Romanticism and existentialism is itself a challenge to the dominant ways of talking about ethics in schools, universities, and the professions because all too often, morality is treated as something distinct from the social, biological, and cultural conditions from which it emerges" (p. 147).

From here, I will begin my analysis of the pieces that come together and contribute to *Doctor Who*'s creation of a non-gendered hero archetype. I will reference

numerous episodes to examine the characters that populate *Doctor Who*, the ways the program subverts gender stereotypes, and the messages being sent to the audience.

CHAPTER IV

ANALYSIS

In order to appreciate the ways in which *Doctor Who* forges a new hero archetype from the amalgamation of its main characters, it is first necessary to review - by giving specific examples from a variety of episodes - how the program balances gender, both in terms of numbers of female and male characters, as well as the equality in how they are depicted. I will then investigate how *Doctor Who* creates new female and male archetypes in the treatment of its supporting characters. This will be followed with an examination of the character and role of the Doctor as a new type of hero and how the Companions are portrayed as non-gendered heroes. Next, I will discuss the necessity of the companion, and argue that their status is equal to that of the Doctor. I will demonstrate that the Doctor and Companion rely upon one another, creating a symbiotic relationship, thus fusing the characters of the "Doctor" and "companion" into one symbolic entity. I will also examine the ways in which the program utilizes existing archetypes by subverting them and disrupting the status quo, and thus makes the case for a more enlightened view of gender roles. I will illustrate how *Doctor Who* further points the way in this direction by using characters and events from "the future" to suggest that this is humanity's real-life destiny, and how the writers underscore this by occasionally juxtaposing it to a less-enlightened past. Finally, I will speculate about whether or not these strategies are working.

Gender Balance

Recalling from earlier in this thesis, there are several problematic factors in the contemporary representation of women in television and film, including the ratio of male to female characters, particularly in speaking roles, and the limited and tokenized roles of female characters. *Doctor Who* rectifies these problems with gusto, setting out, seemingly deliberately as if to set a new template, to include a balance of female and male characters. Numerous episodes also feature large groups of supporting characters, usually with gender identities represented in equal numbers, and those involved in creating each episode utilize these vast numbers of characters to represent a wide range of gender roles and presentation, sexualities, occupations, and personalities. In this section, I will review a selection of *Doctor Who* episodes that stand out for including a gender-balanced grouping of leading and supporting characters, as well as the representation of variety in the characters portrayed.

If we return to the research of Smith et al. (2012), one will recall that their findings also concerned the prevalence of male and female speaking characters in popular media, as well as the nature of those portrayals, determined by measuring common media stereotypes associated with male and female speaking characters. With regard to the number of male and female speaking parts in *Doctor Who*, to examine how balanced these parts are, I selected three episodes and counted the number of male and female speaking parts, which I then separated into major and minor parts. The three episodes are all the first episode of their series, ranging 2006 to 2014. A major reason for selecting series premier episodes is because of the significance they hold for the showrunners

(head writer and executive producer). In a *Doctor Who* BBC Exclusive, Showrunner

Steven Moffat said of writing the premier for series 8:

> Episode One has a very particular job: it has to remind you what *Doctor Who* is
>
> like, and this has to be the best fun ever. It needs to be an episode that's very, very
>
> welcoming, brings you back into the world of the show, and shows the range of it.
>
> So you need that big sort of "summer blockbuster" start, and then you're just
>
> working on the mix of tones in the show… (*Doctor Who* BBC Exclusive: Writing
>
> the New Series, 2014)

Moffat suggests that the premier episodes represent what *Doctor Who* is all about, so it is

fitting that premier episodes be selected as representative of average casting and speaking

parts in terms of gender.

              New Earth (series 2: episode 1, 2006).

      There were seven female speaking parts in New Earth: Rose Tyler, Jackie Tyler,

Cassandra, Matron Casp, Frau Clovis, Sister Jatt, and Novice Hame; and there were five

male speaking parts. Of the female speaking parts, it could be argued that four of those

were lead characters (Rose, Jackie, Cassandra, and Matron Casp as she was the leader of

the Sisters of Plenitude). Of the male speaking parts, the Tenth Doctor, Mickey, and Chip

arguably make up the three leads; the Face of Boe, while a significant and recurring

character, has less speaking time than the others in this episode.

              Asylum of the Daleks (series seven: episode 1, 2012).

      There are four female speaking parts in *Asylum of the Daleks*: Amy, Oswin

Oswald, Darla von Karlsen, Cassandra (Amy's makeup artist); three of these are more

than minor characters. There are also four male speaking parts: the Eleventh Doctor,

Rory, Harvey, and Amy's secretary; again, three of these are non-minor parts. There are also miscellaneous Dalek voices, voiced by a male actor, but the Daleks are arguably genderless.

Deep Breath (series 8: episode 1, 2014).

In *Deep Breath*, there are approximately seven female speaking parts: Clara, Madame Vastra, Jenny, Courtney Woods, Missy, Elsie, and, if roaring counts, the Tyrannosaurus. Clara, Vastra, and Jenny could be considered the three most significant speaking parts. For the male speaking parts, the Twelfth Doctor, the Half-Face Man, Inspector Gregson, Alf, Cabbie, Barney, and, if the same character counts in a different incarnation, the Eleventh Doctor make seven as well. Of these parts, the Twelfth Doctor and the Half-Face Man are the ones with the most screen time. There is also Strax: he could arguably be a third male character of significance, but as Sontarans are cloned as one gender yet use male pronouns, this may be considered a grey area. As Sontarans, in their language choice, do seem to separate themselves from femaleness (pronouns, calling female characters "boy", etc.), I suggest that Strax could, indeed, be considered a third male speaking part of significance in this episode.

We can see from these three episodes, spanning from 2006 to 2014, and written by two different show runners, Steven Moffat and Russell T. Davies, that there is a reasonable balance in the male and female speaking parts for both major and minor characters.

In these three episodes, there were eighteen female and sixteen male speaking roles total; of these, there were ten major female characters and eight major male

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characters. These characters were also of great range, from humans to non-humans, villains to heroes, and pilots to makeup artists.

Supporting Characters

In this section, I will have an overview of particularly significant supporting characters in *Doctor Who*, including what roles they play. Returning again to the research of Smith et al. (2012), as they did, I investigated the prevalence of male and female speaking characters, in this case, I examined three episodes of *Doctor Who*. Smith et al. (2012) were also concerned with the career pursuits of characters and the degree to which men and women are shown working in a variety of prestigious industries, including STEM fields. With those findings in mind, it is made clear that *Doctor Who* is dramatically exceptional. Whilst keeping this criteria in mind, let us look at some of the male and female characters in *Doctor Who* and the roles that they play.

The Doctor may be male, but a viewer of *Doctor Who*, even of a single episode chosen at random, will notice that the world in which he is depicted is one that is populated by large numbers of women in a variety of roles: military personnel, IT workers, villains, caretakers, and countless others. The key here is the combination of sheer numbers and range in the roles represented. Furthermore, the roles are multidimensional; villains are complicated and often have redeeming qualities, for instance. It is this multifaceted nature that is critical to achieving on-screen female characters that are relatable.

New Female Archetypes

From the wide range of female characters we have seen in *Doctor Who*, it is clear that in the universe of *Doctor Who*, being a "strong female hero" can mean many things,

unlike the one-dimensional "strong female heroes" on so many other television shows or depicted in films that merely replicate the physicality stereotypically associated with male heroes. In addition to being strong in a variety of ways, from physical strength to intuition, one form of strength the female heroes in *Doctor Who* seem to specialize in is what I can best describe as "mental fortitude." There are numerous examples of female characters that have an extraordinary ability to mentally overcome what should have been impossible. An example of this is in the episode *The Unquiet Dead* (series one: episode 2, 2005), when Gwyneth opens the rift, allowing the Gelth to cross over. The Gelth's intentions become clear: they mean to kill the living and use the bodies as hosts so they can take over the planet. Rose and the Doctor are trapped in the house which is filling up with gas, and they realize that Gwyneth is dead, although her body is still being used to hold the rift open. Despite having been killed, Gwyneth manages to communicate with the Doctor and Rose who flee the house and Gwyneth lights a match to destroy the house and the Gelth with it.

Another example is in *Doomsday* (series 2: episode 13, 2006) when Yvonne Hartman, administrator of Torchwood, had been turned into a Cyberman. She should have lost all sense of self in the conversion process, but the patriotic Yvonne, perhaps driven by her desire to atone for her misguide experiments that contributed to the situation, holds off several Cybermen climbing the stairs, while a tear of oil leaks from her eye and she states that she did her duty for Queen and country.

There are countless other examples of female characters in *Doctor Who* acting heroically by exhibiting inexplicable or superhuman mental fortitude, but I shall conclude this section with one of my favorites: This example is from *The Doctor, The Widow, and*

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the Wardrobe, the series seven Christmas Special. Madge becomes a hero here not only because of her incredible mental fortitude, but also because of her femaleness. It is 1938, and the Doctor, Madge, and her children, Lily and Cyril, are in a tower needing to escape with the life force of the forest before the acid rain begins and the portal closes. The Wooden Queen and King are trying to find someone who is a suitable host for the forest life force and who could pilot them out safely. The Wooden Queen and King find Cyril unsuitable, they then try Lily who is a closer candidate but still too young. They say neither is strong enough, so the Doctor confidently tries to put on the crown that would allow him to absorb the life force of the forest and pilot the ship, but he is unable to and the crown causes him immense pain. Madge then tries with no problem, and the Wooden Queen and King determine that she is both strong and old enough. The Doctor does not understand at first how she could be considered strong enough but he was not.

> **Dr:** (skeptical) you're ok. *She's* ok?!
>
> **Wooden King:** she is strong
>
> **Dr:** She is strong. She's strong. Ooh ! Stupid me! Stupid old Doctor! Do you get it, Cyril?
>
> **Cyril:** No
>
> **Dr:** Lily, you do, don't you?
>
> **Lily:** No
>
> **Dr:** 'Course you do! Think about it- weak and strong; it's a translation! Translated from the basecode of nature itself! You and I, Cyril, we're weak! But *she's* female! *More* than female- she's *mum*! How else does life ever travel? The *mother*ship!

The Doctor and the Wooden Queen tell Madge that in order to steer the ship home, she has to think hard about home, and to feel it until it hurts. This very painful for her as her memory of home is recently receiving a telegram that her husband's plane went missing over the English Channel.

> **The Doctor to Lily and Cyril:** (enthusiastically) "Your mother is flying a forest through the time vortex; be a little impressed!"

> **Women in politics, science, and the military**. Kate Stewart, while not a

companion, is a friend of the Doctor, and Head of Scientific Research at UNIT (Unified Intelligence Taskforce). She first appeared in *Doctor Who* alongside the Eleventh Doctor in the seventh series, although she was initially introduced in spinoff media approximately seventeen years previously. UNIT, a military organization, works alongside the Doctor in times when national security may be threatened. She is the daughter of Brigadier Alistair Gordon Lethbridge-Stewart, a good friend to the Doctor from the classic *Doctor Who* program. Intelligent and driven, Kate dropped "Lethbridge" from her surname to ensure she would not receive special treatment from UNIT.

The *Doctor Who* universe also has a female Prime Minister for much of the time, and one who is instrumental in a number of episodes: Harriet Jones. Jones appears intermittently during the tenure of the ninth and tenth incarnations of the Doctor, from series one through the end of the fourth series. From the beginning, before she became Prime Minister, Jones demonstrated high integrity and the independence to follow what she felt was right, despite opposition. Her character was written with tremendous depth; she was a complex character, at times making controversial decisions, and ultimately,

redeeming herself by sacrificing herself for the greater good. She also, without formal training, taught herself how to alter software that was critical in broadcasting a signal (the one that would ultimately mean the cause of her death) contacting the Doctor and his companions, and thus being instrumental in saving the Earth (*The Stolen Earth*, series 4: episode 12, 2008).

New sexuality. Perhaps some of *Doctor Who*'s most unique supporting characters are Madame Vastra and Jenny Flint. They first appeared in the sixth series alongside the eleventh incarnation of the Doctor and have continued to make occasional appearances. Vastra is "a lizard woman from the dawn of time" and Flint is her human wife. They live in Victorian London, unconcerned of what dangers they may encounter from being in a same-sex interspecies relationship. Jenny, a skilled fighter, particularly with a sword, and Vastra, who also possesses combat and leadership skills as well as keen intuition, lead a successful trio of crime-fighters, the third member being Strax, a Sontaran commander. In fact, in the *Doctor Who* universe, Vastra is the inspiration for the character of Sherlock Holmes.

Physical appearance. *Doctor Who* has had countless supporting characters, and each one unique in appearance. Jenny Flint is a young white human and her partner Madame Vastra, being a Silurian, is green and scaled. Men and women are also represented in a range of ages. Prime Minister Harriet Jones is approximately in her late fifties, and there are mothers of varying ages, including Professor Docherty (series 3 finale, 2007) who was in her late fifties to Nancy (series 1: episodes 9 and 10, 2005), a teen mother. There are also non-humans in a vast range of appearances, such as Jabe (series 1: episode 2, 2005) who was, essentially, a female tree. Additionally, *Doctor Who*

scenes are populated with numerous people in the background, from people walking on the sidewalk to working in laboratories. If one examines these scenes closely, they will notice supporting characters in a range of ages, ethnicities, and physical builds. It should also be noted that this same range applies to the villains.

New Male Archetypes

The men of *Doctor Who* are also vehicles for the molding of new gender and societal norms. The Doctor himself can be quite effeminate at times and never saves the day by using stereotypical macho maneuvers like brute force or use of guns.

A father's love. In another refreshing display of male lead characters saving the day in ways other than action sequences and muscles, in *Closing Time* (series 6: episode 12, 2011) Craig is unable to escape the cybermen, and the Doctor is helpless to do anything as the Cyber-armor assimilates Craig entirely. Alfie, Craig's son, seems to sense the danger Craig is in and begins to cry. The Cybermen declare that Craig's conversion is complete and he cannot feel emotions, but Craig's emotional systems begin to reboot themselves after hearing Alfie cry. His armor splits open, revealing Craig inside, back to normal, and he fights his way out to get to Alfie. The Doctor then realizes Craig's rejection of the conversion triggered a feedback loop, and the Cybermen begin to feel everything they cut out of themselves, which will lead to a very big explosion. The Doctor, Craig, and Alfie escape in time as the Cyber-ship explodes.

Sensitivity. *Vincent and the Doctor* (series 5: episode 10, 2010), in which the Doctor and Amy meet Vincent van Gogh, sensitively touches on depression. Vincent is allowed to be sensitive and emotional, and it is actually his sensitivity to other's emotions

that gives him the ability to sense Amy's deep sadness from loss and help her to become

aware yet, although even Amy herself has not yet remembered that she has lost Rory.

In *World War Three* (series 1: episode 5, 2005), the Doctor privately offers

Mickey the chance to come travel with him and Rose, but Mickey, not one to put on a

show of bravado, admits that he is too scared to join them. In *The Age of Steel* (series 2:

episode 6, 2006) Mickey, feeling like Rose no longer needs him, decides to stay in the

parallel universe to care for Rickey's (his parallel universe self) elderly grandmother and

to help the Preachers stop the remaining Cybermen.

Omnisexuality. One character, in particular, represents the *Doctor Who* creators'

effort to realize a hero character with such gender fluidity that the viewer simply sees him

as a hero character, without placing any thoughts on gender, other than the apparent post-

modern approach to its depiction. This character is Captain Jack Harkness. As Britton

(2011) described, "Jack hails from a future era in which sexuality is not circumscribed by

gender, or even by species, and in which the acknowledgment of attraction is not

constrained by convention. As such, he is arguably the embodiment of an inclusive, non-

judgmental ideal, in which heteronormative proscriptions no longer apply and sexuality

itself is no longer a topic for prudery or prurience" (p. 139). An incredibly charismatic

character who flirts freely and frequently, such as with Martha and a male refugee in

Utopia (series 3: episode 11, 2007), Captain Jack Harkness also stars in the *Doctor Who*

spinoff, *Torchwood*. This is something not seen elsewhere on television, and it is even

better that it is centered on such a likable character.

Of course, variety is the key here, and the universe of *Doctor Who* also has hero

figures who are the more swashbuckling or gun-slinging types, such as Riddell, whom we

will discuss more thoroughly later.

Physical appearance. The same great degree of range in physical appearance

applies to the male supporting characters. While this is subjective, of course, Captain

Jack Harkness fits a somewhat stereotypical mold of the handsome hero type. Craig, an

equally likable character, is relatively heavyset. Mickey, later a companion, is young and

considered by some to be the first black companion of the Doctor. He is also sometimes

the boyfriend of Rose who is white. Like the female supporting characters, the male

supporting characters (including villains and background characters) are also portrayed

by actors of varying age, build, and ethnicity.

The Doctor

The Doctor, like his companions, embodies what have been largely considered

both feminine and masculine hero traits. He often uses his brain, rather than brute force,

to get out of binds; he does not hide his emotions—as so many male hero figures do—but

rather, he shows them freely, and views others through a lens that does not distinguish or

discriminate between an imposed and artificial gender binary. Instead, he sees beings as

just beings, with faults and great potential, presumably the way that the *Doctor Who*

creators want the audience to see our fellow beings.

The Doctor favors nonviolence, more often than not. In *The Parting of the Ways*

(series 1: episode 13, 2005), the Doctor faces off with the Daleks; he threatens to activate

a weapon of mass destruction and they dare him to do so, to make the choice between

"coward and killer," and the Doctor says he would pick "coward" any day. The Doctor is also secure enough in himself to kiss his friends platonically.

Doctor Who has also consistently worked to dismantle male stereotypes, and we see this demonstrated through the Doctor himself. For instance, unlike the men who are so often depicted in commercials as bumbling and incompetent when it comes to housework and taking care of children, the Doctor is quite adept at both, which we see in occasional glimpses, particularly in, Closing Time (series 6, episode 12, 2011), in which the Doctor deftly helps his friend, Craig (who is a new father), with the household chores, and can understand baby language, which leads to a humorous moment in which the Doctor informs Craig that his son, Alfie prefers to be called "Stormageddon, Dark Lord of All."

Finally, recalling the concept of the puer aeternus, the yin-yang relationship between mature discipline and childlike whimsy again calls to mind the mercurial nature of the Doctor's character, and both sides can work to his advantage or disadvantage. As the character Tim Latimer said in the episode The Family of Blood (series 3: episode 9), "He's like fire and ice and rage. He's like the night and the storm in the heart of the sun. He's ancient and forever. He burns at the center of time and can see the turn of the universe. And… he's wonderful." The Doctor, as strikingly described above, is the embodiment of the puer aeternus.

We have seen, then, that both the supporting characters and the eponymous Doctor himself offer significant evidence of the creation of new heroic archetypes. However, as the companions share what may be described as a symbiotic relationship with the Time Lord, it is important to also study these characters in depth.

The Companions

The writers of *Doctor Who* have carefully emphasized throughout the series the importance of the companions and the power they have to effect change on an enormous scale; that is, they are not subordinate assistants to the Doctor. This is one of the reasons the Doctor's companions can be considered hero figures in their own right, which will be explored in detail later in this thesis.

The modern-day companion. The role of the female companion has not always been one of equality. The companion in the classic series often served the mere purpose of being there to scream in fright or to ask questions of the Doctor on the viewer's behalf. However, this role has evolved throughout the series, with Sarah Jane Smith of the classic series being the first companion to fully embody feminist ideals (Britton, 2011).

A platonic relationship. The Doctor's sexual orientation is never stated, and although he has had numerous female companions, he has not had a romantic relationship with any of them. It is implied, however, that when one of his companions, Rose Tyler, bade farewell to him with "I love you," the Doctor had started to return the sentiment when the holographic image through which they were communicating was cut off. What the Doctor, the last of the Time Lords, really wants is companionship. This platonic relationship is expressed in a comical verbal agreement when he first meets one of his companions, Donna Noble, who throughout her time as the Doctor's companion is portrayed as his equal:

The Doctor: "I just want a mate."

Donna: "Well, you're not mating with me, sunshine!" (*Partners in Crime,* series 4: episode 1, 2008).

The depiction of the Doctor's relationship with his companions as platonic is significant because it shifts the gender roles of the typical gendered myth and inviting viewers to see the world differently.

Trial by fire. Not anyone can become a companion of the Doctor's. What usually begins as a chance encounter often turns into a trial by fire. If the potential companion performs well, they may be asked by the Doctor to join him in his travels. Not everyone passes the test, however. In *The Long Game* (series 1: episode 7, 2005), computer genius Adam Mitchell, for instance, lost his chance to travel with the Ninth Doctor and Rose, when they travelled to the year 200,000 and he was so in awe of the abundance in information technology that he gave in to temptation and greed. Mickey also did not seem to have companion potential at first, but later earned his spot aboard the TARDIS.

Most of the companions are women, but there are occasional male companions, although these are usually brought along by female companions (e.g. Rory with Amy, Mickey with Rose). The female companions, being part of the new female archetype, often face and pass the trial by fire. Most typically, this entails saving the Doctor's life, his mission, or even his identity. For example;

- Rose saved the Doctor physically in *Rose* (series 1: episode 1, 2005) and spiritually in *The End of the World* (series 1: episode 2, 2005).
- Martha revived the Doctor by performing CPR on his two hearts in *Smith and Jones* (series 3: episode 1, 2007).

- Donna saved the Doctor's life, as well as what he stands for, in *The Runaway Bride* (2006 Christmas special), and we also learn later in *Turn Left* (series 4: episode 11, 2008) that Donna was also responsible for saving numerous lives, including those of other companions.

- In *The Beast Below* (series 5: episode 2, 2010), Amy defies the Doctor and thus saves his identity by stopping him from killing the space whale, and it is after this that the Doctor lets Amy stay as companion.

- Clara, as we learn in *The Name of the Doctor* (series 7 finale, 2013), has already saved every incarnation of the Doctor throughout space and time.

A relationship of growth. The passing of the trial by fire opens the door to a new, heightened relationship between the Doctor and the companions. Having entered the realm of The Companion, their symbiotic relationships with the Doctor are highlighted and developed across a series of levels. These levels see the companions acquire increasing autonomy from the Doctor as the series progresses.

I would suggest five key levels might be identified in this process:

- *Acts of heroism in concert* - in which the Doctor and companion work together to defeat the villain with the companion generally taking the lead from the Doctor.

- *Independent acts of heroism* - which involves the companions showing their courage by acting alone.

- *In opposition to the Doctor/voice of humanity* - which occurs when the companion reminds the Doctor of human values and reins him in (e.g. when Donna insists on saving the family in *The Fires of Pompeii* (series 4: episode 2, 2008).

- *Temporarily taking on the Doctor's role* – for example, Amy leading her own group of "companions" in *Dinosaurs on a Spaceship* (series 7: episode 2, 2012), and Martha walking the Earth to bring hope to humanity in *Last of the Time Lords* (series 3: episode 13, 2007).

And, finally, the highest level when

- *Companion and Doctor merge or their roles are permanently reversed* –

The most extreme example of this merging occurred in *Journey's End* (series 4: episode 13, 2008) when Donna Noble, companion of the Tenth Doctor, became the Doctor Donna, after absorbing the Doctor's regeneration energy and receiving an electric shock which awoke the Time Lord DNA in her body.

Interestingly, there is a paradox in the Doctor-Companion relationship: the more the companion develops as the Doctor's equal, the more they are likely to be placed into conflict with the Time Lord, whilst at the same time, forming a more value checks-and-balance style of symbiotic relationship.

An In-depth Look at the Companions

Having examined the arc that the companions traverse after successfully completing the trial by fire, I would like to focus upon certain companions more in-depth, the necessity of the companions, and how the Doctor and the companion work as one.

The companion **Rose** had the first episode of the re-launched series actually named for her, which should be a clear indicator that show runner Russell T. Davies had no intention of the companions taking a backseat in his vision for the new program. She was companion to the ninth and tenth incarnations of the Doctor, appearing regularly in

series one and series two, with occasional appearances later as well. In that first episode, *Rose* (series 1: episode 1, 2005)*,* the Doctor and Rose try to find and defeat a violent extraterrestrial who is in the form of a rubbery mass that has been waging siege on London by controlling the plastics within the city. The Doctor and Rose find it and need to pour on it an anti-plastic elixir in order to defeat it, but the Doctor is trapped by two mannequins, and Rose's boyfriend, Mickey, is immobilized by fear. Rose is told to run and save herself, but she stands surveying the scene and reflects that she has "no job (the department store where she worked was blown up by the Doctor to destroy the mannequins), no future," but she did win the bronze in gymnastics, and then she swings over the pit containing the plastic alien blob, throwing in the anti-plastic elixir. When the danger has been cleared, Rose says to the Doctor, "You'd be dead if it wasn't for me," and the Doctor replies, "Yes I would." The Doctor then invites Rose to travel space and time with him, which she accepts, bidding a temporary farewell to Mickey.

Amy Pond, the first companion of the Eleventh Doctor and her eventual spouse, **Rory Williams**, became co-companions, travelling with the Doctor and appearing in the program from the fifth series to midway through the seventh series. This dynamic underscores their platonic relationship with the Doctor, and the relationship between Amy and Rory was one of trust and mutual respect. Women in *Doctor Who* are regularly depicted in careers that are stereotypically male fields; this breaking of the stereotype applies to male characters as well, and such is the case with Rory, who works as a nurse. Considering the fact that in television and film, "male nurses" (note the number of television shows and films that preface it this way, implying that "nurse" in itself is a female occupation) are often used as comedic devices, because of the stereotype that that

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is a profession for women, (e.g. Ben Stiller's character in *Meet the Parents*), it should not be underestimated the deliberate step to furthering equality in gender representation in television, for the show runners to decide to make a lead male character a nurse, particularly a character like Rory who, viewers will remember, becomes not only a hero figure, but one of exceptional character.

Amy and Rory have a daughter, **River Song**, and due to time-travel related reasons too complex to fit in the space here, she, essentially, appears older than Amy and Rory. River was created by Steven Moffat while Russell T. Davies was executive producer for the show's fourth series in which River teamed with the tenth Doctor. Being a time traveler herself, it is understood that she has interacted with all of the incarnations of the Doctor; however, we mostly see River teamed with the eleventh incarnation. River was conceived by Amy and Rory aboard the TARDIS as it travelled through the time vortex, which caused her to be born human, but with Time Lord characteristics, including the ability to regenerate. River is a brilliant and dynamic character, who often has a better idea what is going on and what to do than the Doctor does; in fact, she flies his TARDIS quite a bit better than him. River is a professor of Archeology, and shares the Doctor's love of adventure and danger; one might say she is like a female Indiana Jones, if Indy travelled regularly through space and time. River also exemplifies the combination of a variety of traits that are often considered male or female; her femininity and very flirtatious nature are not at odds with her ability to kick serious ass. After River was introduced, Davies (2008) went so far as to describe her as "one of the most important characters" in the narrative, as well as "vital" to the Doctor's life (*"Doctor Who Confidential"*).

Donna Noble is a companion of the tenth Doctor, initially appearing at the end of series two and the beginning of series three, then returning for the duration of the fourth series, with some later appearances as well. Donna was voted the number one companion of the revival from a May 2012 poll by Doctor Who TV. She and the Doctor, more so than with any other companion, shared a relationship that was of equals; platonic friends with deep respect for one another. Donna was so instrumental in saving the universe, that the Doctor called her the "most important woman in the whole of creation."

Donna's character grows tremendously during her time with the Doctor, from having very low self-esteem to truly finding herself, but even from the beginning, she was confident enough in herself to stop the Doctor from exacting unnecessarily cruel revenge on an enemy. Before she became his companion, she advised him to not travel alone, recognizing that he is someone who needs a trusted friend to ground him when he strays from his path.

Along with the theme of a new variety of female hero, these companions, as I have tried to describe, are well rounded and use brains *and* brawn in their heroic acts. They also do not shy away from danger, and they are quite quick to reject gender and societal norms. Here, it should be noted that the Doctor's companions lead fairly ordinary lives (though none of them is particularly "domestic") until they have their first encounter with the Doctor, and then they are plunged into extraordinary circumstances and find themselves both highly capable and eager to meet the challenges at hand. Once they have had a taste of this life and of realizing their hero potential, they become dissatisfied with their ordinary lives and choose to travel with the Doctor.

The appearance of the companion. It could be said that the majority of the companions fit a western idealized standard of beauty. This is not to say, however, that they have all looked the same. Rose, who is white and blonde, was nineteen when she began travelling with the Doctor. Martha Jones, similar in age to Rose, is often considered the first black companion, although this is disputed by some who consider sometimes-companion Mickey Smith to be the first. It is worth noting, however, that Mickey, like Rose, is from a working-class background, whereas Martha is middle-class and more educated. Donna Noble broke the stereotype for the female companions somewhat by being relatively older and a bit less waifish than the others. Donna, who is white, first met the Doctor in her mid-thirties. Rory, also white, is in his twenties and, like the Eleventh Doctor with whom he travelled, is not of a stereotypically muscular action-hero build. River Song is depicted as being approximately in her late forties, and it could be argued that she acts much more flirtatious and sexual than the younger companions. The companion serves as a sort of audience surrogate, and perhaps the companions are chosen by the type of audience the producers are trying to attract, whether it is to attract young new viewers or to serve as eye candy for the dads. It is clear there has been an effort to portray some range in appearance, but in terms of regular travelling companions (i.e. recurring characters), and in contrast to the supporting characters, it stands to reason that this range could be expanded just as the audience has expanded, particularly with regard to representing those of relatively larger sizes, as well as a wider range of ethnicities.

The Necessity of the Companion

Having reviewed many of the major characters of *Doctor Who* and the balanced

gender representation found within the program and its narratives, we will now discuss

the necessity of the companion character. One of the arguments of this thesis is that the

Doctor and his companions might be considered "as one"; that the sum of the parts form

to create one entity, and, furthermore, that this entity represents a new hero archetype,

free of the gendered constraints that usually limit hero figures. Before we can explore this

concept further, we must first set the foundation for appreciating the companion as equal,

and even necessary, to the Doctor.

To underscore the necessity of the companion, as well as others who have teamed

with the Doctor, even if not as an official companion, I will review some examples of

situations where the Doctor would not have succeeded without them. Of course, the

Doctor also spurs those around him to greater heights, but it is a symbiotic relationship,

and these examples demonstrate the necessity of that interdependent relationship.

Viewers of *Aliens of London* (series 1: episode 4, 2005) will remember how

critical a role Member of Parliament Harriet Jones played, as well as Angela Price (later

Mrs. Moore) in *Rise of the Cybermen* (series 2: episode 5, 2006) and *The Age of Steel*

(series 2: episode 6, 2006). In *The End of the World* (series 1: episode 2, 2005), Jabe of

the Forest of Cheem sacrificed her life by holding down the switch that allowed the

Doctor to pass through the fans and reactivate the safety setting. She burnt to death under

the immense heat that came through. In *Journey's End* (series 4: episode 13, 2008),

The Tenth Doctor recalled Jabe, along with others, when Davros made him think about

all those who died in his name. The Eleventh Doctor still remembered Jabe 203 years

after his meeting with her, as was demonstrated in *The Doctor, the Widow and the Wardrobe* (the seventh Christmas special since *Doctor Who*'s revival).

In *The Runaway Bride* (2006 Christmas Special), the Doctor throws remote-controlled bombs into the tunnel, and water from the Thames rushes in, swirling around the Empress and then reaching and travelling down the tunnel to the Earth's core, drowning the Racnoss within. The Doctor watched on coldly until Donna's look grows horrified and she yells for the Doctor to stop. At this point, a look of horror comes across his face as if he realizes what he has done. The Doctor and Donna escape into the TARDIS while the Empress teleports back to her ship. He invites Donna to join him in the TARDIS, but she declines. Before he leaves, Donna encourages him to find someone to travel with, recognizing that, like her, he has just lost someone and that sometimes he needs someone to stop him from doing something terrible. The Doctor briefly opens up about having lost Rose and then leaves in the TARDIS.

In *Smith and Jones* (series 3: episode 1, 2007), which is the introduction of Martha as companion, she is a medical student at Royal Hope Hospital, and among other key ways in which she helped the Doctor in this episode, she uses CPR on the Doctor's two hearts and manages to revive him.

Partners in Crime (series 4: episode 1, 2008) – the name alone speaks to the interdependent nature of the Doctor and his companion – saw the return of Donna. At one point in this episode, the Doctor begins to panic as he finds himself unable to stop the imminent deaths of a million people, but Donna offers him just what he needs: a second capsule to block the signal. This second capsule overloads the system, and the Adipose clients return to normal.

In *Journey's End* (series 4: episode 13, 2008), Donna has saved the world, but it came at the price of her memory of her time with the Doctor. Her grandfather Wilfred, saddened that Donna has forgotten all of the wonderful things she did, is told by the Doctor that the universe will be singing songs about her, for she was, "for one shining moment, the most important woman in the entire universe."

A lot happens in *The Big Bang* (series 5: episode 13, 2010), but an especially significant plot point is that Amy and River are responsible for remembering the Doctor after he was forgotten, and thus bring him back into existence.

It is revealed in *The Name of the Doctor* (series 7: episode 13, 2013) that Clara, choosing to fall through space and time to save the Doctor, appeared in various incarnations throughout the Doctor's past, even back to the first Doctor. She saved the various incarnations of the Doctor, but most of them did not notice her except for the First Doctor when Clara recommended to him that he steal the particular TARDIS he has travelled with all these years.

In The Parting of the Ways (series 1: episode 13, 2005) the Doctor tricks Rose into getting into the TARDIS and sends her back home to her own time and safety. However she defies this decision, moving up the levels from acting autonomously, to working in opposition to the Doctor (in finding a way to return) to standing in for the Doctor and becoming the central protagonist as she defeats the Dalek hordes. It is significant that the achievement of this final level marks the end of the 9th Doctor/Rose dynamic, as the Doctor is fatally poisoned and regenerates.

A key moment in this episode comes when, safely home, Rose was not content to sit at the diner with her mother and Mickey while her friends were out there about to be

killed. Jackie tells Rose that the Doctor did the right thing by sending Rose back to her, however, Rose replies:

> **Rose:** "But what do I do every day, mum? What do I do? Get up, catch the bus, go to work, come back home, eat chips, and go to bed? Is that it?
>
> **Mickey:** It's what the rest of us do.
>
> **Rose:** Well I can't.
>
> **Mickey:** Why, because you're better than us?
>
> **Rose:** No, I didn't mean that. It was a better life… I don't mean all the travelling, seeing aliens and spaceships and things; that don't matter. The Doctor showed me a better way of living your life. You know. He showed you too. That you don't just give up, you don't just let things happen, you make a stand, you say no, you have the guts to do what's right when everyone else runs away…"

These ideas have had greater prominence over the last few decades; as feminism has evolved, so have the questions. The companions of the contemporary era are more representative of postmodern feminism in several ways including the fact that they not only break the rules, but promote the idea of questioning the entire framework. They also disregard stereotypical gender roles in order to strive for a more egalitarian society. With these two episodes, we see how the companion and the Doctor complete one another, and how they open each other's eyes to possibilities they would not have had otherwise.

When it comes to the Doctor's companions, I have tried to underscore one of the messages of the program: that they are necessary and equal to the Doctor in several ways. The significance of this is that the companion is no mere sidekick or assistant, but someone who can be considered a main character and the hero of the story, or one of the

heroes. In some ways, the Doctor and his companions each give the other some missing

element that helps the other realize their hero potential. On the other hand, the Doctor and

his companions have each achieved hero status on their own on numerous occasions, but

at the very least, the meeting of the two characters can be all that is needed for one of

them to unlock their hero potential. For instance, the Doctor saves the day on many

occasions, but he is often brought to a particular situation, or persuaded by his companion

to make a critical decision.

The Doctor Should Not Travel Alone

Doctor Who has established many themes throughout its fifty years, though for

the purposes of this thesis, we will focus on the re-launched series. It is important to note,

however, that a theme established in the original series, and kept to this day, is that the

Doctor does not often travel alone: he travels with a companion. The Doctor has had a

number of companions, but they are usually female humans whom he has met

serendipitously.

The Doctor has created many enemies in his approximately nine hundred years of

travelling through space and time, but he has also been the hero to many individuals as

well as entire races, gaining universe-wide renown at various points throughout the

series. The Doctor has the ability to make great and terrible things happen, but his

companion, in addition to assisting him on numerous occasions, helps balance the Doctor

and make him more compassionate. In the series seven premiere, Asylum of the Daleks

(series 7: episode 1, 2012), the Doctor and his companions at the time, Amy and Rory,

are captured by the Daleks and forced to complete a dangerous mission that the Daleks

themselves are too afraid to do. The Doctor asks the Daleks why they brought Amy and Rory there too, and the Daleks reply, "It is known the Doctor requires companions."

Convincing the Audience

Thus far we have looked at how female and male characters are represented in *Doctor Who*, as well how the companion develops to be of an equal status to the Doctor. I would argue that these themes are not accidental, but rather are part of a shared polemic advanced by the show's producers and writers. In this section I will briefly discuss other strategies, beyond offering role models, that are used to disrupt the status quo and make the case for a more enlightened view of gender roles.

I will discuss these in terms of:

- Disruption of "Normal Life"

- Turning Sexist Tropes Upside-Down

- Disruption of Language Norms

- Implied Cultural Determinism

- Contrast To Less Enlightened Past

Disruption of "Normal Life"

While Britton (2011) gave some examples of exceptions to his argument that the re-launched *Doctor Who* enforces heteronormative roles for women in ways similar to the classic series, I would argue that the depiction of old heteronormative roles has been turned on its head in the new series, and with each passing episode of its seven seasons, and counting, the writers and producers strive to underscore this effort more vehemently. There are of course, occasional exceptions, but these do not come close to eclipsing the

overall message of a preference to do away with traditional norms and create a new paradigm.

Throughout the series, the Doctor clearly expresses his distaste for his companions leading an ordinary life when he is not around. Although this is a common theme, the entire episode entitled *Amy's Choice* (series 5: episode 7, 2010) centers on this idea. In the episode, the TARDIS air supply gets contaminated with "psychic pollen from the Candle Meadows of Karass Don Slava" that causes the Doctor, Amy, and Rory to go in and out of a dream state. The scenes alternate between them in a rural village and inside the TARDIS; the trouble is that they do not know which is real.

In the rural village timeline, Amy is noticeably pregnant, and Rory has a very peculiar mullet; both are traits we as the audience know are not typical of Amy and Rory. Amy is mixing batter in a large bowl and eating it off the mixing spoon when they hear the sound of the TARDIS materializing. The Doctor steps out and says that he is dropping in to check on them after not seeing them for five years. The Doctor is surprised, though not particularly joyous, to see that Amy is pregnant, and the three of them go on a stroll down the village lane. There are no villagers out in the streets, and the three sit down on a bench, with the Doctor noticeably bored. This dialogue follows:

Doctor: "Ah Leadworth. Vibrant as ever." (no one is around)

Rory: "It's Upper Leadworth, actually. We've gone slightly up market."

Doctor: not amused: "Where is everyone?"

Amy: "This is busy."

The Doctor spins around, perturbed.

Amy: "Ok it's quiet but it's really restful and healthy. Lots of people around here live well into their 90s."

Doctor: "Well don't let that get you down."

Throughout the episode, the three go back and forth between the two "realities." Amy, through introspection, concludes that although her humdrum existence with Rory in the rural village is not a bad one necessarily, it is not really true to herself, and they eventually wake up on the TARDIS – and to their life as adventurers and explorers, as their true reality. Interestingly, the Dream Lord, an unpleasant character who forces Amy to select, under threat, which life she wants to be real, is something of a product of the Doctor's psyche, born from the psychic pollen, which the Doctor explains is a mind parasite that feeds on one's dark characteristics.

Another example of the Doctor's preference for his companions, both current and past, living an atypical life, occurs at the end of the episode *Doomsday*, which is the season finale of series two (episode 13, 2006). In the following exchange, the tenth incarnation of the Doctor visits by means of a holographic image his companion at the time, Rose Tyler. Rose, in a dramatic and catastrophic turn of events, gets stuck with some family and friends in a parallel universe where the Doctor cannot rescue them. He arranges a one-time visit by holographic images so he and Rose can say their emotional goodbyes. Three points should be noted to provide background information: (1) Rose worked in a department store before she met the Doctor and went away with him on adventures, (2) Rose's boyfriend at the time of her meeting the Doctor is named Mickey, and (3) Torchwood is the name of a British-run institute that investigates extraterrestrial activity.

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Doctor: "You've still got Mr. Mickey then."

Rose: "There's five of us now. Mum, Dad, Mickey, and the baby."

Doctor: You're not…"

Rose: Laughs, "No, it's mum."

The Doctor laughs, looking relieved.

Doctor: "And what about you? Are you…"

Rose: "Yeah, I'm back working in the shop."

The Doctor looks disappointed, almost cold. "Oh, good for you."

Rose laughs. "Shut up. No I'm not. There's still a Torchwood on this planet open

for business. Think I know a thing or two about aliens."

Doctor, smiling: "Rose Tyler, Defender of the Earth."

From these two examples, we see the Doctor's not-so-hidden desire for his

companions to live a life that defies the usual conventions. Working in retail, getting

married, and having children is a common narrative for many, and there is nothing wrong

with this as long as that is what one wants, and one knows that they have the choice of a

different narrative if they desire. The Doctor reminds us of this; to question traditional

narratives and that it is ok create your own.

In a similar way, *Doctor Who* also relies on plot points and dialogue to call

attention to, and question, everyday sexism and gender norms. One such example is the

long held stereotype of household chores being "women's work." In *The Idiot's Lantern*

(series 2: episode 7, 2006), writer Mark Gatiss utilized the norms of the 1953 setting to

make the point that this is an outdated, not to mention illogical, idea:

The Doctor: Hold on a minute. You've got two hands, Mr. Connolly. Two big hands. Why is it your wife's job?

Eddie Connolly: It's housework, innit?

The Doctor: And that's a woman's job?

Eddie Connolly: Of course it is.

The Doctor: Mr. Connolly, what gender is the Queen?

Eddie Connolly: She's a female.

The Doctor: Then are you suggesting the Queen does the housework?

Eddie Connolly: No! not at all!

The Doctor: Then get busy.

Another clever – and persuasive – subtext is: gender equality in your relationship is patriotic!

Turning Sexist Tropes Upside-Down

As we have established, contemporary television is riddled with sexist tropes, but thankfully, *Doctor Who*'s writers take a less lazy, more enlightened approach. One familiar character on television is that of the panicking or fainting woman. It is not an over-generalization to say that the women of the rebooted *Doctor Who* are, however, cool, collected, and quick-thinking under pressure. It is not that they have been masculinized, for being calm under pressure is not an inherently male trait; it is that they have finally been allowed to act in a more authentic way, rather than as a plot device or counterpoint to the calm, collected (often-male) lead. One of numerous examples of this is in *The Fires of Pompeii* (series 4: episode 2, 2008), during the volcanic eruption, as the

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Doctor and Donna run to the safety of the TARDIS, Donna tries to direct the citizens of Pompeii to safety.

Another tired dynamic in contemporary television is cattiness between female characters; this is not the case, however, in *Doctor Who*. It is true there are some moments of jealousy, but these are few and far between. For instance, in the *Sontaran Strategem,* (series 4: episode 4, 2008) Donna and Martha became immediate friends. In fact, in this episode, Russell T Davies deliberately developed the character of Martha for her return: she no longer has feelings for the Doctor, she is more mature and equal to the Doctor, and more focus is placed on her medical career.

Disruption of Language Norms

There are numerous examples of not only a concerted effort on behalf of the *Doctor Who* producers, writers, and actors to go against traditional social and gender norms, but to extend this polemic to a disruption of language that helps to maintain that status quo. Many of these examples can be seen throughout seasons five, six, and seven,

The anti-heteronormative agenda of the *Doctor Who* writers can be quite overt at times. For example, there is a brief interaction in *A Town Called Mercy* (series 7: episode 3, 2012) that somewhat recalls the Doctor speaking "baby" and stating Alfie's preference for being called Stormageddon (*Closing Time*, series 6: episode 12, 2011). In this case, the Doctor, being able to speak "horse," naturally, corrects the horse's owner. The owner tells the Doctor: "He's called Joshua. It's from the bible. It means 'the deliverer'." The horse then whinnies, and the Doctor replies to the horse's owner: "No he isn't. I speak horse. He's called Susan, and he wants you to respect his life choices."

In *A Good Man Goes to War* (series 6: episode 7, 2011), we learn that Amy and Rory's daughter received Amy's surname, Pond (which was modified to "River" because of a translation issue). Amy favored "Melody Pond" because it sounded like the name of a superhero, whereas "Melody Williams" was a name better suited to a geography teacher. Interestingly, Melody Pond (later known as "River Song") became a combination of both: academic and superhero.

It is also a running theme that Amy's surname "Pond" is given to her fiancée and later husband, Rory Williams, with both the Doctor and Amy calling him "Mr. Pond." In *The Big Bang* (series 5: episode 13, 2010), Rory, assuming the Doctor just does not understand Earth customs, tries to explain that surnames do not work that way, but the Doctor argues that his way is correct, and Rory concedes.

In a culture where gender lines are rigidly drawn, and crossing them seems unimaginable to downright deadly, it is all the more important that such hugely popular programs as *Doctor Who* should cross these lines and demonstrate that is ok to do so. Sometimes it can be something as seemingly small as a name, such as the male horse named Susan, or in *Asylum of the Daleks* (series seven: episode 1, 2012) when Oswin Oswald has nicknamed Rory "Nina", after a girl she had once fancied or possibly dated. In real life, gender divisions are more prominent than ever, from "his" and "hers" earplugs, to "gender reveal" parties/baby showers; small moments like these in *Doctor Who* are all the more important for reminding us all that gender is not black and white, or rather, pink and blue.

Implied Cultural Determinism

As I have tried to illustrate through examples, the *Doctor Who* writers move away from the artificial, and yet pervasive, gender binary by instilling some stereotypical feminine traits within their male hero figures (i.e. the Doctor, Captain Jack Harkness, Rory Pond-Williams), and vice versa (i.e. all of the Doctor's companions, plus assorted other characters, such as River Song and Prime Minister Harriet Jones). This, however, is just part of the solution; the *Doctor Who* creators go well beyond giving women masculine traits or placing them in traditionally masculine roles, which as Sarkeesian (2010) warned only reinforces male dominance when the gendered value systems are not disrupted. Instead, they create new circumstances, new demonstrations of heroic acts, male and female characters whose genders are expressed on a spectrum that is not fixed, and break from the old tropes that one so often sees in any array of action, science fiction, or even romantic comedy films or television programs.

It is telling that several of the heroes in *Doctor Who* that we admire are shown to come from more "evolved" societies (including those of a future earth) – a strategic move that implies that such a view is, perhaps, both culturally inevitable and desirable.

The prime example of this is Captain Jack Harkness, who hails from a 51st century that has reached total gender fluidity. Also starring in the *Doctor Who* spinoff, *Torchwood*, which is geared toward a more mature audience due to graphic violence and sexuality, the openly pansexual (i.e., someone with the capability of being attracted to others regardless of their gender identity or biological sex) Captain Jack Harkness has become a role model in the UK and beyond.

Contrast To Less-Enlightened Past

This is, fundamentally, an inversion of the previous strategy, where the past, rather than the future, is employed as a resource to throw our current social norms into a new perspective.

Again there are many examples of this sprinkled across the series, but it is perhaps most clearly embodied in the character of big-game hunter, John Riddell, who appears in *Dinosaurs on a Spaceship* (series seven: episode two, 2012). Riddell, who the Doctor picked up from the African Plains in 1902, is placed on a spaceship in the future along with Queen Nefertiti of Ancient Egypt. He is quite charismatic (and nicknamed by Amy "the walking innuendo"), but makes several chauvinistic comments, which would be quite the norm growing up in the Victorian era as he did, such as saying to Amy, "You clearly need a man of action and excitement."

On this spaceship full of dangerous dinosaurs roaming through the dimly lit corridors, Amy and Nefertiti – who might be described as an example of the "strong woman" - hold their own. At one moment near the end, Riddell is preparing to hold off attacking raptors with a tranquilizer gun and looks to the Doctor for assistance, saying "Doctor, this is a two man job." At this moment, Amy picks up the other tranquilizer gun, and Riddell asks her what she is doing, to which Amy replies, "I'm easily worth two men. You can help too if you'd like."

Riddell is presented as an example of an attitude that should be confined to the past, having no place in today's more equal society. Significantly, his time with Amy and Nefertiti makes him less sexist, as his respect for them grows by the end of their

adventure. Moreover, by remaining charismatic and cheeky, minus the sexism, Riddell's

character delivers another important message to the audience - that the dashing male hero

can still get the girl (Nefertiti) and appear cool and cheeky, without being chauvinistic.

Are These Strategies Working?

If Doctor Who producers and writers are attempting to communicate a new

perspective on gender to viewers, how far has this polemic been accepted? While it is

difficult – and perhaps impossible – to give an unequivocal answer to this question, it is

certainly true to say that many of the themes discussed throughout this study have gained

a good deal of attention from *Doctor Who* audiences.

For example, while *Doctor Who* fans are always extremely active in social media

in commenting on particular scenes and lines, the line about the horse named Susan

discussed earlier (*A Town Called Mercy,* series 7: episode 3, 2012) gained particular

attention. The line quickly went viral, with the general response of viewers being

delighted by such a bold, funny, and somewhat unexpected line.

A small percentage of naysayers criticized the line as an intrusion of what they

considered an overtly liberal agenda. On social media message boards like Facebook,

however, these were quickly dismissed by other followers of the show, or "Whovians."

One notable response to a remark criticizing this scene, which seems representative of

other comments in response to the scene, was: "The only agenda that's being pushed is

tolerance and acceptance. If you cant accept that, then maybe you truly aren't a Whovian

afterall [sic]" (Gund, 2012). I also wonder, however, if that line stood out more to the

audience not so much because it was particularly radical as far as *Doctor Who* lines go,

but because that particular episode was made in the style of a low-key western, without

loud and fast-paced plot twists in an alien environment surrounded by all manner of the peculiar in which it might not have seemed so extraordinary by comparison.

However, another question that centers on gender and *Dr Who* may throw a rather less optimistic light on the issue of message acceptance and the consistency of the polemic being offered. For all of *Doctor Who*'s equal representation and gender equality, why has there not yet been a female Doctor?

Given what we have seen that supports the argument that men and women are, for the most part, represented as equals in *Doctor Who*, and that the program does not shy away from female characters who are equal to the Doctor in bravery and complexity of character, one might very well ask why each time the Doctor is to be played by a new actor, the show runners have not selected a woman for the part. This is an interesting question, and one that has been raised frequently, particularly in the lead-up to the announcement of who would be playing the Twelfth Doctor.

Before the announcement of Capaldi as that Doctor, while fans and news outlets were speculating as to who it might be, those involved with the creation of the show were also asking the public for their feedback. *Doctor Who Magazine* in issue 464 published the results of a poll in which they asked the reader whether they liked the idea of the Doctor being played by a female actor. Despite the more vocal presence of online articles in favor of a female Doctor, the poll results suggested otherwise, although not by a huge majority. The results were as follows:

- I am female and I don't like the idea of a female Doctor: $66^{2/3}$%

- I am female and I like the idea of a female Doctor: $33^{1/3}$%

- I am male and I don't like the idea of a female Doctor: $66^{2/3}$%

- I am male and I like the idea of a female Doctor: $33^{1/3}$%

Overall result:

- I don't like the idea of a female Doctor: $66^{2/3}$%

- I like the idea of a female Doctor: $33^{1/3}$%

Of course, that is only one poll so it should be taken with a grain of salt; however, it is interesting that "with a record-breaking 2700 votes cast in total," both sexes voted in equal proportion. (Doctor Who Magazine #464, October 2013)

Steven Moffat, *Doctor Who* show runner since the beginning of production for the fifth series in 2009, has, at times, expressed an antipathy towards the idea of a female Doctor. From his remarks, Moffat appears concerned with the idea that one's sex is an inherent part of one's identity.

Moffat made a joke that promptly made the internet rounds and did not sit well with many people: "I like that Helen Mirren has been saying the next Doctor should be a woman. I would like to go on record and say that the Queen should be played by a man." With a comment like that, it seems very unlikely there will be a female Doctor allowed while Moffat remains the show runner; however, it seems possible that that may have simply been a flippant remark, especially when one reviews other, contradictory statements Moffat has made which seem more in favor of a female Doctor. Of course, Moffat is notoriously secretive and, like the Doctor, is prone to fibs and keeping tricks up his sleeve. Moffat told Digital Spy and other press a different reason for not going with a female Doctor this time around: "It's absolutely narratively possible [that the Doctor

could be a woman] and when it's the right decision, maybe we'll do it. … It didn't feel right to me, right now. I didn't feel enough people wanted it" (Jeffery 2013, para. 3). Furthermore, he claimed that part of the reasoning was that many female fans were opposed to casting a woman in the role, supposedly: "Oddly enough most people who said they were dead against it – and I know I'll get into trouble for saying this – were women. [They were] saying, 'No, no, don't make him a woman!'" (Jeffery 2013, para. 6).

Stevens' (2013) argument against the idea of there being a female Doctor is based on not wanting to lose such a unique male role model for boys to look up to. I would suggest, however, that young boys have the ability to see female leads as role models as well. Indeed, with the number of dynamic male lead characters vastly outnumbering interesting female leads, girls have long grown accustomed to identifying with and looking up to male characters, although it can admittedly be disheartening and alienating to realize that most of your role models are not relatable as far as gender goes. Many girls have grown up seeing the likes of Han Solo, Indiana Jones, or James Bond on the screen and aspired to be like them. Stevens rightly argued that there are not enough adult male role models on television with the unique set of qualities that the Doctor has, and that this character has been a role model for generations of boys. Some of the unique qualities Stevens enumerated include the deviation from the typical muscular superheroes; rather than physical force, the Doctor uses cleverness to overcome enemies or obstacles. The Doctor is also anti-gun, unlike many male hero figures, particularly on American television. Rather than a gun, the tool that the Doctor utilizes on occasion is his sonic screwdriver.

Stevens (2013) made the argument that an anti-violent, intelligent, "brave, reflective," male hero "with a keen sense of duty" is an admirable example of a man, and however one envisions the exemplar man, it is fair to say that the aforementioned traits are, at least, exemplary in the way in which they offer an alternative figure for males to relate to that is underrepresented in television. But could not a woman also embody all of those characteristics? Surely one's sex would not make one unable to be brave, reflective, clever, etc. Thus, it comes down to the viewer to *perceiving* that this is not possible, based on preconceived ideas of gender roles, social conditioning, and exposure to stereotypes. Indeed, perhaps as a way to adapt to the shortage of dynamic female heroes in film and television, women have for some time been more flexible in identifying with female and male characters. This is also not to say that the Doctor should even *be* a woman; my point is that men should not be discouraged from finding role models and traits to which one might aspire in female *or* male characters simply because of their sex.

In fact, while some television producers have confidently stated that boys would not watch female heroes, there is significant evidence to the contrary. Nobody knows whether there will be a female Doctor in the program's future, as those at the helm of *Doctor Who* have and will continue to change over time, just like the Doctor. It seems safe to assume, however, based on the discussions surrounding the changing nature of the Doctor and the possibility of a female Doctor, that there is a fair amount of support for a future female Doctor, and that fans, despite the occasional protests, adjust to change, and will continue to follow the program, just as most of the companions, despite occasional grievances, will follow the Doctor to the ends of the earth and beyond.

CHAPTER V

CONCLUSION

With this thesis, I set out to explore the ways in which *Doctor Who* has created, and continues to create, non-gendered hero figures for contemporary television audiences. While keeping in mind the significance and influence of a program as popular and influential as *Doctor Who* reinvisioning mythic archetypes, as well as a current television climate in which women are still marginalized, I examined the messages the program was sending out in terms of its narrative and character choices. I have identified ways in which women are still marginalized on television, from the number of speaking roles to the limited roles depicted. In contrast to this, we saw numerous examples of gender equality and diversity in the writing of the episodes and characters of *Doctor Who*, illustrating that *Doctor Who* is exceptional in its pioneering of the movement toward equality in gender representation on television.

I also looked at what was considered the typical "female hero" and "male hero" in television, and how those roles are limiting for all genders. I contrasted those stereotypes with male and female hero figures from *Doctor Who* that shared a diverse range of characteristics that could be considered admirable and heroic, and that were not coded by gender stereotypes. These well-rounded hero figures are more relatable and set a better example for viewers. I demonstrated how *Doctor Who* portrays its heroes with depth and a wide variety of characteristics. Furthermore, we saw that one of the ways *Doctor Who*

solidifies that a hero does not have to be defined by their sex or gender is by blurring the lines between the heroes, which was demonstrated in the examples of the symbiotic relationship between the Doctor and companion. One could even argue that *Doctor Who* makes gender irrelevant.

Additionally, part of the way to break free of the myth of the gender dichotomy is to recognize that gender is not binary. A helpful way to reclaim that middle ground (i.e., the spectrum that goes missing in a culture that pushes a gender dichotomy), is to queer the binary; that is, start with flipping the polarity, such as swapping gender roles. This is not a perfect plan as it has the potential to still reinforce the binary and, with it, stereotypes, but small reversals of gender expectations, such as saying a male horse wants to be known as "Susan," starts a dialogue and begins to open people's minds to the fact that prescribed gender roles are not rules that must be adhered to, that they can be bent or broken, and that not only will the world not end, it might even become a little better.

Limitations and Future Directions

This has been an analysis of the content of *Doctor Who*, but it would be intriguing to expand this through audience analysis. I wonder whether the messages of gender equality and acceptance of others are having an impact on viewers? I also wonder whether other *Doctor Who* viewers perceive there to be a new, non-gendered, hero archetype. As the longest-running and most successful science fiction series of all time, these messages matter. I also recognize that the various characters of *Doctor Who* covered as examples in support of balanced female and male roles, were, nonetheless, of a binary sort. There is a relative lack of characters in the program in the middle of the gender spectrum who might be considered non-binary, genderqueer, or agender, and this

thesis does not attempt to speculate which minor characters may be representative of those gender identities, although such a paper should prove interesting.

Other questions that remain, however, are more matters of the chicken and the egg sort, such as: whether the writers are creating this more accepting post-modern environment that is willing to embrace new hero archetypes, or whether the writers are creating new heroes to fulfill the expectations of a postmodern audience. I suspect it is both, with a big push from *Doctor Who* to get the ball rolling and gaining massive momentum, as well as a cultural environment in the UK that was already better positioned to nurture such a program. Having a society that grew up with the regularly cross-dressing cast of Monty Python, a female British Prime Minister in its history, and numerous other factors, helped *Doctor Who* become the quintessential British television show, even from its early days almost fifty years ago, and the phenomenon that it remains to this day. Finally, as *Doctor Who* celebrated its 50th anniversary this year and has no plans to end any time soon, obviously, future research will, it is hoped, continue to follow the program.

All of these messages shared between the program and its audience are significant, as I stated previously, because of *Doctor Who*'s popularity, its accolades, and its ever-growing ubiquity. The enduring nature of myth has certainly informed this wildly popular and successful program, has made it a cultural myth of the UK that is also accessible to viewers of many other cultures, and is what underscores the importance of its messages and re-envisioning of mythic archetypes and the way in which they shape current and future audiences.

The Future of the Non-Gendered Hero Archetype

Doctor Who features hero characters who *happen* to be female; they may be strong in the traditional action-movie physical sense, or their strength may be in their intuition, emotional perception, book knowledge, computer program knowledge, loyalty, independence, curiosity, concern for others, thirst for adventure; the list can go on. Because real women and real heroes are a *combination* of traits. The critical point here is that the heroes who happen to be male are allowed to express this same wide range of traits, and for each of those characteristics to be considered valid. *Doctor Who* gets this right while the program's contemporaries miss the mark. Hopefully there will come a day when terms like "strong female hero" are unnecessary because they are "othering." That is, it reinforces the idea of the male hero as the default, and also because "strong" has come to represent mostly physical strength, which is - unfortunately for men and women alike - all too often associated with the male hero archetype. As there is still a need for rhetoric concerning the advancement of female roles in television and film, particularly as heroes, a term like "strong female hero" does have its uses to identify and carve out that corner of the conversation. I would like to propose, however, for the purposes of advancing the rhetoric around the new kind of female hero we are looking for, perhaps "dynamic female hero" can serve in its place. The goal of the "non-gendered hero archetype" is that what it describes – a hero figure unconstrained by biological sex and gender norms whose hero status is not evaluated based on stereotypical gender criteria – can become the meaning behind "hero", without needing to preface the word any longer or delineate "male" or "female." So many writers and producers are stuck in a formula with the same hero archetypes; archetypes that are harmful in the way they perpetuate

antiquated, false, and limiting notions of gender. Perhaps television and film writers need to find a companion or a "mad man with a box" to help open their minds to the possibilities in narratives and characters that they are missing out on by choosing to repeat what is easy, rather than reach for the unknown? Or perhaps they could just start with watching *Doctor Who* and taking notes.

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