

Madness, Resistance, and Representation in Contemporary British and Irish Theatre

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Mum. Dad. Lizzie.

It runs in the family.

ABSTRACT

This thesis questions how theatre can act as a site of resistance against the political structures of madness. It analyzes a variety of plays from the past 25 years of British and Irish theatre in order to discern what modes of resistance are possible, and the conceptual lines upon which they follow. It questions how these modes of resistance are imbibed in the representation of madness. It discerns what way these modes relate specifically to the theatrical, and what it is the theatrical specifically has to offer these conceptualizations.

It achieves this through a close textual and performative analysis of the selected plays, interrogating these plays from various theoretical perspectives. It follows and explores different conceptualizations across both political and ethical lay lines, looking at what composes the theatrical practical critique, how theatre can alter and play with space, how theatre capacitate the act of witnessing, and the possibility of re-invigorating the ethical encounter through theatrical means. It achieves this through a critical engagement with thinkers such as Michel Foucault, Henri Lefebvre, Jacques Derrida and Emmanuel Levinas. Engaging with the heterogeneity of madness, it covers a variety of madness's different attributes and logics, including: the constitution and institutional structures of the contemporary asylum; the cultural idioms behind hallucination; the means by which suicide is apprehended and approached; how testimony of the mad person is interpreted and encountered.

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INTRODUCTION

Personal Development Towards Thesis

This thesis provides an interrogation of the representational politics of madness and how theatre can act as a site of resistance. The genealogy of madness has long drawn upon structures of performance and performativity. Yet, within theatre and performance studies, there has been a comparative dearth of sustained engagement with the politics of madness. In particular, there has been little rigorous conceptual wrangling with what it means to resist through performance in the context of representations of madness. This thesis will attempt to remedy this lacuna.

There is no easily identified path, or moment of revelation that conceived this project, or the work. Rather, it has been the slow sedimentary accumulation of the thoughts and gestures in the world around me, that has led to a fascination with the connection between performance and madness. Far from a Damascene revelation, it has been the observance of ugly trends and quiet violence in everyday life that has formed the intellectual anger that has sustained this work: the persistent assumption that madness is performed, that it is possible to read madness upon the body; the shock of the revelation of the mad person who has managed to 'pass' as normal, often followed by a weird form of congratulation; how those who decide to express their status as 'mad', through a combination of the voyeurism surrounding them and an insistent cultural logic, are forced into a foreign, confessional mode; a slow accumulation of political awareness, around psychiatric survivors, around practices of sectioning, around enforced treatment.

Whilst there is no originating moment, the structure of this thesis can be threaded alongside my own history in academia. My joint honours BA in Politics and Philosophy at Cardiff University prompted the intellectual curiosities that would mature in this thesis. My studies in philosophy ventured across literary theory, philosophical apprehensions of language and discourse, marking out hermeneutics circles, across thinkers such as Jacques Derrida, Paul de Man and Hans-Georg Gadamer. In politics, I returned to the contradictions embedded in sovereignty, its relationship to constitutional structures, constructions of agency, the theory of

international relations. Between these two disciplines, a sustained interest emerged, in how structures of language inform political codifications of agency and, in parallel, how political operations of power preclude possibilities of language and exercise power through the practice of definition.

Beginning to think through theory and its implications, my MA at the Royal Central School of Speech and Drama shifted this to an appreciation of how aesthetics – specifically drama - can interplay with conceptions of language, sovereignty and agency. As I studied Writing for Stage and Broadcast Media, I was encouraged by my tutor, Tony Fisher, to apply my knowledge of philosophical and political discourse to dramatic structure. In both my own work, and in analysis of playwrights such as Simon Stephens, Caryl Churchill and David Mamet, I appreciated drama as a potential bridge between my concerns of language and sovereignty.

This development, from philosophy and politics to writing for stage, is what has capacitated this thesis. It draws upon a range of conceptual work, and interrogates them, in order to analyze how certain theories can help us illuminate the processes at play in certain performances. This work rarely involved an explicit engagement with madness. But in retrospect, madness constantly reoccurs, incessantly in the background. Philosophies of language frequently return to madness, through allusion or inspiration. Notions of sovereignty, the question of the sovereign citizen, are always punctured by madness; madness exists in a state of exception, incorporated into the law, yet excluded at the same time. Likewise, in plays studied and plays written, questions of madness and agency reoccurred, across depression to post-natal psychosis, from observable malady to disruption of world. If madness has not always been my object of intention, it has nevertheless seemed to pulsate throughout my development.

What is Madness?

Prior to an elaboration of the nature of this research, the questions engendered, and the caveats of this research, it is necessary to perform a brief exploration of what I mean by madness, and my reasons for using the term. This task, appropriately, quickly proves evasive. At the beginning of *Madness: A Brief History*, Roy Porter declares any definition of ‘madness’ to be impossible (Porter 2002: 4). The language surrounding madness, appropriately, seems to evade

definition. The work of defining madness (if even desirable) would be the work of another thesis. This thesis is less interested in fully engaging with this conceptual ouroboros, any attempt at definition will necessarily be heuristic. Indeed, the attempt to define madness, can itself involve an act of containment and violence. However, this does not negate a respect and response to the genealogy of these terms. Drawing upon this genealogy, I shall outline the particular use and rationale behind the terms I shall be using throughout this thesis. This is not to suggest I am unaware of the potential negative connotations of the terminology I shall be using; rather that, in a field where many of the terms are potentially offensive and politically loaded, instead of problematically attempting to claim a term as 'neutral', it is preferable to engage in the politics of the language, and to define my intended meaning as clearly as possible.

One difficulty in exploring the language of madness is the contestability of meaning and associated politics of many of the terms. Many of the terms are held to be offensive according to various positions. On the one hand, David Oats (2012), director of MindFreedom, views the term 'mental illness' as a stigmatising phrase that frames behaviour that society wishes to oppress as a 'sickness'. On the other, in responding to Pat Bracken's use of the word 'madness' in an article, Sue Collinson referred to herself as having a 'mental illness for two years' and claiming, 'notions of mad and madness are highly stigmatising. It is sad to see these terms still being used in the psychiatric profession' (Collinson 2001: 451).

The terms mental illness and mental health emerge from the biomedical model. Under these terms, mental illness is an a-historical observation, a diagnosis to a scientifically verifiable condition. In this sense, the term mental illness partitions the present from the past, allows contemporary psychiatric practice to disavow itself from the abuses of the past and, in doing so, neglect the genealogies of power. Terms such as 'mental health' and 'mental illness' are comparatively new, and suggest a rift or shift in psychiatry, a gulf between the 'lunatics' of the past and the 'patients' of the present. In contrast, 'madness' evokes the long history of oppression and the complex lineage of political structuration; to use madness reminds us that the persecution and oppression of the mad has not ceased in the advent of scientific advances and that it is possible to have an asylum without walls.

Moreover, madness also avoids the automatically negative connotations of the term 'illness'. Mental illness suggests a purely negative experience, it implies something that undermines and diminishes our lives, as something desirable to be cured. However, this is to ignore the potential positive aspects of madness, that it can include the experience of both extreme mental distress and mental joy. Darian Leader (2011) notes that those undergoing a 'manic' phase experience acute joy; whilst many partake in shopping sprees, the purchases are commonly for others, the result of an immense feeling of altruism. This is not to romanticize madness, or to suggest mental distress does not exist. But rather, madness can encompass an expansive range of different experiences.

Thereby, my use of 'madness' as a term follows from the following concerns: firstly, I wish to locate my thesis in an analysis of the political, social and cultural construction of madness, to situate contemporary developments within larger historical movements; secondly, to acknowledge that unlike the purely negative connotations of 'illness', madness can encompass also positive and pleasurable aspects for those deemed mad. By using madness as a term, I am anticipating madness as political ideology. I am concerned with madness as the socio-political structures by which we deem certain behaviours and persons as aberrant or abnormal, pathologize them underneath a diagnostic gaze, and exclude and contain them in a variety of institutional and cultural mechanisms. Rather than a simply monolithic operation, I am interested in a pluralistic apprehension of madness, looking at the multiple operations and logics (sometimes contradictory) through which the mad person is defined and silenced.

This is not to make a particular aetiological claim for these behaviours, nor to denigrate particular modes of treatment per se. This thesis is not interested in either pill-pushing or pill-shaming. Rather, it is to unearth the political ideologies which lie behind and reify these modes of treatment, that inevitably situate the doctor as able to define and contain the patient. An examination of some of the ideologies and concepts behind madness and mental illness, the relationship between political structures of madness, the personal experience of the mad person, and the aesthetic representation of both of these, will be more extensively examined within the conceptual overview and literature review.

Brief Outline of Research

This thesis will explore the radical possibilities of theatre in representing madness. Yet, the relationship between performance and madness is not necessarily a progressive one. There is the potential problem of madness as an exploited, exoticized, or sensationalized spectacle, across the history of madness. The treatment of women in the Salpêtrière in the 19th century by Jean-Martin Charcot has been compared to a theatre: Carina Bartleet notes that, 'if hysteria is performative in Judith Butler's sense of the term, Charcot's scientific emphasis on its symptoms and recognition through demonstration/repetition transforms hysterical display into performance' (Bartleet 2003: 245-246). Yet this performance is a staging in which Charcot controlled, choreographed and manipulated the female hysterics. The mad person is framed as the passive, often unconscious, object of understanding; Charcot the authoritative expert standing above her, dispensing knowledge. In this spectacle, a division between the observer and observed becomes tantamount to that between the knower and the known. Far from a site of autonomy, the stage becomes another site of oppressive power relations, wherein the psychiatrist instructs, manipulates and defines the mad person. Likewise, within theatre itself, there is often the issue of madness as metaphor, as a standby or representation for something else, rather than madness within itself. This understanding takes both the forms of a mode of writing and a reading practice. Greek tragedies are often understood to see madness as divine moral punishment, Christopher Gill suggests in Greek drama, 'tragic madness incorporates the two stages of Homeric *até*: it is both mental damage and disaster in events' (Gill 1996: 252). Elsewhere, madness is seen as a metaphor for social struggle, for instance as female resistance in the plays of Henrik Ibsen. This can result in a positioning of madness as both intentional struggle and clinical consequence. In this vacillation between passive 'illness' and active 'metaphor', we fail to apprehend madness within and of itself. Performance and theatre, thereby, can often act as hegemonic forces in the construction of madness. This is the background which informs this thesis: not the assumption that theatre and performance is inherently radical, but rather, with an awareness of the sometimes oppressive history of the relationship between performance and madness, an attempt to trace the potential of resistance.

This thesis will ask, through radical modes of representation, in what ways theatre can act as a site of resistance against hegemonic understandings of madness. It will look at British and Irish theatre across the past twenty-five years, to see how an engagement with theatre can provide new articulations and representations of madness. This is not a historical or material overview of the period, but rather a fundamentally conceptual question. Given the history of madness, the tendencies to silence the mad person, and considering how often articulations of madness are re-imagined into an articulation 'upon' madness, how can theatre represent madness in a manner that constitutes resistance?

It will question how representation relates and interacts with questions of resistance. How does resistance occur through representation, how can representation take place without in some sense defining madness, or repeating acts of oppression? This thesis will constantly be interrogating this relationship between resistance and representation.

Likewise, in regards to these interactions between representation and resistance, I want to look at how these modes of resistance are particular to the opportunities of the theatrical. This is not to suggest theatre is the only possible site of resistance, or to engage in a comparison of different forms. Rather, what particular opportunities does theatre and performance offer, that can capacitate resistance and radical representations? In this, I am not interested in how theatre spells out, or simply expresses, various theoretical constructs of madness. Rather than the fundamentally uninteresting (and unoriginal) conceit of theatre illustrating arguments previously expressed on the page, I want to look at modes of resistance specific to theatre, what resistance can be offered through performance. Methodologically, this will involve a close-reading of play-text and performance, with a key consideration of appropriate theory to help interrogate the various conceptualizations of resistance. My focus, on the text against the performance, has inevitably varied in accordance with the primary mode of reception of the play.

Conceptual Overview and Literary Review

The concepts of this thesis are loaded and passionately contested, whilst the literature required to analyze is sprawling and varied. This is only appropriate, given the intersections and interconnections of madness as a concept. Given this, an overview of concepts and literature is necessary. Building upon my previous discussion of madness, the first part of this literature review will involve a more in-depth engagement with the question of the biomedical, the question of anti-psychiatry, and certain figures looking at madness and mad persons, before positioning my own stance with relationship to madness, the mad person, and aesthetic representations of madness. This will be followed by continuing this review of literature, into areas that lie outside this debate, including philosophical sources, texts from literary studies, and work through performance studies. Finally, I will consider existing work within performance and theatre studies concerning madness.

Mental Illness and the Contemporary Biomedical Model

The term 'mental illness' emerges from the contemporary biomedical model, an understanding of mental health premised upon the division of all 'mental health' into identifiable and diagnosable disorders. Whilst recent developments in neuroscience have consolidated views of mental illness as a neurochemical catastrophe, the genealogy of the bio-medical model can be traced prior to the establishment of neuroscience. The belief that madness was 'written on the body' was prevalent in Victorian ideas of phrenology, whereby the shape of the skull was indicative of internal character (Donaldson 2002). Whilst throughout the twentieth century there had been a conflict between the psychodynamic and biomedical approaches to the classification and understanding of 'mental illness', recent developments in neuroscience have resulted in the dominance of the biomedical model as the paradigm of modern psychiatry (Luhmann 2000).

The biomedical model holds 'mental illness' and physical disease as equivalent, and claims to engage in the same scientific practice as modern medicine. Whilst it is contested what fundamentally constitutes the biomedical paradigm, Nick Haslam (2000) identifies four core precepts common to most conceptions; firstly, the notion of mental illness as a neurological

aberration; secondly, a distinct aetiology for each, discernible disorder; thirdly, disorders are a-priori discrete categories, rather than a pragmatic, loose grouping of behaviour; fourthly, these disorders are biological diseases, and are not bound to a particular cultural or social context. In terms of practice, this involves the reification of mental distress, behaviour and experience into objectively identifiable 'symptoms', in order to make a 'diagnosis' (Wilson and Beresford 2002). A diagnosis is made in terms of reference work, either the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) or the *International Statistical Classification of Diseases and Related Health Problems* (ICD). Treatment of the disorder is then made on a neurological basis, for example medication to manipulate the chemical balance of the brain¹.

The diverse features of the biomedical model consolidate in an essentialist argument, making an ontological claim for mental illness; in other words, it claims mental illnesses are objective phenomena that can be observed, categorized and treated. Haslam (2000) argues that the biomedical model is participating in an essentialist 'natural kinds' argument. This follows the philosophy of Saul Kripke, whereby certain words and classifications derive meaning from a result of their inherent properties (as opposed to superficial properties). For Kripke (1980), these properties have a causal relationship to the classification; under this theory, 'mental illnesses' are a priori categories, whereby neurological aberrations of the brain represent the causal properties of these categories. Therefore, the biomedical model is engaged, not only in an essentialist argument, but in an essentialism that is based upon a specific causal account of 'mental illness'.

It should be noted, this is not a critique of all psychiatric services, or current research in neuroscience per se. This is not referring to a particular treatment model of the mad. Rather, it is about a particular ideology and idealization of psychiatric services. Rather than for or against the use of medication, I am referring to the ideological structures behind medication. It is about the political structures which place the doctor as knowing figure over the passive patient;

¹ It should be noted it is the justification that delineates treatment as ascribing to the biomedical model; behavioural therapy can be justified on a neurological basis, for instance, the increase of serotonin following exercise.

whereby under existing legislation, the diagnostic control of the doctor takes the form of political control.

The Hegemonic: Anti-Psychiatry and Critical Psychiatry

The history of madness has not been the linear adaptation of the biomedical model. Across the latter half of the twentieth century, an attempt to rethink the psychiatric domination of the doctor over patient was re-cast by a variety of thinkers. Many of these thinkers worked as psychiatrists, including R.D. Laing, Thomas Szasz, Franco Basaglia and Giorgio Antonucci. These practitioners took intellectual sustenance from a variety of anti-institutional thinkers, in particular Erving Goffman, Michel Foucault and Jean-Paul Sartre. These practitioners and thinkers represented a vast constellation of ideas and ideologies, that David Cooper would famously attempt to group and contain at the 1967 Dialectics of Liberation conference under the name 'anti-psychiatry'. This contentious term would famously be disavowed by nearly all the most famous figures placed underneath its umbrella. Whilst this thesis does not involve a sustained engagement with this period, and thinkers such as Goffman and Foucault will be regarded in their own right, I wish to briefly consider the work of Laing and Szasz, and how they form the intellectual and institutional backdrop to this thesis.

Szasz (1974) has formed a critique of the biomedical model based upon the criteria of the sciences themselves. He has notoriously called mental illness a 'myth' and argues that the biomedical model constitutes bad scientific practice. He claims the biomedical model is premised upon a confusion of language, whereby the moral and metaphorical language of 'mental illness' is confused with the literal, physiological language of science. He refers to phrases such as 'dangerous to self and others' and 'psychiatric treatment' as apotropaic terms, the equivalent of magical words such as 'Abracadabra' (Szasz 2003). Laing was a psychiatrist in the UK, attempting to form different forms of psychiatric institutions; this began from within at the Tavistock Institute, eventually migrating to a separate institution altogether, with his famous commune at Kingsley Hall. In *The Divided Self* (2010), Laing would draw upon Sartrean thought, to argue that schizophrenia, far from a delusion, was an understandable response to

existential divisions. Far from disconnected to reality, for Laing, schizophrenia was marked by an authentic response to our ontological insecurity.

Both these perspectives, however radical at the time, nevertheless incorporate certain problematic attitudes with regard to madness. Szasz does not critique the application of the biomedical model in the case of physiologically manifested conditions; he is engaged in a critique of the applicability of the biomedical model in the case of 'mental illness', rather than the biological model itself. His political stance is fundamentally libertarian, constructing an easy divide between 'real' diseases of the brain and the 'non-real' metaphor of mental illness. In this easy division, his focus is persistently upon the aetiological, and does not interrogate the political construction behind diagnosis and these terms. Likewise, Laing indulges in a romanticization of madness; his aetiology of schizophrenia is framed around constructions of 'authentic' existence. At its worst, this emerges in a pedagogical manner, whereby our encounter with madness is framed so as to educate the sane.

Whilst this thesis does not propose to analyze from an avowedly Szaszian or Laingian perspective, with clear reservations about their contributions, Laing's own influence recurs across the imagination of British Theatre; in terms of direct representation, both David Edgar's *Mary Barnes* (1979) and Patrick Marmion's *The Divided Laing* (2015) involve Laing's project at Kingsley Hall. Two of the plays examined in this thesis – Joe Penhall's *Blue/Orange* (2000) and John Hayne's and David Wood's *The Eradication of Schizophrenia in Western Lapland* (2014) – reference and respond to Laing's work. Likewise, it is important to consider how these perspectives have fed into mainstream, hegemonic attitudes to madness, and not always with an element of liberation. The processes of de-institutionalization in the 1980s were inspired and used the intellectual cues of these anti-psychiatric thinkers. This process, often inspired by the individualism and financial expediency of neoliberalism, was attracted to certain strains of anti-psychiatric thought. Without simply framing anti-psychiatry as hegemonic or resistant, we can begin to approach the complexities of psychiatric power.

This thesis is not concerned with a systematic breakdown of the chronology and political situation of different anti-psychiatric positions. However, it is important to note the limitations

to an anti-psychiatric radicalism and the additional complexities of psychiatric power this presents. If the biomedical model is the pre-dominant hegemonic understanding of madness, it is hardly exclusionary. Rather, contemporary psychiatric power draws upon a series of different intellectual legacies, including the biomedical model and anti-psychiatric perspectives.

Philosophical Approaches to Madness

This thesis is concerned with the political structuration of behaviour deemed 'mad' by society, rather than the aetiology of those said behaviours. The term 'madness' has increasingly become contentious, an antiquated relic of past times, and seen as a pejorative or an insult. However, as is evident with queer theory or crip theory, there is a history in marginalized identities reclaiming and appropriating language for their own political ends; in particular, through the use of pejoratives to alert and highlight the long history of oppression.

This notion of madness as a socio-political construct is exemplified in the work of Michel Foucault. In *Madness and Civilization* (1980), Foucault charts the development of madness across modern history, from the ship of fools to the birth of the asylum.² Foucault emphasizes the extent to which these power structures influence and form the political subject. According to Joseph Melling and Bill Forsythe, 'Foucault was interested in the ways which laws of nature, scientific rules or 'games of truth' were formed and in how the human subject was constituted and constituted himself or herself' (Melling and Forsythe 2006: 2). Foucault argues that madness was silenced at the beginning of the Enlightenment; he cites René Descartes as the turning point, who in the *Meditations* excludes the possibility of madness from his argument for the Cogito, in so doing expels madness from philosophical consideration and language, renders it silent. The Cogito shuns madness, to think is not to be mad. This is quickly followed by the great confinement across the 17th and 18th centuries, as this exclusion takes form of the imprisonment of the mad into the asylum system. This form of silencing, however, is disrupted by the emergence of modern psychiatry at the end of the 18th century, typified by the

² It should be noted that Foucault's understanding of evidential analysis has been highly criticized by figures such as Andrew Scull and Roy Porter (Melling and Forsythe 2006: 205). Likewise, his periodization of the 'Great Confinement' works less neatly with British and Irish theatre. This thesis is less concerned with the historical acumen of Foucault, than the use of his reconceptualization of madness itself.

intellectual developments of Phillippe Pinel. Foucault argues that the language of modern psychiatry, 'which is a monologue of reason *about* madness, has been established only on the basis of such a silence' (Foucault 1988: xi, emphasis in original). Psychiatry, rather than simply confine the mad, seeks to define and speak over madness. In contrast, Foucault imagines his project as an 'archaeology of that silence' (Foucault 1988: xi).

Jacques Derrida subsequently critiqued Foucault's understanding of madness in 'Cogito and the History of Madness', an early essay collected in *Writing and Difference*. For Derrida, Foucault is, to some degree, complicit in the very structures he denounces; to write a thesis upon madness, is to write 'upon' the silence of madness:

is not an archaeology, even of silence, a logic, that is, an organized language, a project, an order, a sentence, a syntax, a work? Would not the archaeology of silence be the most efficacious and subtle restoration, the *repetition*, in the most irreducibly ambiguous meaning of the word, of the act perpetrated against madness (Derrida 2001: 41, italics in original).

For Derrida, Foucault is conceptually bereft, making a critique of reason whilst subscribed and within reason itself. To perform not a denotation of silence, but an inscription upon silence, a violence upon the silence of the mad. Foucault perhaps anticipates some of these critiques; but for Foucault the difficulty is created by historical circumstance; for Derrida, it is the structure of language. How can we claim to restore the voice of madness, without engaging within reason, seeking on some level to comprehend, and how can comprehension occur without some level of violence? Can we chart a 'history' of madness without some a-historical template for what madness constitutes?

Going further, Derrida countered Foucault's interpretation of Descartes, arguing that Descartes' use of the *malin genie*³ was precisely Descartes' way of incorporating the possibility of madness; the Cogito is formed, despite the threat of madness. Derrida would later return to this in 1994, "'To Do Justice to Freud": The History of Madness in the Age of Psychoanalysis', a

³ The *malin genie* is the evil spirit that Descartes uses as an imaginary tool, the suggestion that there may be a malignant entity seeking to deceive my every observation and thought, to facilitate his methodological skepticism.

lecture commemorating the 30th anniversary of the publication of *Madness and Civilization*. In this essay, Derrida expanded his idea of the malin genie, suggesting that the evil spirit spread across the history of madness, reoccurring. Far from simply an exclusion, of an untroubled silence, in Derrida's logic of supplementarity, the attempt to silence madness guarantees its continued presence. Madness ghosts reason, even in its exclusion.

Shoshana Felman would later use the central disagreement of Derrida and Foucault to propel her own placing of literature as ideally placed to expound and explore madness. In 'Madness and Philosophy or Literature's Reason', she would attempt to reconcile the acrimonious debate between Foucault and Derrida. Felman argues that Foucault and Derrida represent complementary, if competing, ways to perceive madness. Felman suggest that, 'the thoughts on both sides, although no doubt governed by different desires, in fact mutually enrich, reinforce and illuminate each other' (Felman 1975: 218). For Felman, this debate reveals that, rather than the logos of philosophy, the pathos of the literary is the only means to speak madness without performing an act of violence. Literature acts as a mode between thought and madness.

Mad Person's History

If there is a predominant critique of the theoretical elaboration of madness, by those such as Foucault, Derrida and Felman, it is that it focuses upon the ideological structures and institutions of madness, often to the neglect of those who are affected by it, or are deemed mad under its diagnostic gaze. The use of the term 'madness' implies madness is purely conceptual, that it is disembodied. Yet madness is not merely an abstract power structure, it is diagnostic in its gaze, operating through the infliction and naming of bodies as mad. An alternative approach emerges from psychiatric anthropology, which focuses upon the study of autobiographical accounts and the conception of madness as a 'lived experience.' The work of Roy Porter, in particular, has sought to emphasize that the structures of madness are inflicted upon mad bodies, and despite claiming the mad are silent, there is a vast archive of mad person's testimony.

The use of 'mad people' and 'mad person' has recently emerged from the academic and psychiatric survivor Geoffrey Reaume. As well as creating a course to look specifically at Mad People's History, with a focus on the testimony of those deemed mad, this has taken the form of his work *Remembrance of Patients Past: Life at the Toronto Hospital for the Insane, 1870-1940* (2009). From Reaume's perspective, the discussion of 'madness' from an epidemiological perspective as an objective 'disease' has ignored the personal and experiential features of madness. Moreover, figures such as Foucault (1988) have been accused of regarding madness as an abstract social concept, whilst ignoring the voices of the mad people that compose madness. Notions of madness, as discrete from mad people, are accused of becoming 'a history of ideas about madness, with little or no serious inclusion of the people whose stories make up this history' (Reaume 2006: 171). According to this anthropological approach, it is not only addressing the academic failure to incorporate the voices of mad people (without whom there would be no madness), it is addressing an ethical obligation, giving a voice to those who have repetitively been rendered voiceless. Accompanying this, outside traditional academic structures, is an increased platform for groups and charities that orientate and focus upon mad voices. Groups such as the Hearing Voices Network, Mind Freedom and a variety of psychiatric survivor networks have worked to put the voices of those deemed mad into focus.

It should be noted that the desired result of academic research emphasising autobiographical accounts of madness is not a singular, common narrative. Instead, this anthropological approach emphasizes diversity and heterogeneity of personal experience; academic courses in the history of mad people have included a diversity of perspectives, including psychiatric, anti-psychiatric and undecided positions. Instead of an attempt to consolidate a singular narrative of madness from multiple accounts, it is the act of listening itself that constitutes the study of madness as a lived experience. Firstly, it establishes the lived experience of madness as fundamental, whereby the individual experience is regarded as the object of study, rather than the social abstract. Secondly, regarding mental distress as a lived experience is an attempt to reverse power-structures that privilege the scientist and the academic over the mad person; it attempts to regard personal accounts as something other than material to produce to

biomedical diagnosis or academic thesis, and allows the possibility of lived experience to resist and inform abstract theoretical structures.

The Interplay Between Madness, Mad Experience, and the Representation of Madness

This thesis is primarily concerned with the aesthetic representation of madness. These representations can, and should, be distinguished from the political construction of madness and the lived experience of mad persons. Yet, this thesis will continually revolve around a triangulation of these three core aspects, and the porous boundaries that lie between them.

I understand madness as a series of institutional and cultural structures, that seek to control behaviour and expression, in an attempt to subdue and undermine the sovereignty of the person dubbed 'mad' to account or speak for themselves. Madness is imposed upon mad bodies, and is experienced by the mad person; its structures are not simply phantasms in the history of thought, but concrete and applied. Whilst metaphors and analogies may accompany this only too material operation, the material containment or measurement of mad bodies is in no way secondary to epistemological structures. Likewise, if we accept that the silencing of the mad is part of the construction of madness, then the nature of this silencing, or its efficacy, must be done in consideration with the voice of the mad. To simply ignore testimony and background of mad persons is to repeat the power structures of the psychiatric.

Yet, despite the importance of listening to the voices of mad people, it does not in and of itself provide a fully encompassing methodology whereby we have direct access to the lived experience of madness-as-impairment. Firstly, the 'voice' of the patient cannot be understood in isolation from the socio-political environment in which they are placed; the 'voice' of the mad can only be expressed through semiotic structures which are necessarily social and politically situated. Secondly, factors such as treatment and stigma radically affect the experience of mental distress; for instance, the treatment of depression with medication and behavioural therapy cannot be separated from the experience of depression itself. Thirdly, not only is the mode of expression politically embedded, even the personal experience of madness is mediated through social structure. Therefore, the mad person understands their own mental distress through political structures of madness. John Larsen (2004) suggests that mad persons

rely upon a 'cultural repertoire' within which they attempt to understand and express their condition. To engage in this interplay between madness and the mad person, between the socio-political and the ethical, is essentially to engage with aporia.

Aesthetic representations complicate these bridging areas yet further. The language of the aesthetic draws upon and is influenced by the power structures of madness. Yet, it also informs back. Plays, books, films, can influence attitudes, stigma, and practice. Likewise, whilst the mad person may draw upon the cultural repertoire of the aesthetic, they can also contribute, enlarge its vocabulary, invent new idioms.

Attempts to systematize or universalize these structures and various configurations between these different elements are generally ill-fated. Madness itself contains multiplicities. The mad can be deprived through the rhetoric of pity (that their situation is a deeply sad one, that they require care), the rhetoric of blame (they cannot behave appropriately, so deserve punishment) or even a mixture of the two (that they require forced care, that they will be punished if they do not welcome the care). It runs from everyday language to the deployment of sectioning. Its constructions contain multiplicities and contradictions. Likewise, to be deemed a mad person is not simply a homogenous experience, experiences diverge considerably: from diagnosis, to culture, to gender, to race, to material wealth and class. Any study of aesthetic representations of madness will have to contend with the heterogeneity of both power structures and lived experience.

Given the immensity of madness and mad experience, it is perhaps unsurprising that so many philosophical accounts for it have resulted in a conceptual grandeur that puts abstraction ahead of an engagement with the particular. This thesis makes no claim to 'solve' madness, in providing a definition that somehow elucidates without inflicting a form of violence. Rather, through interrogating how these representations have been made, with regards to particular forms of madness, I hope to elucidate certain ways of seeing madness, without laying claim to it. It is for this reason this thesis, rather than exploring madness as an abstract whole in each chapter, has focused upon four particular attributes or logics of madness, anticipating its multiplicities.

Intellectual Backgrounds to the Asylum, Hallucination, Suicide, and Mad Person's Testimony

In apprehending madness as containing multitudes, and isolating certain attributes and logics which it contains, I have the advantage of being able to draw upon a variety of intellectual traditions and areas, looking at their various literatures, and relating it to my wider concern with mad logics.

In asylum studies, the most significant work remains Goffman's *Asylums: Essays on the Social Situation of Mental Patients* (1961). This work, highly influential amongst the anti-psychiatric movement, Goffman suggests the asylum is an example of a total institution that attempts to exert a totalizing level of control over its inmates. This control even manifests into the performative, whereby certain behaviours and expressions are encouraged over others. Likewise, the historical studies of the asylum, and the social structures surrounding them, have provided a useful backdrop to my research. Roy Porter (1987 and 2002) and Andrew Scull (2007 and 2015) provide useful histories of the asylum in Britain and the development of modern psychiatry; in observing the factual errors of Foucault, and the particularities of Britain's relationship to madness, they have enriched my understanding of how the asylum functioned across this period. Elaine Showalter (1987) has profoundly influenced my thinking, in her analysis of how patriarchy has worked alongside and within the history of psychiatry. The use of their work has been informative, though, concerning myself with performative representations of the asylum post-de-institutionalization, these works form a background, rather than a field with which to be directly contended.

Interest in hallucination studies is a comparatively new field, comparatively undeveloped compared to the history of the asylum. Recent attempts at drafting from hallucination as simply symptom, into experience, has led to an attempt to draw out a phenomenology of hallucination. 'Hearing the Voice' at Durham University, a multi-disciplinary project covering neuroscientific, literary, and historical perspectives of hallucination, has provided various attempts to phenomenologically account for hearing voices and seeing visions. Angela Woods (2015) and Patricia Waugh (2015), both emerging from the 'Hearing the Voice' project, have worked to challenge the traditional models of hallucination as simply deception or obfuscation.

Again, my concern with the aesthetic, and with how we culturally imagine hallucination, has led to a limited engagement with voice-hearers themselves, but it has provided an important platform for my research.

Suicide has a long and varied background in its intellectual development. The development of suicidology has paralleled the developments of sociology writ large, the most famous work being Emile Durkheim's *Suicide* (2002). This has been followed by descriptivist and various other sociological accounts of suicide. Likewise, there is a strong tradition of existential and moral treatise on suicide, from David Hume's *Of Suicide* (1998) to Jean Amery's *On Suicide: A Disclosure on Voluntary Death* (1999). These works, both sociological and moral, have been fundamental in constructing my thesis, if only in observing their limitations.

Finally, as previously elaborated, there is a rich consideration towards the mad voice, most famously from figures such as Porter and Reaume. The influence of the testimony of psychiatric survivors, of the necessity to consider the persons under which madness is structured, hopefully permeates throughout the thesis. However, whilst the final chapter considers such testimonies from the point of view of performance, the calm ethical engagement of these two thinkers has remained a core influence.

Philosophical Articulations of Resistance

Throughout this thesis, I will be relying upon a variety of theoretical and philosophical material in order to expound upon and explore differing possibilities of resistance. My first chapter will in particular build upon the thought of Foucault. Rather than use the arguments elaborate in *Madness and Civilization*, however, I am more interested in the questions of resistance and his understandings of Power in his mid-to-later work. His collections of lectures (*Psychiatric Power* and *Abnormal*) in particular offer a critique of the simplifications of his first work on madness. I also extend beyond his direct writings on madness, particularly from his essay 'What Is the Enlightenment?' (1999). My second chapter will use space theory, drawing upon the thought and reconceptualizations of space presented by Henri Lefebvre and, to a lesser extent, David Harvey. I will be drawing upon Lefebvre's *Production of Space* (1991), *The Survival of Capitalism: Reproduction of the Relations of Production* (1976) and David Harvey's *Spaces of*

Global Capitalism (2005) and *Cosmopolitanism and the Geographies of Freedom* (2009). In the third chapter, I will use a variety of theorists to explore different possibilities and articulations of witnessing. This will involve an engagement with Felman and Dori Laub's seminal *Testimony: Crises of Witnessing in Literature, Psychoanalysis and History* (1992), Jean-François Lyotard's *The Differend* (1988), and the various writings on witnessing by Derrida (2000a and 2000b). The final chapter has emerged from a long engagement with the work and thought of Emmanuel Levinas, and his particular consideration of the ethical encounter. His core works in this regard are *Totality and Infinity* (1994) and *Otherwise Than Being* (1991). I will draw upon the commentary of Derrida (1999 and 2001), Simon Critchley (1999 and 2004) and Howard Caygill (2002) in order to hone Levinas's relationship to the political.

My use of these theorists will not simply be one of adoption, to argue that the performances are reflective or pallid images of the theories in question. Rather, these chapters will interrogate and analyze these theories from the perspective of madness in order to ask particular questions of the plays in question. In my questioning of Foucault's various understandings of resistance, I will claim it is only the practical critique which can offer an adequate model through which to critique the institution from within its own structures. Using Lefebvre's notions of space as an instigation of analysis, I will nevertheless trouble his triad of space, and suggest his mapping of madness as external to a Marxist core proves problematic. I will suggest existing concepts of witnessing have been conceived around the semiotic and the Shoah, that an alternative mode of thinking is necessary to imagine witnessing in a performative sense about suicide. The theories of Levinas, if offering a springboard for analysis, are unclear in their relationship to the political. Whilst this is a highly simplistic overlay of my interrogation, my main emphasis is that these theories have been treated as planes of interrogation, rather than doxa to be reified.

It should be added, throughout these theoretical discussions, this thesis will not be engaging with psychoanalysis, in any deep or significant manner. Outside of the lack of relevance in institutional logics, I am fundamentally concerned with the political construction of madness. Whether Freud or Lacan, psychoanalysis is fundamentally concerned with creating architectures of the mind. I, in contrast, am interested in the political-ideological construction

of madness, and its representation. If I am interested in psychoanalysis, it is merely to note two continuations with modern psychiatry. Firstly, that the emergence of the Oedipal can only occur with the psychoanalyst speaking upon mad experience, and silencing the mad person in favour of essentialist mythological constructs. Secondly, that this silencing overwhelmingly occurs in a deeply misogynist fashion: in Freud's case, the silencing of highly vulnerable women who were reporting experience of sexual abuse as children. I am, naturally, aware of the various intellectual lineages, and the influence of psychoanalytical thought on some of the thinkers I use. Likewise, I may use or interrogate a psychoanalytical thinker (such as Darian Leader), for the value of their thoughts despite their psychoanalytical moorings. In general, however, I see psychoanalysis as forming the same doctor-patient dialectic as psychiatry; I am fundamentally sceptical that shoots of resistance can rise from such barren ground.

Theatre and Performance Studies and Literary Representations of Madness

Outside of existing work directly responding to the political and theoretical structuration of madness, this thesis is primarily engaged in aesthetics of performance and the politics of representation. My use of theatre and performance studies has varied and spanned over wide thematic and dramaturgical arenas; the sprawling nature of madness, its intersections with a variety of genres and fields, require an adroit and pliable intellectual strategy. Broad strands to my own research have been the political potential of realism, ethical studies of theatre, and the study of autobiographical performance. Interrogations of realism, its political backdrop, its reactionary and radical potential, has assisted me in ascertaining the ability of realist plays to form institutional critiques. Elin Diamond's *Unmaking Mimesis: Essays on Feminism and Theatre* (1997) has assisted thinking through the implications of realism, as has Stephen Lacey's *British Realist Theatre: A New Wave in its Context 1956-1965* (2002). Likewise, in terms of autobiographical performance, Deirdre Heddon (2008) and Jenn Stephenson (2013) both represent core figures in this field. Beyond these broad areas, my work is littered with engagement according to different structures and concerns of each play. My analysis of *nut* (2013) required an engagement with studies of Black British Theatre, in particular the work of Lynette Goddard (2007 and 2015). Looking at *The Skriker* (1999b), I had to engage in a degree

of environmental theatre criticism, by those such as Candice Amich (2007). These engagements have had to be decided upon a play-by-play basis.

If I have consulted performance studies not engaged in studies of madness, I have also considered the long tradition of looking at madness within literary studies. Perhaps the most famous example of this Sandra Gilbert and Susan Gubar's *The Madwoman in the Attic: The Woman Writer and Nineteenth-Century Literary Imagination* (2000), the famous consideration of feminism and madness. Other core thinkers include: Felman (1975 and 2003), Alan Thither (2004), Sarah Wood Anderson (2012), and Marta Caminero-Santangelo (1998). If this thesis does not draw upon this thought to a large extent, it is because it is primarily invested in thinking through the performative mode. Whilst having a great respect for the literary tradition of mad studies, this thesis operates on the assumption that performance studies fundamentally requires a different set of conceptual tools to that of the literary. In doing so, I am not situating myself in the long tradition of looking at madness through literary studies, but firmly placing myself within theatre and performance studies. It must be noted, however, that studies of Early Modern drama have more consciously interrogated the performativity of madness. Concerns with the burgeoning asylum, or somehow applying a test for madness, are represented by a variety of Early Modern dramatists, including Thomas Middleton's *The Changeling* and John Webster's *Duchess of Malfi*. Questions of the asylum were often preoccupied with the question of charity as contrasted with the (often commercially dispensed) theatrical spectacle of the mad, as in John Fletcher's *The Pilgrim* or Thomas Dekker and Middleton's *The Honest Whore, Part I*. Carol Thomas Neely (2004) uses these plays to problematize Foucauldian understandings of the period, both through a challenge to the thesis of the 'Great Confinement' and a critique of his inattention to gender as a complicating force. Ken Jackson (2005) has provided an interesting examination of Bethlem as revealing the complexities of charity and madness during this period. Bridget Escolme (2013) has used the concept of emotional excess to further illuminate this period and its conception of madness. Whilst not directly linked to my own concerns with modern psychiatry, the residual permeations of Early Modern conceptions of madness remain resilient.

Theatrical Interpretation of Madness

My own research is set as an analysis of representations of madness from the perspective of performance studies. In terms of specifically performance, there has been a surprising dearth of consideration of madness. It is partly this gap in sustained academic examination that has led me to this thesis. However, this is not to say there is no existing literature whatsoever.

Therefore, I will briefly outline the current existing literature, the extent to which it will be used in this thesis, and how my own research is situated alongside previous work, whilst building upon their work.

Derek Russell Davis forms one means of theatrical engagement with madness, through fundamentally a psychiatric gaze, in *Scenes of Madness: Psychiatrist at the Theatre* (1995).

Continuing this, Femi Oyebole's *Madness at the Theatre* (2012), provides a consideration of various canon pieces from a primarily literary and psychiatric perspective. Their position as psychiatrists dominate interpretation; they interpret through psychiatry, seeing theatre as a reflection of the psychiatric, rather than disturbing conceptual precepts through an

engagement with the theatrical. Rather than a political examination of the ideological constructions of madness, these works situate theatre as a reflection of the psychiatric.

Likewise, despite situating themselves within theatre studies, their analysis is frequently focused upon text-based analysis. For these reasons, their work will feature little in my thesis.

Christina Wald's *Hysteria, Trauma and Melancholia: Performative Maladies in Contemporary Anglophone Theatre* (2007) provides one of the few examples of a sustained engagement with performance with attentiveness to theory. Wald, drawing upon the theory of Judith Butler, claims that certain mental health difficulties are understood primarily as and through performance; they are inherently performative maladies. She then suggests that Hysteria, Trauma and Melancholia form their own 'theatres', into which various plays can be categorized. Wald's concerns fundamentally diverge from my own in several senses. Firstly, the fundamentally psychoanalytical terminology she is drawing upon, secondly, the attempt to form genres and categories rather than modes, and thirdly, the notion that there is an inherent

radicalism in framing madness in purely performative terms. These differences, combined with my own concern with representation, mean that Wald's work will feature in my thesis.

Images of Mental Illness Through Text and Performance (2005), a collection of essays by Sarah J. Rudolph and Ellen W. Kaplan, represents one of the few direct engagements with madness in theatre and performance, across a book-length form. It covers a variety of representations of madness, from Tennessee Williams to David Auburn. This study reflects an interest in writers across the Western tradition, with a very broad temporal and geographical remit. The essays are less concerned with a concrete articulation of resistance, than a historical overview. Nevertheless, its thoughts about the possibilities of theatrical representation have remained influential.

The work of Anna Harpin has provided continual stimulus for my own work⁴. Harpin has a long preoccupation with madness, and its politics. Yet, much of her published work has revolved around trauma and abuse, rather than madness per se. I look forward to Harpin's forthcoming monograph, detailing representations of madness in film, performance and literature since 1970; however, the breadth of her concerns contrasts with my strict concern with the theatrical and the performative. Harpin's most relevant work with mad studies in performance is a project called *Isolated Acts*, co-ordinated with Juliet Foster, looking at theatre in the asylum. This project eventually led to the publication of *Performance, Madness and Psychiatry: Isolated Acts* (2014), a collection of essays dealing with questions of mental health and performance, from perspectives of both academics and practitioners. Many of these essays have different concerns to this thesis (the performance history within asylums, the use of Ophelia in performance history), however they have helped broaden my consideration of the relationship between performance and madness. The most relevant essay to my own work is Harpin's own: 'Dislocated: Metaphors of Madness in Contemporary Theatre'. This essay has, particularly across the first two chapters, been a highly productive and useful work with which to compare and contrast my own ideas.

⁴ Harpin acted as my supervisor for the first year of this thesis.

I should acknowledge that several of the plays considered in this work have a long critical tradition, with extensive literature written on them. In as much as performance analysis has engaged with mad studies, it has often been through analysis of particular plays or playwrights. Elaine Aston (1995) has analyzed how the work of Sarah Daniels sits structures of madness and patriarchy alongside one another, Rachel Clements (2013) has adroitly observed the 'mad' politics of *Blue/Orange* in using realism as tool to interrogate the institution, whilst academia surrounding Sarah Kane's *4.48 Psychosis* (2001) has welcomed a flurry of interpretation with regards to madness, from Alicia Tyner (2008) to Graham Saunders (2002). These works provide a crucial backdrop to my own research, but are more engaged in relating madness to studies of the playwright or play in question, rather than trying to draw larger conclusions about the place of madness and resistance in these various representations.

Building upon this work, this thesis will provide its own original contribution. Whilst some work has begun to expound upon the representation of madness in contemporary theatre, there has been a lack of conceptual engagement with what constitutes resistance. The little work existing that concerns mad studies has tended to focus on representation through the gaze of psychiatry, historical analysis, or the attempt to categorize and creates genres. I hope this thesis engages with and provides new alternatives in conceptualizing resistance to madness, and how theatre can offer resistance, and how this relates to the politics of representation.

Consideration of Methodology and Selection

Maria M. Delgado, in *'Other' Spanish Theatres: Erasure and Inscription on the Twentieth-Century Spanish Stage*, clarifies that her work, 'does not set out to offer a historical coverage of the period' (Delgado 2003: 6); if the work concentrates upon 'beginning from the peripheries' (Delgado 2003: 275) then this does not suggest other works and figures 'have not similarly influenced the theatrical landscape in which they have worked' (Delgado 2003: 275). Whilst this is framed within the context of Spanish theatre, in a similar spirit, this thesis will not be attempting to perform a historical overview of madness and theatre across British and Irish theatre of the past 25 years. I do not pretend the plays I have selected have had exclusive impact upon the wider representation of madness, or offered modes of resistance. Rather, I

have selected works I have found particularly pertinent and illuminating to understanding resistance against structures of madness. This thesis has not been drawn on the basis of historical overview, but rather based upon theoretical perspectives. Thus, the thesis has been divided and conceived upon conceptual lines: the modes of resistance themselves.

My selection of plays has been picked from British and Irish theatre in the past 25 years. The concepts of this thesis are, necessarily, entangled with this period and area. However, I have not been led by historical periodisation, say since the *Mental Health Act 1983* or the *Irish Mental Health Act 2000*. This has given me a period and area broad enough to consider a multitude of perspectives, but specific enough to not overly conflate cultural modes. The distribution puts a greater focus upon plays performed more recently. The stretch of time relates to the chapter concerned; if the first chapter benefits from including plays premiered across a longer stretch of time (for purposes of comparison), the final chapter responds to the recent rise of autobiographical performance concerning mental health.

The plays vary, from work developed in well-established institutions, to more fringe work performed by performance artists in small or non-traditional venues. The concentration alters according to chapter and applicability; the first chapter, of realist plays engaging with institutions of the contemporary asylums, emerge from our own major theatrical institutions of the Royal Court and the National Theatre, the final chapter concerns comparatively lesser known performance work. Likewise, some of the plays have extensive academic literature written upon them (*Blue/Orange*, *The Skriker*, *4.48 Psychosis*) whilst others are comparatively unexplored. If I hope to, in certain cases, draw attention to comparatively neglected work, I also hope to fully expound potential radicalism in more famous work that has been ignored.

In order to contain and adequately survey different possibilities and modes of theatrical resistance, each chapter respectively looks at a different form of resistance. The first chapter looks at the possibility of theatre forming a practical critique of madness, and what this constitutes in theatrical terms. The second examines how we can anticipate different spatial logics of madness through theatre. In the third chapter, I regard what it means to witness madness through theatre. Finally, in the fourth, I consider how performance can re-establish

the ethical encounter with the mad person. Across these different configurations, we see a variety of considerations of resistance across political and ethical axes. This is, to be clear, in no way claiming to be an exhaustive account of resistance, nor that there are no intersections between these different possibilities.

The difficulty in discussing madness is its breadth; madness contains multiplicities, multiple logics and institutions. In this spirit, the thesis incorporates the complexities of madness by looking at specific features and attributes in each chapter: the contemporary asylum, hallucination, suicide, and the testimony of the mad person. As with the selection of modes of resistance, I am in no way suggesting that these form some 'complete whole' of madness, or that these are the only attributes of madness I could look at. They are not categories of madness, but rather facets of its construction. Moreover, I am not making any claim that these form any sort of 'genre,' that their selection or division is an inherent categorization core to aesthetic representation of madness or madness itself. Rather, they are a selection, on a heuristic basis, of some of the interlocking logics which form the structuration of madness.

By this pairing, I have situated each mode of resistance next to a specific attribute of madness. I examine what it means, in theatrical terms, to perform a practical critique of the contemporary asylum, to invent new spatial logics of hallucination, to witness suicide, and to re-establish the ethical encounter with the mad person. In doing so, I hope to add a specificity to the discussion of madness, avoiding generalized notions of madness, noting the complexity of its social construction, lending a thickness to an analysis and consideration of representation and resistance. This is not however, to suggest that each particular mode can only be applied to the attribute of madness in question. One can conceive of new spatialities of the asylum. One can perform a practical critique of suicide. Rather, I have used specific modes of resistance that I think best engage and reveal way of re-imagining particular attributes of madness, and in parallel, have picked attributes of madness that I hope most reveal the efficacy and possibility of the mode of resistance in question.

This selection, the process of connecting mode, to attribute, to selection of plays, has been thoroughly unsystematic, variable to each chapter, contingent to each chapter's intellectual

evolution. There has been no primacy given to mode, attribute, or selection of plays. In the second chapter, I discovered spatial theory as a way to think about the existing restrictions, and potential new directions, of hallucinatory logics. In the case of the third chapter, having looked at a series of plays that variously played upon witnessing, I realized they were concerned with suicide. In the fourth chapter, my concern with Levinas and ethics directed me towards autobiographical performance. It is my hope that these varying approaches have allowed for a more productive and reflexive thesis than the unadaptable application of various theoretical schemata.

This thesis is about looking at how theatre can act as a site of 'resistance' through its representations. I am less concerned with the banal thematic or categorical claim, as a play 'about madness', than if the play in question, in touching upon and representing madness, offers a radical or resistant account of its articulation. If this question ripples throughout the thesis, it is one with which I have continually had to engage. To what extent is *The Skriker* a play that is concerned with hallucination, and to what extent does it evade such simplistic associations? Bush Moukarzel and Mark O Halloran's *Lippy* (2014) is a play that does not mention modern psychiatric services whatsoever, to what extent can their representations be taken to be radical? These various justifications have had to be made alongside analysis, embedded in the critique itself, rather than justified prior to their consideration.

The first chapter relates to the structures of the contemporary asylum, the realist representations of the institutions, and an interrogation of what Michel Foucault's concept of the practical critique means in a context of realist theatre and for its representations of a decentralized series of power networks. There is a wide arena of plays dealing with this in a historical sense, particularly concerning hysteria (Anna Furse's *Augustine: Big Hysteria*, Terry Johnson's *Hysteria*), however I wanted to examine plays that reflected upon the legislative, institutional and cultural structures of the asylum contemporaneous to the original production of the play. In order to examine a variety of contexts, this chapter represents the largest breadth of time period, with plays from 1992, 2000 and 2013 (Sarah Daniels's *Head-Rot Holiday*, Joe Penhall's *Blue/Orange*, and Lucy Prebble's *The Effect*). However, the plays selected not only demonstrate a variety of different context and institutional structures of madness, the

plays are nearly entirely set within psychiatric institutions; the gaze is perennially upon and within the institution itself.

In order to consider representations of hallucination in my second chapter, and the de-politicising cultural tropes, I questioned how theatre could trouble the traditional spatial logics of madness and hallucination. I was less interested in plays that more strongly adopt the inside-outside dialectics of hallucination, such as Alan Ayckbourn's *Woman in Mind* or Anthony Neilson's *The Wonderful World of Dissocia*, than plays that problematize this easy substitution and re-invigorate a political understanding of madness. All three plays, Ridiculusmus's *The Eradication of Schizophrenia in Western Lapland*, Caryl Churchill's *The Skriker*, and debbie tucker green's *nut*, all play with space (in its various understandings) and with genre; in doing so, they fertilise their conceptions of hallucination with the political.

For my third chapter, I wanted to look at suicide, and what it means to witness, in a theatrical context, when looking at the suicidal act. Suicide is a common feature in much drama, often represented in the plot in connection to mental health; plays such as Daniels' *Ripen Her Darkness* and Penhall's *Some Voices* both demonstrate suicide as the possible outcome of mistreatment. However, beyond simply looking at plays representing suicide, or using suicide as a regrettable outcome of madness, I needed to look at play that interrogated and questioned our response and interpretation of suicide. For this, I chose the plays Sarah Kane's *4.48 Psychosis*, David Grieg's *Fragile* and Dead Centre's *Lippy*, all of which complicate responses to suicide beyond.

In my fourth chapter, following what it meant for theatre to re-establish an ethical encounter, I was drawn to the recent rise of autobiographical performance concerning madness. Whilst work by artists such as Bobby Baker have preceded this recent rise, and Kim Noble's *Kim Noble Must Die* remains influential, I focused upon the past five years, and given the nature of the argument, focus upon plays I had seen (ideally live, in one case recorded). In this spirit, I chose James Leadbitter's *Mental* in 2014, Dylan Tighe's *RECORD*, and Bryony Kimming's and Tim Grayburn's *Fake It 'Til You Make It* in 2015. I also use Byron Vincent's *Talk About Something You Like* to compliment my analysis of *Mental*.

This decision to include a selection of Irish plays (*Lippy* and *RECORD*) alongside British theatre has been a difficult one. It emerged organically, from noting certain thematic and aesthetic similarities. Certainly, Irish and British contexts provide different social circumstances, a different background. However, as I worked across the various examples, I realized the limitations of an analysis entirely forged around a single nation-state. Firstly, the argument of this thesis, far from a cultural materialist analysis of a particular state, is a conceptual exploration of how theatre and performance provides us with alternative modes of conceiving madness. Whilst acknowledging the variance of different countries and genealogies, to simply isolate is to ignore the potent pollination of core figures and concepts of madness. Goffman's sociology, Foucauldian thought and Laingian practice were highly influential to the work of Basaglia and the anti-psychiatric forces in Italy. Following from this, the Basaglia Law eventually became a core influence to the deinstitutionalization reforms across the 1980s in the United States and Britain. Likewise, Irish and British Law with regards to mental health have marked connections; there are evident parallels between the *Mental Health Act 1983* of the United Kingdom and the *Health (Mental Services) Act 1981* of the Republic of Ireland, both responding to the wave of deinstitutionalization. Beyond madness, to simply rely upon a billiard ball apprehension of nation-states and their cultures is to deny the important cross-fertilization of theatre and practitioners. Both Ben Kidd and Bush Moukarzel, the founders of Dead Centre, were raised and trained in Britain. Dylan Tighe, the creator of *RECORD*, has acted in their work, and tours his own music globally. They will have influenced, and be influenced by, British practitioners. The delineations of aesthetic culture, particularly between these two countries, are far from neat.

This is not to erase the importance of difference. This thesis is one which works alongside and anticipates difference. Situating these plays in an Irish context is crucial to understanding the operations and functions of each play. Notably, each play revolves around silence, about putting words into the mouths of others. In the context of Ireland, the centuries of colonial rule coupled with the attempted eradication of Gaelic, such imagery with voice and silence takes on a particular significance. Certainly, the context of Ireland will alter structures of madness. However, so will questions of race, of gender, of disability. This thesis takes intersectionality as

a serious concern, but does not prioritize the nation-state as an unassailable division. Rather, I hope that by attending to difference within the analysis, this thesis will highlight the difference and heterogeneity of madness.

I am aware that this is not an exhaustive list of plays which I could have selected. Other work engaged in madness in British and Irish theatre in the past 25 years includes Martin McDonagh's *The Beauty Queen of Leenane* (1996), *The Lonesome West* (1997) and *The Lieutenant of Inishmore* (2001); Bryony Lavery's *Frozen* (2004); Chole Moss's *This Wide Night* (2009); Simon Stephen's *Motortown* (2009), *Punk Rock* (2011) and *Three Kingdoms* (2012); Dennis Kelly's *Taking Care of Baby* (2007); Nick Payne's *Incognito* (2014); Tom Stoppard's *The Hard Problem* (2015); Martin Crimp's *Attempts on Her Life* (2007); Enda Walsh's *The New Electric Ballroom* (2008) and *The Walworth Farce* (2007). Of the playwrights I have chosen, numerous other plays could have been chosen, including: Sarah Daniels's *Ripen Her Darkness* (1991), *Beside Herself* (1994a) and *The Madness of Esme and Shaz* (1994c); Joe Penhall's *Some Voices* (1998); Caryl Churchill's *A Mouthful of Birds* (1998a). Sarah Kane's work has provided a sustained engagement with questions of madness. These plays have not been selected simply because other plays were more pertinent to my research.

I have attempted to pair textual critique and performative analysis across this thesis, to varying degrees according to the circumstances in which I have encountered the plays. I have neither seen professional performances nor watched recordings of *Head-Rot Holiday* (1994b), *4.48 Psychosis* and *Fragile* (2011). I have based my analysis of *Blue/Orange*, *The Effect* (2012), *nut* and *RECORD* upon recordings of productions. My live experience has acted as platform of analysis for *The Eradication of Schizophrenia in Western Lapland*, *The Skriker*, *Lippy*, *Mental* and *Fake It 'Til You Make It*. Across this thesis, I have engaged in a close reading, with a conceptual framework in mind, to explore the mechanisms by which these plays radically represent madness and forge resistances.

The plays examined are in no-way perfect objects of resistance, and this thesis is not interested in naively claiming or arguing for their conceptual or political perfection. In any case, I am suspicious of the notion of 'perfect' resistance. Rather, I suggest that in the interrogation of

them, from particular conceptual viewpoints, we see certain radical ways of conceiving and representing madness. It is in this sense that this thesis is fundamentally optimistic, not from a naïve assumption of theatre's untainted radicalism. Emerging from this, I hope the following chapters demonstrate and explore new manners in which theatre can imagine the representation of madness, triangulating this against the political structuration of madness and the lived experience of mad persons, and how these representations offer possibilities of what it means to resist.

CHAPTER ONE:

PSYCHIATRIC POWER, REALISM, AND REPRESENTATION OF THE CONTEMPORARY ASYLUM

The Asylum, The Madhouse, The Sanatorium: these terms all surround the concomitant fear and mockery that engulf the asylum, madness and our treatment of the mad. The asylum stands as a theatrical object and site; the practice of exhibiting the mad at Bethlem seeps into our dramatic imagination. Carol Rosen perceives a connection between the displays at the madhouses and drama's conventional use of madness, that it, 'has traditionally emphasized the sensational aspects of the mental asylums and exploited madness for its shock value onstage' (Rosen 1983: 85). Anna Harpin (2012) suggests even contemporary horror's use of the asylum represents both an anxiety about our historical treatment of the mad, and an attempt to partition it off to a disconnected past. We are drawn to the asylum as spectacle, even as we attempt to avoid its political implications. As Rosen remarks, 'We do not want to enter the madhouse; we merely want to see it' (Rosen 1983: 85)

The asylum has changed and the spectacle adjusted. The nineteenth century marks 'the emergence of a self-conscious and organized group of professionals laying claim to jurisdiction over mental disturbance, and obtaining a measure of social warrant for their claims' (Scull 2015: 1066). Following the birth of modern psychiatry, the gaze of the sane alters. It is no longer a viewing gallery, an opportunity of exoticisation or eroticisation, a carnival of Goya's grotesques. The gaze has become clinical, a mode of continual classification and observation. No longer simply the physical containment (and subsequent display) of mad bodies, psychiatric power now seeks to measure madness itself. The theatrical spectatorship of the mad has remained, but sensationalist voyeurism has transmogrified into a diagnostic gaze.

The singular asylum of the Enlightenment has dissolved, replaced by psychiatric wards, adjudicated by judicial hearings, domesticated into the medication taken at home. The contemporary asylum is not a single building, but dispersed across a series of institutions (sometimes allied, sometimes conflicting). Whatever the complexities, its various comprising

institutions all seek to measure mad experience, and to calcify it into the definable. Doubt is supplanted by scientific certainty, sanity reified by insanity, a clear, singular social reality consolidated by the rejection of the more heterogeneous, diffuse realities of mad experience.

The plays of this chapter all seek to wrestle with the contemporary asylum, and the psychiatric power embedded in its constituting institutions. However, rather than attempt to scrutinize from 'outside' the asylum (representing alternative treatments, possibilities, realities), they interrogate the asylum from within. There is not a single setting in *Head-Rot Holiday* (1994b), *Blue/Orange* (2000) or *The Effect* (2012) that is not of a medical establishment: whether psychiatric ward, testing facility, abandoned asylum, or hospital bed. These are plays for which the asylum is the persistent object of their attention.

This extends to their dramaturgy; all the plays adopt a primarily realist mode. The occasions when representation exceeds a singular, uncontested 'real' are few and sporadic. When they do occur (the visitation of the Angel in *Head-Rot Holiday*, Tristan's unstable conception of time in *The Effect*) they are presented as manifestations of the character's instability, rather than a challenge to the realist framework itself. In adopting realism as mimetic apparatus, these plays are, seemingly, participating in the notion of a singular 'true' real that the contemporary asylum seeks to manufacture.

Discussion of realism as politically conservative, as failing to interrogate its ideological underpinnings, is hardly limited to studies of madness. It is a genre that is marked by, in the terms of Raymond Williams, 'an injection of new content into an orthodox dramatic form' (Williams 1977: 68). Following Williams, Stephen Lacey (2002) distinguishes between this understanding of realism as this 'particular attitude towards what is called reality' (Williams 1977: 61) against realism as a 'method' that is preoccupied with mimesis as a mode of representation. However, this elides the connections between the artistic 'genre' and 'method'. The project of realism is involved in an attempt to extend the terms of a singular (if historically mutable) reality; reality is taken as singular, the challenge being to articulate experiences within that social reality that have been neglected. The 'realism' as political genre is rooted in 'realism' as project of verisimilitude; if reality is untroubled, then political radicalism is a matter of un-

problematically representing ignored cultural identities from within that social reality. Rather than question or destabilize the precepts behind our reality, 'realist representations tend to leave unchallenged the vision of reality cherished by recipients and producers alike' (Hauthal 2013:146). This is not merely passive but generative, 'realism is more than an interpretation of reality passing as reality; it produces 'reality' by positioning its spectator to recognize and verify its truths' (Diamond 1997: 4).

The structures of realism and modern psychiatry are both historically and ideologically intertwined. The rise of realism coincides with the ascent of modern psychiatry; early realism continually returns to the most emblematic of late nineteenth-century psychiatry: the hysteric. Contemporary critic Elin Diamond suggests that, 'Ibsenite realism guarantees its legitimacy by endowing the fallen woman of popular melodrama with the symptoms and etiology of the hysteric' (Diamond 1997: 4). Realism substantiates itself through an adoption of the diagnostic gaze. Anna Harpin suggests, 'a realist framework readily invites a diagnostic gaze in so far as it replicates normal and abnormal behaviour' (Harpin 2014: 189). The untroubled 'reality' which realism engages within has no space for the mad person, it tends to 'remainder the contents of "mad" experience in some ways outside the dramatic frame' (Harpin 2014: 189). As a result, madness becomes external spectacle for the internal and sane logic of the play. It remains only in traces, as inscrutable objects, such as the terrors of Blanche du Bois.

The temptation is to denounce realism as a project, to suggest that realist plays perpetuate the diagnostic gaze, remainder mad experience in the pursuit of the spectacle. However, I suggest that (whilst acknowledging the realist mode participates in a form of structural violence) it is precisely this adoption of realism (an aesthetic perpetuating the ideology of psychiatric power) that allows certain plays to examine the contemporary asylum upon its own terms, scrutinising from within, from the inside-out, adopting a self-reflexive position. The adherence to realism can be strategic, as Rachel Clements suggests of *Blue/Orange*, in that it 'commits very deliberately to a rather traditional use of structure and setting as part of its interest and the exploration of liberalism, and as a way of effecting a shift from clear idealism to confused realism' (Clements 2013: xxxi). This is not to universalize, to claim all works of realism are engaged in surreptitiously radical politics; many, if not most, realist works regurgitate the

hegemonic. But, rather, the adoption of realism can, in certain cases, be a strategic route towards critique.

It is possible for realism to shift from mimetic re-production to an embedded resistant gesture, from exercising the diagnostic gaze into an examination (and thereby resistance) of the gaze itself. In this way, performance can provide a space of reflexivity that critiques what it simultaneously perpetuates. However, this requires a more sustained conception of what the contemporary asylum constitutes, what the nature of its power is, and to what extent we can account for resistance (and the manner of resistance) emerging from within its production of power, sundered from mad experience.

Between Fatalism and Essentialism: Foucault and The Practical Critique

The difficulties of the representation of the contemporary asylum, and how to account for it, emerge from a tendency towards fatalism. Erving Goffman (1961) argues that the asylum offers a complete and totalising control of the mad body, that this control even indoctrinates the mad person into certain behavioural and sociological gestures and performances. The asylum is presented as a pervasive, complete institution that is totalizing in its control of the mad person. Yet how can resistance take place in such an institution? As Michel Foucault notes in *Abnormal*, to merely state that something is grotesque, to abhor its abhorrence, does not constitute resistance; indeed, many structures thrive upon, and justify themselves, precisely through their evidently invidious discourse. There are power structures that, 'find their source, in a place that is manifestly, explicitly, and readily discredited as odious, despicable or ridiculous' (Foucault 2003b: 12). Such modes of the asylum recall Jacques Rancière's notion of the 'melancholic left', whereby the critic moralizes whilst simultaneously claiming all resistance plays into prevailing powers, feeding upon 'the dual denunciation of the power of the beast and the illusions of those who serve it when they think they are fighting it' (Rancière 2009: 35-36).

However, the portrayal of the 'mad person' as an autonomous agent is similarly problematic. To suggest that the mad person is in no way structured, or altered, by the institutions and power structures to which they are exposed, lends itself to a regressive essentialism, that can ignore the reality of how the asylum attempts to structure and form the mad person. This

naïve form of liberalism can result in an inattentance to the particularities of psychiatric power and victim-blaming.

We are faced with a dilemma between undesirable outcomes, of pessimistic structuralism and substanceless liberalism. This bifurcation sits alongside Foucault's own difficulties for simultaneously attempting to acknowledge the power structure of the asylum (that it not only contains mad bodies, but seeks to define them) whilst accounting for the possibility of resistance. Foucault's work in *Madness and Civilization* (in a similar vein to realist plays exploring the contemporary asylum) has been criticized by the critics such as Roy Porter for ignoring the presence and testimony of the mad person. Yet despite this, Foucault's thought on madness, its political structuration and varying manifestations throughout historical periods - from the confinement of the mad through the enlightened to the inscription upon the mad in the modern era - is rightly regarded as crucial for any political or structural apprehension of madness.

Yet, Foucault's thoughts on madness should not be limited to this early work. In 2003 the publication of *Psychiatric Power* and *Abnormal*, a series of lectures he gave at the Collège de France, revealed further subtleties of his thought on madness, as he critiques *Madness and Civilization* (1988) as indulging in various methodological 'rusty locks'. Foucault displays his adaptability of thought, linking the treatment of George III of Great Britain to the emergence of disciplinary power that he would proceed to investigate in *Discipline and Punish* (1999), and claiming the sexual confession of hysteria offers a path of resistance, echoing his later arguments in the *History of Sexuality* (1978). Far from merely an early topic of interest, Foucault's engagement with madness snakes throughout his career.

The most important contribution of Foucault in his later work to the conception of madness is the new notion of psychiatric power. This idea presents power not as singular or monolithic, but rather as multi-faceted and pluralistic. Foucault refers throughout *Psychiatric Power* to the 'capillaries of Power,' the notion of power not as a straight line, but as branching out, occurring at several places. Power is even contradictory, it is not apprehended by a single line of argument, but rather principles and modes that underlie even seemingly contradictory

positions. It is this conception of power, and the contemporary asylum, that offers an alternative to the twinned simplifications of structural functionalism and liberal essentialism. It is a particular mode of pluralism, which notes how power is multi-faceted and cannot be simply understood by a singular or totalizing position. However, this offers a new problem: in this pluralistic understanding of psychiatric power, how can resistance occur?

As Gilles Deleuze famously and paradoxically claims in *Foucault*, 'Resistance comes first' (Deleuze 1988: 89). Foucault struggled with the problem of resistance throughout his work, and far from failing to account for it, the difficulty is navigating through his various solutions. Slavoj Žižek, in *The Ticklish Subject* (2009), succeeds in establishing two core modes of resistance in Foucault's work. Firstly, in *Madness and Civilization*, there is the exhortation for the mad to speak for themselves, a suggestion madness had a 'voice' prior to its silencing by modern psychiatry. This is closely connected to his understanding of pleasure and the body as a mode of resistance in the *History of Sexuality*. However, this recourse to an unveiled, essential mad voice is unconvincing if we follow Foucauldian notions of structured identity⁵. The second model of resistance Žižek identifies involves resistance concomitant with the power it opposes; it emerges out of, automatically, power. Power is visible precisely because resistance accompanies it. Yet, Foucault's second notion of resistance also fails to provide a mode that escape the notion of power that Foucault has described. We resist within power, and are incapable of reaching outside it.

However, I wish to suggest that Žižek ignores a third notion of resistance running throughout Foucault's work, the notion that the 'critique' itself can shift from observation into resistance, the notion of the practical critique. Foucault articulates this possibility in his late essay *What is the Enlightenment?*, seeking to, 'transform the critique conducted in the form of necessary limitation into a practical critique that takes the form of a possible transgression.' (Foucault 1991: 45) This critique does not reify universal structures, but rather seeks to interrogate and critique them. It raises contingencies and seeks change, not by suggesting an alternative ideal,

⁵ Moreover, in his attempt to herald hysteria as a mode of resistance, he fails to acknowledge how sexual history (particularly that of women, and often of abuse) has been manipulated and adapted, for both psychiatry and psychoanalysis, and that this violence upon female sexual narrative has formed a founding 'myth' for both disciplines.

but rather by raising and highlighting the arbitrations of power: 'it will separate out, from the contingency that has made us what we are, the possibility of no longer being, doing, or thinking what we are, do, or think' (Foucault 1991: 46). It rejects utopic politics, noting 'the claim to escape from the system of contemporary reality so as to produce the overall programs of another society ... has led only to the return of the most dangerous traditions.' (Foucault 1991: 46). It is attempting to forge a dispersed, multifaceted response to dispersed, multifaceted power structures.

This is not to suggest a complete adoption of Foucauldian thought. Foucault had, throughout his career, attempted to render theory a tool of resistance, the object as well as the subject of his work. In his early work, *Madness and Civilization*, Foucault expresses the desire to form a critique, not about madness, but through madness, hearing the voice of madness. Shoshana Felman describes the aim of Foucault as the, 'philosophical search for a new status of discourse ... which would obliterate the line of demarcation and the opposition between Subject and Object, Inside and Outside, Reason and Madness' (Felman 1975: 214). Yet, the reason and theory of philosophy is inherently a monolithic one; philosophy can anticipate multiplicities, but cannot account or represent them without recourse to an organizational structure, to a new monolith. Jacques Derrida would follow this criticism, using Foucault's definition of madness as 'the absence of a work' against him: 'is not an archaeology, even of silence, a logic, that is, an organized language, a project, an order, a sentence, a syntax, a work' (Derrida 2001: 41).

Rather, I suggest that Foucault succeeds in expounding and shaping out the limitations of philosophy. His work explores the necessity of pluralism, alongside the impossibility of theory to express it. In this, Foucault is mapping out the space in which philosophy is incapable of acting. I would suggest, that it is in this space that performance can offer an alternative mode of apprehension, representation and resistance. Most significantly, as Foucault is articulating a mode of resistance that emerges from the inside-out, that does not attempt to forge an external or utopic image, it provides us with a means of conceiving how realism can participate in resistance against psychiatric power.

The Roadmap to Resistance and Pluralism

What constitutes and makes possible this 'practical critique' in theatrical terms? Part of the difficulty in explaining how resistance can occur in realist drama concerns our expectations. Performance is expected to provide a 'roadmap to resistance'; the act of performance being resistant is concomitant with an explanation or guide of how to resist. However, if the power structures of the contemporary asylum are pluralistic, then the mode of resistance must be likewise divergent and anticipate multiplicities. Rather than a 'roadmap', resistance must be more anxious, fragmentary.

Foucault envisioned the practical critique as primarily genealogical, as a historical project exposing naturalized concepts as socio-historical constructs. Relating the present in historical terms can potentially form a radical critique: firstly, by exposing connections between current practice and previous faulty assumptions (for instance, similarities between Victorian attitudes to phrenology and our own reification of neuroscience) and secondly, by defying a teleological narrative (namely, that the study of madness has been one of continuous progression and increasing humanism). As Harpin (2012) has suggested, drama that interrogates the past is engaged in the interstices between past, present and future; to engage with the historical, to enquire of the past, is to establish new meanings, and contains an embedded radical sentiment: that things could be different from how they are.

The plays of this chapter are, in contrast, directly engaged with contemporary developments; they have been selected, in part, to demonstrate the historical breadth. *Head-Rot Holiday* was developed by Sarah Daniels after extensive research on 'special hospitals' and the contemporary culture of sectioning following the *Mental Health Act 1983*. *Blue/Orange* was a response to conflicting impulses between the *Mental Health Act 1983* and the *Care in Community Act 1991*. *The Effect* is in dialogue with recent developments of neuroscience and the vast increase in the use of medication as treatment. These are plays engaged with and within emergent, contemporary debates, they cannot rely upon the juxtaposition of past and present to reveal contingencies in presumed naturalized truths; rather, they have to expose contingencies from within the ideology they critique. I suggest that this self-reflexive gaze is

achieved by various means: the representation of pluralistic psychiatric power and the contradictions that emerge from inconsistencies, the setting and situating of the palpable mad body as the object of these competing semiotic structures, and offering the possibility of navigating through pluralism by means of a form of non-universalist politics.

Theatre, by its dialogic nature, can expose different voices and ideologies, in contradiction and discussion, without adjudicating between them. It is this equivocality that capacitates theatre's ability to stage a pluralistic notion of Power. Likewise, from shifting from one ideology to the other, theatre can demonstrate the contradictions, lacks, and flaws of the contemporary asylum. Through a continual wavering between ideological positions, and an examination of their interstices from varying perspectives, theatre can expose power and its contingencies to the audience. It can 'de-naturalize' given assumptions in the vacillations between different branches of psychiatric power.

Moreover, aware of the contingent and plastic nature of power, performance can situate the struggles of power in the context of the mad body. Whilst realism may be incapable of expressing mad experience, and necessarily remainder it, nevertheless, it can emphasize how the mad body is treated, structured and exposed to the diagnostic gaze. The palpability of the performer re-centres the body of the mad person as the object of psychiatric power. If we are able to perceive contingencies and conflicts within psychiatric power, we can perceive how they circumambulate the mad body.

Finally, whilst not presenting an 'idealistic' mode, theatre can give demonstrations of how to navigate through pluralism. Both *Head-Rot Holiday* and *The Effect* show possible means of attempting to negotiate through and against Power: whether through the bystanders in *Head-Rot Holiday* attempting (and failing) to make sense, or the emergence of gestures that do not seek to follow psychiatric or anti-psychiatric lines in *The Effect*. Through these examples we encounter a non-universalized politics; namely action or speech (of varying 'effectiveness'), that rather than seeking to universalize a principle behind it, acknowledges its own particularities and limitations.

Seeing Patriarchy and Seeing Psychiatry in Sarah Daniel's *Head-Rot Holiday*

The interstices between gender and madness are prevalent, the operations of patriarchal and psychiatric power deeply intertwined; Elaine Showalter (1987) famously referred to madness as 'The Female Malady'. Female resistance has often been dismissed, or contained, by patriarchal power through bracketing it as 'mad', 'irrational', 'hysterical'. Showalter suggests that the government's treatment of the suffrage campaigners, in particular the deliberate starvation in Holloway gaol, was 'by treating these women as hysterical' and adopting forced feeding, 'a technique which had been employed with lunatics in the old madhouses' (Showalter 1987: 162).

The founding myths and figures of modern psychiatry revolve around hysteria and its violent treatments. For Jean-Martin Charcot, the positioning of the hysterical woman as passive spectacle capacitates the hierarchy of doctor over patient (no longer is madness sealed away, unknown and unfathomed, but the doctor is the knowing man even as the patient is the unknowing woman). For Sigmund Freud, the denial of the reality of sexual abuse and violation of his female patients, the silencing of victims of rape and domestic abuse, is the prerequisite for the emergence of the Oedipal and psychoanalysis. These figures, and their abuse of women, provide acute examples of how psychiatric power has legitimized itself with the behavioural expectations of women, whilst patriarchal power has used psychiatry as a means to partition and contain deviance. However, this is not to advocate a teleological or essentialist argument that reveals a buried 'truth' hidden within psychiatry; rather, Charcot and Freud highlight the importance of an intersectional apprehension of modern psychiatry, even as they are insufficient to provide a model of this intersectionality.

The work of Sarah Daniels represents one of the most consistent engagements with feminism in contemporary British and Irish theatre; for Gabrielle Griffin, in the plays of Daniels, 'representations of the abuse of and violence against women are central' (Griffin 2000: 1994). This has extended, throughout her career, to an engagement with psychiatry, and its problematic treatment of women, representing an attempt to depict patriarchal and psychiatric power alongside one another, to parse differences whilst acknowledging connections. If *Ripen*

Her Darkness (1991), an earlier play, reflected, 'a scream of outrage that was also screaming that the world had to change', her later trilogy of *Beside Herself* (1994a), *Head-Rot Holiday*, and *The Madness of Esme and Shaz* (1994c), 'concentrates less on revealing the (man-made) enormity of what women are up against, and more on women striving to help each other despite the odds stacked against them' (Aston 2003: 46). There is an increased concern with sexual abuse (as a consequence of patriarchy and cause of mental distress), the possibility of female solidarity (and how female-on-female violence, precluding solidarity, emerges from male-on-female violence), and an anxious and multivalent approach to the interstices between psychiatric and patriarchal power.

The subject of gender and madness is well-explored in contemporary drama. However, much of the reflections upon their inter-relation have occupied a genealogical or historical perspective including Terry Johnson's *Hysteria or Fragments of an Analysis of Obsessional Neurosis* (1994), Kim Morrisey's *Dora: A Case in Hysteria* (1994), Anna Furse's *Augustine (Big Hysteria)* (1997), Christopher Hampton's *The Talking Cure* (2002). Christina Wald (2007) suggests that such a prevalence represents a genre, a 'Drama of Hysteria', utilising the stage as a means to expose the politics of performance embedded in the hysterical body. But all these plays utilize the historical mode: attempting to expose contingencies through an unveiling and examination of previous orthodoxies. Daniels, in contrast, is preoccupied with the politics of the contemporary, in *Head-Rot Holiday*, she negotiates the social, political and legal landscape of British psychiatry contemporaneous to its original production. This is not to suggest an unawareness or disinterest in the past - Carina Bartleet (2003) notes how Daniels plays upon hysterical structures – but rather to suggest in *Head-Rot Holiday* we see the long history and complexity of gender and psychiatry accounted for in its latest manifestation: the particular connections developed between psychiatric and penal institutions as developed following the *Mental Health Act 1983*.

Of her work, *Head-Rot Holiday* represents Daniels' most consistent engagement with and within the institutions which distribute psychiatric power. If Daniels' work is, following Aston, 'centrally concerned with the family as an oppressive heteropatriarchal site' (Aston 1995: 394), *Head-Rot Holiday* represents a shift, as the gaze is singularly set upon a bureaucratic institution

of psychiatric power: the special hospital. *Head-Rot Holiday* is set in 'Penwell Special Hospital', a fictional stand-in for the high-security psychiatric hospitals such as Broadmoor, Ashworth and Rampton. The patients of the play have been sectioned following a court order, having committed acts of violence (of varying severity). Accordingly, the question of disciplinary power emerges alongside the patriarchal and psychiatric.

Head-Rot Holiday maintains a realist aesthetic, providing little variance from the singular reality promoted by the 'special hospital' in which the play is set. It appears equivocal about the relationship between women and madness, and provides no 'roadmap' towards a revolutionary alternative. Its circular narratology and pessimistic ending (in contrast to the possibility of solidarity and escape established in *Beside Herself* and *The Madness of Esme and Shaz*) could suggest a fatalism, or 'melancholic Leftism'. However, resistance is achieved through a revealing of the multiple intersections of differing power structures, how these place around the mad body and a state of exception, and the use of various devices (both dramaturgic and textual) to reconceive female solidarity as incorporating (rather than ameliorating) difference.

Head-Rot Holiday, as with the wider oeuvre of Sarah Daniels, has received less attention since the 1980s and 1990s. Since the Battersea Arts Centre production in 1992, the only other professional production in the UK appears to be 2013 at the Cockpit Theatre in London, in an event for the Arts of Wellbeing. Even in the 1980s and early 1990s, at the height of Daniels' success, her work was often marginalized or mocked by the critical establishment; Aston (1983) carefully notes the patriarchal abuse and patronizing opprobrium Daniels received for work that unapologetically deployed a feminist perspective. In any event, this analysis will consider the 1992 production, principally drawing upon the play text, using reviews and personal accounts of the production to satisfactorily analyze its relationship to the structures of psychiatric power at the time. This 1992 production emerged from Daniels' work and collaboration with Clean Break, a company established in the late 1970s, dedicated to working with women in prisons. Whilst this thesis will not be looking at other work by the company, it should be noted that the company's concern with prison and women has often emerged through an excavation of mental health, such as Chloe Moss's *This Wide Night* and Vivienne Franzmann's *Pests*.

The Multiplicity of Interstices

The evident existence of the relationship between gender and madness belies the difficulty of its conception. For Phyllis Chesler, madness is created through, 'the acting out of the devalued female role or the total or partial rejection of one's sex-role stereotype' (Chesler 2005: 116); both those who deviate from expected gender performance and women who over-perform, 'who fully act out the conditioned female role' (Chesler 2005: 116) are dubbed as mad. Slightly differing, Cixous conceives 'madness' as a mode of female protest, hysteria as a challenge to patriarchal expectation. Showalter, anxious not to romanticize madness, nor to place it as synonymous with feminist struggle, occupies a doubled position, wishing to create simultaneously 'a feminist history of psychiatry and a cultural history of madness as a feminist malady' (Showalter 1987: 5). If the intersectionality of madness and gender is easily observed, these variances and debates reveal the difficulties of its apprehension.

The difficulty is the attempt to conceive the relationship as monolithic, as attempting to systematize the interaction between madness and gender. Rather than singular in its formulation, the relationship between gender and madness is multivalent. Far from establishing a singular logic of how patriarchal and psychiatric powers re-enforce one another, Daniels insists upon a diversity and heterological conception of their relationship. The three main patients of *Head-Rot Holiday* – Dee, Claudia, and Ruth – far from uniform in their response to psychiatric power, diverge in their epistemologies.

Dee, a young lesbian, is at odds with a heteronormative world. She has lashed out against a society that wishes to deny her sexuality, has sought infractions against a policeman, and in response has been sectioned. Her aggression, an understandable response to a world that attempts to silence and punish lesbian identities, has been rendered a pathology. Despite her visitation by an 'angel', Dee appears to have no delusions or voice-hearing, stating, 'I'm a psychopath not a schizoid. I can't see things what aren't there. It's not in my diagnosis' (Daniels 1994b: 229). She is, however, a self-harmer, a response to her abuses by a homophobic society. Dee's response is not simply an internalization: 'Every other fucker's done things to me. I'm

going to do things to myself for a change ... I'm creating order' (Daniels 1994b: 231). Her self-harm is a ratiocination, an attempt to take control in a society determined to deprive her of it.

Claudia, whilst diagnosed and suffering from depression, is clearly functioning; she doesn't suffer from any form of psychosis throughout the play. Claudia has been sectioned because of a burst of anger, when she attacked a social worker who refused to return her children with a potato peeler⁶. Both Claudia and the Social Worker who she attacked, declare that Claudia was simply angry. Moreover, Claudia's pre-existing mental health problems had been exacerbated by bad treatment and use of medication. The state of this anger, has been dubbed as 'mental illness', because of her previous history of depression. This unveils the stigma of madness, whereby following classification, all action is comprehended through a diagnostic gaze. Despite her legitimate anger and grievances, according to Claudia, 'I had a history of mental illness as far as they were concerned' (Daniels 1994b: 217).

Ruth suffers from intermittent psychosis, the result of sexual abuse when she was a child by her father. Throughout her trilogy, Daniels brings to the forefront the prevalent reality of sexual abuse, its psychological consequences, and the mistreatment of victims by psychiatric power. The extent to which sexual-abuse survivors represent mental health users is difficult to establish, however, according to Marian Barnes and Ric Bowl, 'a number of studies in the UK, USA, and Canada and elsewhere have revealed that 50 per cent or more women in receipt of hospital based psychiatric services have histories of abuse' (Barnes and Bowl 2001: 74) For Ruth, madness is not a phantasm of social relations; she is dissociated from her own body, attempts suicide, and suffers from palpable mental distress. Her mental distress is, rather than contained female resistance, a consequence of violent abuse of female bodies. Moreover, the 'special hospital' (insensitive or wilfully ignorant of her history) compounds these problems; her dislocation from her body exacerbated by her treatment: 'I've been forcibly stripped by six men in here and left naked without a tampon. I've been watched in the bath by men' (Daniels 1994b: 233).

⁶ As with Mary's suicide note in *Ripen Our Darkness*, 'Dear David, your dinner and my head are in the oven' (Daniels 1991: 64), female violence (as resistance) in Daniels' plays is often paired comically with stereotypical domestic objects; underlying this, is a doubled suggestion that peaceful domesticity is a front for female suffering and that this domesticity can be weaponized.

Bartleet notes that through, ‘the foregrounding or contextualization of the characters’ mental illnesses, through material conditions which inform their actions’ (Bartleet 2003: 251), the patients become normalized, or at least, accounted for. Rather than the violent act remaining an inexplicable object, an exotic remaindering of mad experience, Daniels situates them in the context of a heteronormative patriarchy. Whilst this is certainly the case, it is notable that this ‘normalization’ varies from patient to patient. Dee’s madness is a social construction of heteronormativity and the notion of homosexuality as somehow ‘deviant’ or ‘abnormal’ behaviour, leading to a rationalized self-harm. Claudia’s legitimate anger (exacerbated by medication) against a bureaucratic system is interpreted as madness, due to the stigma and history of depression. Ruth’s madness is a palpable mental distress caused by the trauma of sexual abuse as a child, and is exacerbated by institutional structures. Daniels’ dramaturgy is premised upon divergence rather than repetition. Each of their positions and relations offer different variations and interstices within the nexus of patriarchal, psychiatric and disciplinary power. Accompanied by a multivalent notion of psychiatric power is an obligation to note intersectionality functions on a similarly pluralistic basis.

The Failure of Tactics

Daniels establishes the political ‘reality’ of the special hospital as divergent, shifting, and pluralistic. This leads to the question of resistance. If her dramaturgy is focused upon multiplicities rather than the theoretical consolidation of psychiatric power into a monolith, in what way does she open up a possible resistance, and moreover, how does the contemporary asylum attempts to manage and pacify this resistance?

Daniels, far from politically static, demonstrates on the one hand how the inmates attempt to deploy various tactics in order to circumvent psychiatric power, alongside how the various power structures of the hospital seek to structurate the nurses. In this, I am broadly following Michel De Certeau’s terminology of ‘tactics’ and ‘strategy’ as put forward in *The Practice of Everyday Life* (1988). De Certeau claims ‘strategies’ are movements and shifts of power that seek to control the practices, behaviour, and identity of the individual. In contrast, ‘tactics’ demonstrate the individual dispositions and methods of navigating structures whilst

undermining them, avoiding and evading structural intent. Yet, far from equivocal, *Head-Rot Holiday* exhibits the limitations of the individual tactic and the insidious reach of structural strategy.

Ruth, clearly affected by both the high levels of medication and psychosis, lacks the ability to interpret the reality of the Asylum, and is incapable of deploying individual tactics. She conforms from expectation to expectation, patriarchal and psychiatric, typified by her behaviour at the disco, accepting un-wanted sexual advances. Even in this acceptance of social norms, she fails to be accepted, described by the nurses as 'a right slag' (Daniels 1994b: 227), caught between the simultaneous demand and punishment of sexual availability. In Ruth's own terms, observing this contradiction, 'Isn't that what they call natural, men exploring your body, doing sexual thing to you? Isn't that what we're all supposed to aim for? Why do you get called all these names when it happens?' (Daniels 1994b: 233). Ruth exposes a fundamental flaw of liberal and individualistic conceptions of resistance to psychiatric power: the expectation that those in society who have potentially suffered extreme abuse (both physical and mental), are acutely psychologically vulnerable, are dosed with medication that severely inhibits mental functioning, are capable of performing tactics that subvert the complicated bureaucracies and hypocrisies that form the contemporary asylum.

Dee, capable of adopting tactics, attempts to exploit the fault-lines of the institution, trying to 'pass' as heterosexual for the Disco. To the mockery of her fellow patients, she performs the various rituals of hegemonic female heterosexuality: putting on lipstick, shaving legs, wearing high-heels. The Disco, acting as a catastrophic event between the two acts of the play, is a fundamentally heteronormative event, where heterosexual desire is expected to be performed. Yet, the Disco is populated with male sex-offenders. At the disco, she is confronted with a man who boasts of his exploits whilst, 'he was getting off on it', whilst another man is 'mauling Ruth' (Daniels 1994b: 237). Unable to endure the varying male violence that is intended to be 'enjoyed' by the female patients, she can no longer maintain the act of 'passing'.

Claudia is the patient who displays the most evident examples of tactics, of undermining the institution from within. These modes are various, from the attempt to play the 'good patient',

to the stealing of the fuse for the plug of the nurses' television, or the final decision to reveal Barbara's physical abuse of the patients. If Ruth is incapable of tactics, and Dee attempts but fails, Claudia is the consummate tactician, playing games with and against the institution. Yet, at the end of the play, Claudia's tactics have only achieved the dismissal of Barbara⁷ (notably, not the punishment of Barbara's abusive husband). Even the dismissal of Barbara is not the harbinger of change, but a palliative for structural oppression, a sop to the chattering classes: 'Now they've been seen to do one they can sit back' (Daniels 1994b: 261). Claudia's tactics result, not in revolution, but a hiccup against larger structural forces, and her re-entry into the institution as punishment for her tactical deviance.

The set design for the original production was dominated by a blown up legal document, a court-based sectioning, engulfing the stage. This legal document, the legal situation of sectioning, exemplifies the state of exception⁸. The notion of tactics fails against the challenge of the state of exception. All divergence, avoidance, difference from the structure becomes re-incorporated into the narrative of the abnormal and deviant. Claudia's vandalism of the nurse's television, as, 'you know how slow they are to escort us back if there's anything good on the telly' (Daniels 1994b: 224), whilst disruptive, is quickly inculcated into a narrative surrounding her deviancy. In other words, how can one disrupt a narrative that is formed around potential disruption? The choice is either full compliance (an almost impossible demand) or a defiance that is predicted, apprehended, and contained. A resistance that instigates meaningful or radical change is precluded from the state of exception. There can be no resistance 'within' the state of exception itself.

The seeming fatalism of *Head-Rot Holiday* could seem a surprise to those familiar with the other two plays that consisted of Daniels' 'Women and Madness' trilogy. In *Beside Herself*, the

⁷ Even then, her impact is limited, as Jackie later explains, 'Even then they wouldn't have done nothing if it was just Claudia. But then Ruth's Aunt wrote on that headed notepaper and Doctor broken Reed thought he'd chime in with his eavesdropping evidence' (Daniels 1994b: 261)

⁸ The concept of the state of exception was developed by Carl Schmitt (1985) and further developed by Giorgio Agamben (2005). Whilst the precise definition and understanding of the concept has attracted debate, for the purposes of this thesis, I understand the state of exception as not simply an exclusion, but a doubled movement of exclusion and internalization. Excluded and deprived of legal and sovereign rights as an individual, yet a series of alternative structure and legal systems emerge, creating an alternative legal status as citizen.

possibility of challenging abusers and of the importance of believing the abused are both highlighted. At the end of the play, mother and daughter Lil and Nicola stand looking at one another outside Lil's house, as Lil 'steps over the threshold shutting the door behind her' (Daniels 1994a: 188), she metaphorically chooses female solidarity over her husband. Female solidarity, in this case, is a matter of determination and rejection of orthodox domesticity. In *The Madness of Esme and Shaz*, female solidarity is possible (across differences of sexuality, religion, and age), not by revolution, nor subversion of bureaucratic regimes, but by escape.

Head-Rot Holiday is therefore singular in its circular (the same, but worse) ending, evocation of hell, and reluctance to provide a clear alternative to a patriarchal-psychiatric paradigm. However, this is in part due to its singular focus upon (and within) the institution. *Beside Herself* and *The Madness of Esme and Shaz* maintain the psychiatric institutions in their peripheral vision; as plays, they include a half-way house and psychiatric hospital, but are primarily concerned with those who have recently left institutional treatment. *Head-Rot Holiday* focused upon the singular, circular logic of the contemporary asylum, unblinking in its focus upon how the asylum functions.

However, to simply label it as pessimistic, as a passive declaration of horror, would be to ignore the various strategies and possibilities that Daniels provides through the play. In part, the establishment of the pluralistic notions of power provides within itself a mode of resistance. We are brought to understand power, not merely perpetuate it, by veering between different perspectives and angles. This ability to comprehend its variances and complexities, this wavering between different interstices, allows us to perceive power and its contingency. Likewise, it allows us to perceive how it inflicts itself on the mad body, inculcates self-harm or mental distress, whilst framing all deviations from power as 'mental illness'. Whilst providing a 'solution', the revelation of the structures of power, the exposure of their contingencies, within itself provides a mode of resistance.

The Failure and Necessity of Female Solidarity

Daniels' trilogy on women and madness maintains a pre-occupation with the possibility (and difficulty) of 'female solidarity' in the face of patriarchal and psychiatric power. If her earlier

plays concerned the exposure of male-on-female violence, *Head-Rot Holiday* concerns the subsequent female-on-female violence. There are no male actors or characters; the gaze is firmly on the response of women. Male violence remains, but as a trace, rather than spectacle: the bruises on Barbara's face, the reported remarks of a male doctor, the stories of Dee's conflicts with the police, and Ruth's sexual abuse. However, the response to this violence is a failure of female solidarity, and female-on-female violence.

The primary cause is male violence and patriarchal power. As Heather Debling notes, 'male authority continues to destroy and prevent relationship between women' (Debling 2008: 266). However, beyond this, it is the heterogeneity of experience that lends itself to the difficulty of solidarity. The nurses and patients, positioned in a hierarchical position, continually conflict against one another. The 'strategy' of the hierarchy leads to the structuration of Sharon, a new nurse with initially compassionate instincts, to slowly distance herself from the patients, as her compassion distorts into high-minded self-regard: 'It's very hard to continue to feel compassionate when you are constantly being told you are full of shit' (Daniels 1994b: 247). Even the patients fail to establish any notion of community, more interested about their individual release from the hospital. The divergence of their experiences hinders communication and connection.

Head-Rot Holiday contains a series of strategies by which to rethink and reconceive solidarity in the face of a multifaceted and divergent series of power structures. In the original production, the nine roles were played by three women, as patient became nurse became bystander. It opened up questions of connections between bodies and experiences; Ruth and Barbara, both victims of physical male abuse, are played by the same actor. Yet, similarities of character are drawn by sharing the same actor's body, their different social positioning as 'sane' or 'mad' becomes more marked. Ruth and Barbara both commit acts of violence onto other women, but whereas Ruth's attack on her stepmother results in her sectioning, Barbara's act of physical abuse on the patients leads simply to her dismissal. If multiple casting uses the body as a mode to draw out connections, it also highlights contrast and divergence.

In another mode of reconceiving female solidarity, Bartleet (2003) notes how Daniels plays upon Marian imagery through all three patients, in order to relate their subversions of traditional gender roles, to gesture towards their solidarity. Dee is visited by an angel, a parodic Annunciation, in one of the few scenes to disturb the realism of the play. The reference is undercut, as the Angel exclaims, 'Brown Owls have been struck dead for comparing themselves to the Virgin Mary never mind smack-head, bar-dykes' (Daniels 1994b: 230); Dee's sexuality is incompatible with the heteronormative myth of the divine Incarnation. Claudia's relates the deprivation of her children prior to the Christmas party, offering to, 'be read as a near-reversal of the nativity' (Barleet 2003: 252). Ruth's Marian reference emerges through polysemy; she has an obsession with the singer Madonna, shouts out lines from songs such 'Borderline', she notes, 'Just as well my name isn't Donna or they'd call me Mad Donna' (Daniels 1994b: 193). Dee's following insult to Ruth, that she'd be called 'mad slag', is explained as a reference to 'Whore and Madonna and that' (Daniels 1994b: 193). The repetition of the image draws connections, but clarifies and emphasizes difference. All represent deviation from the Marian ideal, but rotate around differing images, incorporate difference amongst their similarities.

Head-Rot Holiday is providing us with a different means to conceive solidarity. It provides connections and connotations through differences, without neglecting those differences. The double-casting does not simply engender similarity, but highlights differences between our treatment of the 'mad' and the 'sane'. The patients all have subverted traditional Marian images of gender, but their roles vary, and are forged upon different acts of gender subversion. Daniels, far from dramaturgically pointing towards indistinguishable homogeneity, is mapping out possible connection even whilst acknowledgment exceptional difference. It is only through this acceptance of difference, rather than through its amelioration, that solidarity can be made conceivable.

Diagnosis Through Language and Race in Joe Penhall's *Blue/Orange*

If the *Mental Health Act 1983* was an attempt to codify the State's relationship to the mad person, 'Care in the Community' had increasingly represented the Conservatives' ideological stance towards the preferable direction of treatment. The aim was 'deinstitutionalization', for

patients to be treated within their own community. This was justified both ideologically (the right of the individual not to be imprisoned) and practically (it shifted the costs of care away from the State). This attitude would eventually consolidate into legislation: *The National Health Service and Community Care Act 1990*.

For many, this ostensible ‘deinstitutionalization’ was merely a cover for the government’s responsibility of care. Inspired by his own experiences with schizophrenics⁹, in *Some Voices* (1989), Joe Penhall responded to this neglect, presenting a lacerating critique of the presumptions and consequences of this attitude. The play involves pressures that Pete endures after his brother Ray, a schizophrenic, returns after being discharged from a psychiatric hospital. Ray refuses to take his medication, is volatile, at the climax of the play covers himself in petrol and threatens to commit suicide. The ‘community’ to which he returns is broken, at odds with itself, and violent. How is such a community capable of care? Penhall’s denunciation of ‘Care in Community’ was unequivocal, viewing it as a renunciation of the ethics of care, as economic and bureaucratic expediency dressed up as the emancipation of those with mental health problems. He would later describe the policy in a Platform talk in 2000 at the National Theatre as, ‘flinging people out and letting them fend for themselves’ (Penhall in Boles 2011: 42).

‘Care in the community has failed’ (Dobson 1998: np). With this short, stark pronouncement, the Health Secretary of the new Labour government, Frank Dobson, denounced the Conservative orthodoxy on how to approach mental health. Frank Dobson’s renunciation of the principle of ‘community care’ was framed in the traditional rhetoric of New Labour: ‘What we propose is a third way’ (Dobson 1998: np). A third way: that neither inflicts the archaic confinement into the asylum, nor neglects patient care by a deferral of responsibility to an amorphous ‘community’. Yet, despite this promise of a synthesis that diminishes the faults of the two extremes, Dobson’s language and suggestions seem to merely suggest a return to a more authoritarian model. Despite his suggestion that he does not wish to return ‘to locking up

⁹ Boles (2011) outlines how Penhall’s experience with Jeremy Oxley, lead singer of the Australian band *The Sunnyboys* and schizophrenic, alongside his experience as a reporter in Shepherd’s Bush for the *Hammersmith Guardian*, impacted and influenced his opinions concerning schizophrenia.

mentally ill patients in long-stay institutions so they are out of sight and out of mind' (Dobson 1998: np), his proposals press continually towards surveillance and control. Dobson outlines the necessity of, 'such possible measures as compliance orders and community treatment orders to provide a prompt and effective legal basis to ensure that patients get supervised care if they do not take their medication or if their condition deteriorates' (Dobson 1998: np). Moreover, his rhetoric frames mental health users as a societal problem, as an issue that needs to be dealt, they have 'been left to become a danger to themselves and a nuisance to others' (Dobson 1998: np). There is a continual focus on the needs of the public (distinct from mental health users) to be 'protected', on attending to a 'small but significant minority have become a danger to the public as well as themselves' (Dobson 1998: np).

Far from providing a 'Third Way' for psychiatry, New Labour's political imagination was premised upon a return to authoritarianism, and continued conception of the mad as a menace. Whilst these attitudes would not cohere into legislation until 2007, the debate between the Conservative past and Labour's future was clearly structured. The relinquishing of the responsibilities (and cost) of care set against the draconian emphasis on the monitoring and control of mental health users would become the framed struggle. Despite their differences, in this dialogue, a common conception of the mad person emerges, as a hindrance, either as a drain on public finances, or as a potential threat to the 'public'.

Blue/Orange, produced in the Cottesloe in the National Theatre in 2000, was written and set at a time of these conflicting perspectives, and seeks to weave between them, to stage them against one another. In the play, a young doctor, Bruce and the older, senior doctor, Robert, argue and manoeuvre around one another; they debate about the diagnosis and treatment of Christopher, a young black man. Bruce wishes to extend Christopher's stay, institutionalize him, whilst Bruce wants to release him. Whilst returning to the same field of 'madness' as *Some Voices*, Penhall's concerns are re-aligned and adjusted. If *Some Voices* was a visceral, theatrical dispute with a singular government policy (Care in the Community), *Blue/Orange* is, in its equivocality, concerned with the premises of the debate itself. Unlike the domestic, urban setting of *Some Voices*, *Blue/Orange* is set in a single room of a psychiatric ward. Its concern is less with situating the 'mad person' in an urban community, and more with the bureaucratic

operations and legal frameworks which constitute contemporary psychiatry. The 'community' still exists in *Blue/Orange*, but as an 'issue' explored, noted, and incorporated into debate; even bleaker than *Some Voices*, Christopher in *Blue/Orange*, has no family, no friends, no connections. Christopher is being returned to a community that does not exist.

Yet it is through weaving one perspective against the other, by posing Care in the Community against institutionalization, that Penhall achieves a practical critique, and exposes mutual assumptions. Namely, by revealing psychiatric power as multivalent, as the structuration of the mad person through conflict (as opposed to the interpolation of hegemony), it reveals the diagnosis process as inseparable from the bureaucratic power structures of modern psychiatry.

Since its premiere, *Blue/Orange* has clearly established itself as a part of the contemporary canon; a work that coupled with *Some Voices* established Penhall (sometimes to his distaste) as a playwright of the psychiatric. Beyond the 2000 production at the National Theatre, other productions have included an all-female production at the Arcola Theatre in 2010 and a production at the Young Vic in 2016. Certainly, there is potential fruitful analysis in how the play has evolved across this period. We have seen a rising concern and dialogue concerning madness, but this rise has overwhelmingly emphasized more common diagnoses in their neurotic rather than psychotic manifestations: depression, anxiety, obsessive-compulsive disorder, bipolar disorder. However, in this chapter, I am primarily concerned with how emerging performance engaged with the contemporaneous structures of psychiatric power. Therefore, despite seeing the most recent 2016 production, my analysis of the play will focus upon the original 2000 production (from a recording in the National Theatre archives reviews, and various accounts of the production), with occasional comparison to the 2008 BBC filmed adaptation.

The Multivalence of Hegemony in *Blue/Orange*

The power-dynamic in modern psychiatry has sometimes been portrayed as the conflict between the doctor and patient, a struggle between doctor as all-knowing structuring force of power and authority and patient as eccentric, passionate and resistant to subjugation. This is typified by *One Flew Over the Cuckoo's Nest* (2012), Ken Kesey's novel that was successfully

adapted for stage and film. This frames psychiatric power as a fable, as a war between hegemony and the individual.

The dramatic argument and struggle of *Blue/Orange* is not between the doctor and patient, but rather between two doctors, Bruce and Robert, and their differing approaches to medicine. Bruce and Robert declaim, respectively, psychiatric and anti-psychiatric positions. Bruce broadly supports the biomedical model, rejects the notion of latent racism in diagnosis, and believes the patient would best be treated within the institution. Robert, in contrast, subscribes to the theory of R. D. Laing, sees schizophrenia as socially manufactured, and claims Christopher would be best served within 'the community'. As such, we see the positions of institutionalization and care in the community pitted against one another in a medical context.

The voice of anti-psychiatric opinion is given the more senior position, and makes greater claims to represent the institutional structures of the psychiatric ward. Indeed, Robert relishes the position. Despite Robert's citations of Laing and Allen Ginsberg, his primary motivation appears to be the frugal economics with lack of beds. His anti-psychiatric arguments are used to justify financial expediency and the renunciation of the state's obligation of care. The theoretical positions of R. D. Laing are revealed to be open for appropriation for the power structures of modern psychiatry. Penhall illustrates the mechanism of containment, wherein previously 'revolutionary' ideas are appropriated to justify regressive policies, in particular, the notion of Care in the Community.

Bruce could, initially, appear to be more concerned with the treatment of Christopher than Robert. However, this feigned concern masks a high self-regard and self-interest. His treatment of Christopher in the opening scene is highly controlling, and frequently patronizing; as William Boles observes 'Christopher is treated like a child in terms of how his requests are received and the comments from Bruce about his behaviour' (Boles 2011: 123). Towards the end of the play, as Bruce has been undermined by the report, he exclaims, 'This isn't a game! My career is on the line!' (Penhall 2000: 109); Bruce's professional interests supersede the liberty and classification of Christopher.

Bruce and Robert, far from depicting the concerned individual actor against the uncaring institutional bureaucrat, instead both represent different, competing forces in modern psychiatry. In both Robert and Bruce, Penhall dramatizes the shift from the ethics of care to bureaucratic positioning and careerist opportunism. It could appear that Robert is representative of the institutional structures, even stating that, 'I am the Authority. (Just between you and me)' (Penhall 2000: 52). Yet, this is merely expressive of Robert's middle-class insecurities, a statement of grandiosity and hubris attempting to compensate for his lack of a professorship.

The equivocation between Bruce and Robert is crucial in revealing two institutional voices, rather than merely a critique of Robert's institutionalized anti-psychiatric stance. Rather than suggest the medical establishment is ideologically monolithic, *Blue/Orange* exposes the debate and competing discourses that exists within these institutions. Hegemony is pluralistic, divided, at conflict with itself.

Language and Power in *Blue/Orange*

Across *Blue/Orange*, language cannot be divorced from the power structures of psychiatry. Various reviewers and critics compare it to the work of David Mamet; Penhall himself acknowledges his inspiration from Mamet's *Speed the Plow* (Boles 2011: 116). It shares with Mamet a concern with language, how it is intertwined with power structures and modes of domination. It is interested in the varying ways that use of language can shape discourse, and invest in power structures. In a sense the conflict between Bruce and Robert is both concerning and fought through language, as Robert says to Bruce, 'It's semantics. And right now, Doctor, my semantics are better than yours so I win' (Penhall 2000: 28).

Bruce's attention to language, and the importance of labelling 'correctly', revolves around the pursuit of a correct language, 'because if people get the wrong word – if people just get the meaning of the wrong word, how can they get the person right?' (Penhall 2000: 13). For Bruce, psychiatry is the practice of finding the correct 'label', avoiding the term 'crazy' not because of its offensive connotations, but because, 'It's just unhelpful. Woolly.' (Penhall 2000: 12) The pursuit of the diagnosis of Christopher's schizophrenia follows this, an attempt to find the

'correct' signifier, ignoring Robert's observation about the political construction of such terminology.

For Bruce the only language regime is a psychiatric one, in which he has the power to control what words denote. Refusing Christopher's request for a drink of Coke, Bruce patronizingly compels Christopher to explain why he isn't allowed it; Christopher responds 'it rots your teeth' and 'makes my head explode' (Penhall 2000: 6), but Bruce disallows these answers, despite the second answer's connotations of mental wellbeing. Bruce's reliance upon language as an absolute, rather than culturally variant, reveals his ethnocentric mode of analysis. This is made apparent in the first act when Christopher uses the phrase 'Sorted for Es and whiz' (Penhall 2000: 8). Bruce's expertise has been undermined, he is responding to a language regime with which he is unfamiliar and has no control. Despite his ignorance of the terms, following a pause, Bruce attempts to feign knowledge; in the original production, this pause becomes prolonged, Andrew Lincoln's eventual delivery of the lines desperate, the shift of power relations (for a very brief period) is marked, caused by a control of what constitutes language.

As the play continues, Bruce's inability to recognize metaphor, and alternative modes of speech, leads to a direct misinterpretation of what Christopher is saying. In an insulting rage, Bruce takes Christopher's use of 'neighbour' to mean those who live next-door, as opposed to the rhetorical sense, of 'neighbour' as denoting everyone other than ourselves. Most condemningly, it is Bruce's own slippery use of metaphor that marks his ethnocentricity and latent racism, describing Robert's research as 'R.D. Laing in a gorilla suit' (Penhall 2000: 92), using a highly offensive pejorative in reference to Robert's concern with ethnocentricity.

In contrast to Bruce's approach, Robert highlights metaphor, allusion and diverse meaning. Tellingly, the Paul Éluard poem he suggests Christopher's delusion may be in reference to (provided in the programme for the original production), contains the second line 'Jamais une erreur les mots ne mentent pas' (Éluard in Shaw 2003: 164), emphasising language is never incorrect or deceitful, that it continually distributes meaning. This is not to suggest that *Blue/Orange* suggests that, in contrast to a 'direct' approach language, 'metaphor' is a mode of

liberation. Robert's use of metaphor, of suggestive cultural references, are similarly loaded with power structures. He uses metaphor, not to 'understand' Christopher, but to write upon him.

Robert's lack of attention to the direct mode of speech at points is actively damaging to Christopher. Robert suggests that Bruce has manipulated Christopher into not believing he's ready to leave: 'I think that you think you are scared. And that's all it is, a thought. And I think that it's not your thought (Penhall 2000: 71). Whilst his description of Bruce's manipulation and constructive force upon Christopher is correct, he is also participating in this diminution of Christopher self-coherent identity. Indeed, using such language to Christopher, a person with an unstable psychological state, whose notion of self is under attack by institutional and psychological forces, is potentially damaging. This is shown in the third act, where Christopher appears to have taken Robert's words quite literally, as direct 'thoughts' put into his head.

However, just as Bruce is inattentive to metaphor and culturally diverse meanings, Robert neglects direct meanings in favour of his personal prejudice. For example, in his quotation of the Éluard poem, he misquotes, replacing 'terre' with 'monde'. In a parallel to Bruce, Robert's inattention to the non-metaphorical implications of his language reveal his latent racist assumptions. At the end of the play, saying goodbye to Christopher, he instructs Christopher to, 'Go home and listen to some reggae music' (Penhall 2000: 115). In the original performance, speaking this line, Bill Nighy stretches his arms out and performs a small dance, suggestive of an ageing hippie, attempting to feign political radicalism, ignorant to his own bigotry. Whilst alert to the heterogeneity of language and its meanings, Robert is also inclined towards stereotype and exoticization of different cultures.

Both Bruce's and Robert's ideological assumptions are embedded in racist assumption, intellectually flawed, and motivated by personal interest. Clements (2013) claims that the faults of Robert are more egregious, made clear by his grandiose claims at the end, where he (half-jokingly) compares himself to the Pope. However, I would suggest that, in particular in the original production, there is more equivocation between their two positions; Robert gloats in his position of the victor, but both psychiatrists are guilty of personal hubris supplanting the obligation of care.

Kaplan suggests that by positioning psychiatry against anti-psychiatry, and resisting any solution of the questions raised in their context, the play suggests these 'problems' are impossible to solve (Rudolph and Kaplan 2005: 10). Following this, does the definition of a problem as 'unsolvable' result in political fatalism, in a relativism between all positions? In a review of the 2012 production in the Theatre Royal, Brighton, Neil Norman suggests that as Penhall fails to suggest which doctor is preferable for treating Christopher, 'the inference is that he might be better off with a witchdoctor' (Norman 2012: np). However, Penhall provides no alternative modes of thought with which to conceive the mad person. It is telling that Norman, in his search for a 'solution' to these problems, uses similarly stereotypical and latently racist language, as the psychiatrists of the play.

Norman mistakes Penhall's pluralism and anxiety concerning any easy 'solution' with a vacuous relativism. Penhall does not provide us with a utopic language regime, one wherein madness can be denoted without causing violence onto the mad person, or the flaws of both psychiatry and anti-psychiatry can be seen simultaneously. But if *Blue/Orange* frames the question of mental health care as 'impossible' to simply answer, it does not represent an abandoning of interrogation. Instead, the wavering between positions, between psychiatric and anti-psychiatric perspectives, is itself advocated as a position. It is precisely this wavering, and equivocation, that prevents the repetition of a singular hegemonic orthodoxy, and allows the audience to participate in an examination of prevailing institutions, rather than re-enforce them.

It is notable that pluralism is not merely a 'textual' creation. The depiction of pluralism (without resorting into a monolithic statement) is dependent upon equivocality, upon the ability to present seemingly different ideological stances in a dialogic position. This is sustained through the performative alongside the textual. Notably, compared to the original production by the National theatre, the BBC adaptation of *Blue/Orange* (2008) undermines this complexity. It removes dialogue between Bruce and Robert concerning watching the rugby game together, that establishes them both as middle-class, members of the same institution, and demonstrates Bruce's careerism. In contrast to Bill Nighy's interpretation of Robert in the original production, an actor who, 'has made a career of making utterly detestable scamps lovable' (Boles 2011:

119), Brian Cox's performance in the BBC adaptation is humourless, a bureaucrat glancing over his glasses. Towards the end of the play, when Robert instructs Christopher to 'be brave', Nighy invests the instruction with sincerity, stands in front of Christopher, looking straight in the eye; in contrast, Cox is aloof, sitting down, avoids eye contact, it is evidently an offhand platitude. Cox becomes emblematic of the bureaucracy, rather than a competing aspect.

By raising the contradictions and contingency of ideological structures (by demonstrating it is far from homogenous), *Blue/Orange* shifts from a participation in the ideological structure of realism, into a critique. It is through an ability to shift between ideological positions that we can see the failings of both, and their common ground. Most notably, it is what allows us to perceive the treatment of Christopher, the substitution of personal experience for diagnostic evaluation (and thereby bureaucratic manoeuvring), and how the mad body is subjected to psychiatric power.

The Spectacle of the Body of the Mad Person

The wavering mode of *Blue/Orange* capacitates us to see the treatment of Christopher, not to comprehend him, but rather see how he is exposed and used by the structures of psychiatric power. However, this is dependent upon how the mad body is presented, to what extent it occupies a palpable presence. The danger is presenting the mad body as a vessel of 'internal' meaning, as a 'naturalist' expression, that the 'natural and clinical body' is a conduit for lived experience. This opens up the 'diagnostic gaze' as the mode of aesthetic engagement.

The diagnostic gaze suggests that the audience attempt to diagnose the mad character, that mad experience is marked as readable, as written upon the body, as insane spectacle for our sane diagnostic minds. Certainly, Christopher is diminished in his capacity for dramatic action throughout the play. The play initially seems to revolve around the question of Christopher's mental health: is he schizophrenic or not? The audience itself are encouraged to ask this question, to compare Robert's and Bruce's varying diagnoses. They are encouraged to 'diagnose' Christopher, to solve the 'problem' of his schizophrenia. However, the performance can resist an answer, even as it encourages the question.

It is crucial to locate the mad body in terms of discourse concerning madness. The wavering of Penhall allows us to see how semiotic structures of psychiatry surround the mad body, but how is the palpable mad body presented? However, in order to resist the 'diagnostic gaze', it is necessary that the siting of the mad body does not denote or reflect 'mad experience'. Rather, the mad body is the nexus of the variegated social and political influences. However, this requires the production to resist the simplistic notion of 'playing' or 'performing' schizophrenia.

Chiwetel Ejiofor's performance of Christopher resists the act of 'playing' schizophrenia, or representing mad experience as somehow readable upon the body. Ejiofor (as opposed to enacting tropes of 'schizophrenia' or Borderline Personality Disorder) focused upon the physiological effects of the medication given to patients. In the education pack for the production, the director Roger Mitchell describes how they, 'worked on making the physical characteristics of anti-psychotic drugs performable – we wanted to avoid stereotypical representations of 'madness' and not be reliant on slavish realism' (National Theatre 2000: 4). Rather than a means of 'speaking' madness, his body become a site upon which psychiatry is inscribed.¹⁰

As well as Ejiofor's performance, the staging of the original production highlights the diagnostic framework; in the original production, the stage was set in the round, a small square in the middle, from which the seating for the audience on each side rose with each row. Watson sees it as reflective of the spectatorial architecture of older medical buildings, noting that, 'the audience looked down on the claustrophobic space of the examining room from vertiginously raked seating that surrounded the stage on all sides like an old-fashioned operating or anatomical theatre' (Watson 2008: 201). Similarly, reviewers compared it to a 'boxing ring', highlighting both the gladiatorial and spectatorial aspect of the performance.

This emphasis upon the spectatorial in the staging allows for a subtler consideration of Christopher than exhibiting 'mad behaviour'. Christopher's 'paranoia' continually manifests itself as a fear that people are staring at him. Yet, this 'paranoia' is perfectly accurate; he is

¹⁰ Again, in contrast to Ejiofor, the performance of Shaun Parkes of the BBC production attempts to act as a 'schizophrenic', he is presented in extreme overhead camera angles, looking suspiciously through window blinds.

being stared at, judged, and diagnosed by the psychiatrists. Moreover, this staging suggests to the audience that they are complicit in this gaze. As a result, his paranoia is not simply a performance of paranoid 'madness', but a cultivated response to the institution in which he is situated.

The Political Structuration of Christopher

Blue/Orange resists the notion of the body as spectacle of mad experience, so that instead the audience can see Christopher as constituted by the ideological structures surrounding him. However, given that *Blue/Orange* reveals institutions of psychiatry as a battleground of varying ideological structures, how does the process of interpellation or structuration take place?

Despite opening up the contradictions and non-monolithic nature of hegemony, this is not to suggest that Christopher is given the opportunity to exploit this conflict, to exercise what De Certeau (1988) would term 'tactics'. Christopher is too vulnerable, both psychologically and legalistically, to play upon this conflict. Far from playing the two psychiatrists against one another, Christopher is used as a ball between them. Indeed, Christopher is precisely structured between Robert and Bruce, he is constituted by the conflict, rather than any singular monolithic force.

Neither Bruce nor Robert show any interest in the experience or 'inner life' of Christopher. Bruce's treatment of Christopher is systematic, uninterested in Christopher's own account of himself, his continual questioning is not an interest in Christopher, but rather, 'a pedagogical tool, and will be repeated continually until the right answer is given, the scripts are followed, the roles taken up' (Watson 2008: 200). When he encourages Christopher to speak rather than recite, it is to demonstrate his schizophrenia, to create a spectacle in order to justify Robert's argument. Likewise, Robert shows little interest in Christopher's own thoughts, other than to justify Robert's own interpretations, showing disappointment when Christopher has never heard of Éluard or Tintin. Tellingly, at the beginning of Act Two, Robert repeatedly asks Christopher to 'listen'. In the original production, Robert even controls the space of the stage, moving a chair to block off the only exit from stage, forcing Christopher to remain under his and the audience's gaze.

Aspects of his identity are transmogrified into strategies and tactics for Robert and Bruce to exploit, as both his experience of madness and race are disembodied from him. In a play concerned with the politics of language, Christopher has no language of his own with which to express himself. Even the language regimes granted to him through race, such as the ability to use the term 'uppity nigger', are appropriated and used for Robert's own careerist interests.

As Boles remarks, 'everything about Christopher is refracted, dissected and understood through the lens of these two white doctors' (Boles 2011: 123). He is fragmented, and constituted by the competing voices of Robert and Bruce. He is used as a football in a battle ground of thoughts and language regimes; at the climax of this, at a moment of crisis, he claims, 'When I do think, it's not my thoughts, it's not my voice when I talk. You tell me who I am. Who I'm not. I don't know anymore! I don't know who I am' (Penhall 2000: 104). Vivacious and lively in the first act, by the final act he is mostly silent, it is not even necessary to consult him. They talk above him, about him, at him, rather than ever talking with him. Bounced between Robert and Bruce's bureaucratic wrangling and wrestling egos, Christopher is silenced.

The play demonstrates that the power-structures of psychiatric institutions are far from monolithic, and instead are a battle-ground of competing ideologies. The audience, able to shift between the two prevailing logics, are encouraged to discern the contradictions and contingencies of both. Moreover, the play emphasizes that the mad person is structured between these competing forces. Through the combination of exposing these two aspects, the multivalence of hegemony, and how the mad person is structured through this conflict, we can perceive how the ethics of care quickly shifts into the power structures of bureaucratic management. It reveals the reality of a state of exception. In the politics of sectioning, the mad person is excluded from society, deprived of the legalistic structures and rights of a sovereign citizen. Simultaneously, in order to incorporate this exclusion, a whole new legalistic framework is put in place. *Blue/Orange* shows how modern psychiatry is invested in this legalistic framework, how it distributes it, how concerns of doctors become the navigation and management of these bureaucratic and legalistic frameworks, rather than the ethical obligation and attentive responsiveness to the patient.

The Dispersed Mad Body in Lucy Prebble's *The Effect*

Twelve years following *Blue/Orange*, another play regarding mental health was produced at the Cottesloe Theatre. The 2012 production of *The Effect*, Lucy Prebble's follow-up to *ENRON*, shared many similarities with Penhall's play; it was produced in the round, it reaped the epistemological uncertainties of modern psychiatry for dramatic potential, and it placed these epistemological questions in political terms. Yet, whereas *Blue/Orange* maintained an image of the exoticized mad Other, *The Effect* responded to the widening of anti-depressants, the extension of the contemporary asylum through the pharmaceutical industry.

In 2007, the Labour government's proposed Mental Health Bill was abandoned, rejected in the House of Lords three times, following concerns that it represented a draconian and illiberal response to mental health. Instead, revamped as reforms to the *Mental Health Act 1983*, whilst giving increasing safeguards to those who had been sectioned, the legislation simultaneously gave additional powers to enforce medication in Community Treatment Orders (CTOs) and extended the candidacy for 'mental health professional'. Labour's previously authoritarian rhetoric had been codified into legislation. In a 2012/13 report scrutinising developments since the 2007 reforms noted developments such as a substantial increase in the population of detainees, cases where, 'voluntary admissions to psychiatric wards are now so difficult to access that patients are being sectioned to secure treatment in hospital' (The Health Committee 2013: 3), and that the disproportionate numbers for ethnic minority groups subjected to Community Treatment Orders was even greater than in psychiatric wards.

These developments, of increasing legal powers of the State over the mad person coupled with a lack of funding, should be set against other sociological trends in mental health. In 1994, Elizabeth Wurtzel outlined the trend towards, 'the mainstreaming of mental illness in general, and depression in particular' (Wurtzel 1994: 336). Since then, in the UK we have seen a sharp expansion in the application and diagnosis of 'mental health problems', particularly depression, and an increasing acceptance of medication¹¹ as the primary mode of treatment. The number

¹¹ Even accounting for Chronic Behavioural Therapy (CBT), this is often positioned alongside medication, rather than a replacement.

of those diagnosed with depression doubled between 2002 and 2014. Regardless of interpretation, what can be confidently claimed is that the category of mental health has expanded, incorporating one in four of the population. Society's notion of madness has become increasingly diffused, the contemporary 'Prozac-Nation' having an uncomfortable and complicated relationship with those physically confined and sectioned by the State.

This increase in diagnosis has been accompanied by a sharp increase in the use of medication. The Nuffield Trust and Health Foundation's QualityWatch Programme reports an increase in annual prescription of anti-depressants from 15 million in 1998 to 40 million in 2014 (Spence et al 2014: 4). This trend, even greater than the rise in diagnosis of depression, represents a significant shift in the practice of diagnosis. This increase has been further complicated by the suspicion of multi-national pharmaceutical companies, the lack of evidence for the efficacy of anti-depressants, and the motivation of profit underlying the rise in anti-depressant medication. Alongside this has been the question of the scientific validity of drug trials run or sponsored by pharmaceutical companies, who have a vested interest in a successful result.

If *Head-Rot Holiday* and *Blue/Orange* are located in an individual facility (a psychiatric hospital for criminal offenders and a NHS psychiatric ward respectively) where the 'problem' of madness is concentrated, *The Effect* by Lucy Prebble engages with a power structure that has dispersed, and become insidious. Many reviews noted Prebble's engagement with both the epistemological debates surrounding mental health and the potential exploitation by pharmaceutical companies. However, this is no way unique; there have been a variety of plays and performance that have been interested in the questions of neuroscience, such as *The Man Who* (2002) by Peter Brook and Marie-Elénè Estienne, *The Hard Problem* (2015) by Tom Stoppard and *Incognito* (2014) by Nick Payne. However, *The Effect* differs from these other plays by directly framing these debates in terms of the institution. The testing facility is presented as a state of exception, a legalistic nadir, where those subjected to the diagnostic gaze are simultaneously dispossessed of individual sovereignty. In contrast to other plays concerning neuroscience, it is this political urgency, placing modern neuroscience and the diversification of mental health in the context of the political and legalistic state of exception that reveals *The Effect* as intimately concerned with the contemporary asylum.

At the time, *The Effect* was received by warm critical attention, but nevertheless contrasted with the quick success of Prebble's previous play: *ENRON*. The shift from the carnival of capitalism to the personal politics of medication, alongside a move from an ensemble cast to a four-hander, was deemed a retreat of ambition and intent. However, since its première in 2012, *The Effect* has quietly gained attention as one of the core plays interrogating neuroscience and the modern pharmaceutical industry, attracting new productions in 2015 at both The Sheffield Crucible and The Heart of Hawick, Kirkstale. If this analysis primarily stems from the playtext and a recording of the original production (and has drawn upon commentaries of the first production to garner a sense of the production), it should nevertheless be noted that the impact of *The Effect* has subsequently spread, quietly becoming part of the repertoire within which theatre engages with the contemporary asylum.

The Mad Person in the White Coat: Uncertainties in Psychiatric Power

The Effect presents a love story in a clinical setting. Connie and Tristan are two subjects in a trial for a new drug, an anti-depressant that is designed to 'avoid the emotional dampening we normally see with anti-depressants.' (Prebble 2012: 45) They quickly become attracted to one another and begin a relationship. However, both the researchers and the triallists are unsure if their high levels of dopamine and positive behaviour, is caused by a 'natural' attraction, or the agent 'artificially' instigating the emotion.

Similar to *Head-Rot Holiday* and *Blue/Orange*, far from presenting a singular solution, *The Effect* destabilizes stable or monolithic accounts of madness, and reveals the debates and multiple positions that exist within psychiatric power. The opening dialogue of the play concerns Connie and Dr James debating the difference between sadness and depression. Connie's insistence upon a difference relies upon a neurological argument, 'I just mean I haven't got an abnormal amount of chemical – in the brain or anything' (Prebble 2012: 5). Later, in an exchange with Toby, Dr James rebukes this notion, stating there is no evidence existing that suggests depression is caused by a chemical imbalance. Yet, whilst observing that the difference between the mad and sane is an un-scientific, nebulous category, Prebble is not denying the existence of 'extreme' mental states and experience, of mental joy and distress. Dr James's fall

into a severe depressive episode towards the end of the play rebukes any diminution of the experience of depression; Dr James's depression is palpable, crippling, and painfully real. Rather, the reality of depression is not neatly cut off from 'ordinary' human behaviour (indeed, it is mentioned at several points of the play that those with moderate and mild depression have a more 'realistic' worldview), nor contingent upon its neurological basis.

Much like *Blue/Orange*, *The Effect* uses discussion and debate between medical professionals to reveal the contradictions and competing aspects within psychiatric power, as well as how intellectual positioning cannot be divorced from personal and professional interest. Dr James and Toby disagree about the interpretation of the experiment and its results. Dr James ascribes the high dopamine levels in Tristan and Connie's brains to the romantic feelings they have developed for one another. In contrast, Toby claims the romantic feelings are the result of the high dopamine levels caused by the test-drug. Regardless of their differing opinions, however, both Toby and Dr James are concerned with the aetiology of action and feeling. Namely, both doctors attempt to substantiate and validate their opinions in an appeal to causation, to the aetiology of behaviour. Moreover, both arguments hinge upon the notion that the aetiology of behaviour is what substantiates and validates it. The search for an aetiology of action is a twinned desire of both science and Realism. Following Diamond, Realism engages in continual revelation and unveiling, so that, 'realism progresses by going backward ... through confessions and self-exploration, woven into dialogue and action, an etiology emerges' (Diamond 1997: 18).

Whilst using the data concerning Tristan and Connie, they both interpret the data to reach opposite conclusions. Through selectivity and interpretation, they use empirical data to support their previously held conclusions:

Dr James You were happy to attribute it all to drugs when you thought the effects were positive.

Toby And you're only prepared to accept it's the drug if the effects are negative! (Prebble 2012: 78)

Despite the vast quantities of surveillance and measurement, the scientific method is susceptible to uncertain confusion of causation and correlation, demonstrating the malleability

of empirical data through analysis. Both Dr James and Toby manipulate information in order to support their personal agendas. Furthermore, even established causal links are manipulated and rebranded, as Dr James remarks in regard to undesirable responses to the drug: 'They're not side effects, Toby, they're just effects *you* can't sell' (Prebble 2012: 78). This even occurs on more minor assessments of causation; when bickering about whether a cigarette burn on Dr James was caused by Toby, he responds, 'Well, to be fair we can't know for certain what caused that' (Prebble 2012: 27). The search for the 'first cause', for an aetiological account, is always susceptible to doubt.

The motivation for this difference in perspectives between Dr James and Toby is exemplified in the two 'lectures' performed for the audience. Toby and Dr James respectively address a brain, they hold it up in their hand, imitative of the memento-mori trope of the individual addressing a skull. But rather than death, these scenes involve an encounter with the physical account of our sense of self and identity. For Toby, the brain he addresses is his father. His relationship with his father is used as a metaphor for the progress of neuroscience, the child which has finally grown up, or in his own words, the Cinderella who finally got to go to the ball. It reveals a teleological bent to his approach to neuroscience, what was once immature, now the fully grown discipline. It also suggests an anxiety, an insecurity, and need to control and contain his father, to literally hold Toby's father in his hands. In contrast, Dr James appears to address her own brain. The brain acts as metaphor for her depression, as something beyond her control. Yet, simultaneously, it stands as a metonym for herself. In the scene, which marks the beginning of Dr James descent into her depressive episode, Dr James struggles with depression, her brain which she cannot control, as something that is both separate to her and a part of herself. She begins to rip up the brain into shreds. The dissonance between externalisation and self-identification has become unbearable.

Moreover, *The Effect* manipulates and encourages the audience to perform the same interpretive act as Dr James and Toby; this is achieved through the restriction and release of information throughout the play. The audience is informed that one of the triallists is on a placebo, but the stage directions clearly state that, 'which scan belongs to which volunteer is unknown.' (Prebble 2012: 42) By revealing that one triallist is on a placebo, Prebble encourages

the audience to deduce which one it is, and interpret the characters' aetiology of action. The audience, by performing the same examination and interpretation, is involved and complicit with Dr James and Toby. The audience is informed Tristan is on the placebo, only to be informed later he was not. Through this narrative 'twist,' the audience is led to one understanding of the characters' actions, only to be informed that it was wrong. The play encourages the audience to read, interpret and guess the aetiology of the characters' behaviour, whilst simultaneously destabilising their understanding. It plays upon the disjunction between what Peggy Phelan terms as 'the inexact mismatch between vision and knowledge' (Phelan 1993: 114). The restriction of information encourages the audience to perform the same interpretation of action as the scientists, whilst the twists serve to encourage a self-reflexive response to the play, to look back upon their own looking. It emphasizes what Diamond notes it is a fundamental feature of realism, whereby 'the spectator takes on the role of seeker/knower, is assured of completing the narrative, of discovering the secret, of judging its truth' (Diamond 1997: 19).

It is notable that eventually Dr James discovers that she too was being tested by Toby, for evidence of practitioner bias. She acts outraged, expressing feelings of betrayal. Not only a practitioner of the biomedical gaze, she is exposed to it as well. The biomedical gaze, and its pursuit for the aetiology of behaviour, is not singularly applied to the test subjects, but has become far more dispersed, through what Foucault would term as the capillaries of power.

Beyond merely demonstrating existing ambiguities through dialogue and discussion, *The Effect* troubles the position of the mad person as necessarily the 'patient', and positions the diagnostic gaze as fundamentally the desire for an aetiological account. Through the device of the drug trial, Prebble is able to demonstrate how the diagnostic gaze of the biomedical model is not solely the exclusion of mad bodies from society, but works as a more dispersed form of disciplinary power. Connie and Tristan are not understood as 'mad' by society, but rather, their ingestion of the new drug automatically qualifies and labels them as 'mad', as Other than themselves. It is precisely through this juxtaposition of sane bodies being subjected to the diagnostic gaze (and thereby all behaviour, all action, is called into question as abnormal) that the contemporary form of psychiatric power is revealed. Likewise, Dr James is the mad person

of the play, the person with the closest to 'extreme' mental behaviour, yet is also the chief executor of psychiatric power, the chief perpetrator of the diagnostic gaze. The traditional Doctor-patient power relationship has been complicated, as the mad doctor monitors the sane.

The Effect positions the 'sane' under the psychiatric power applied to the mad, yet establishes Dr James, one of the chief figures of the drug trial, as a 'mad person'. Through these playful confusions, I would suggest that Prebble opens up some of the interstices and gaps presented in the inner-conflicting psychiatric hegemony. The dissipation of the power structures of the psychiatry are revealed, into a broader tendency to define by means of aetiology, within which the 'sane' are increasingly inveigled. Moreover, through subjecting the 'sane' person to the structures of the asylum, normally reserved for the designated 'mad person', the oppression and aporia inherent to psychiatric power is unveiled, our treatment of the mad person more pronounced. This is not to suggest that the play is acting as a 'metaphor' for larger social trends, following Rosen's idea of the 'asylum play', 'takes a societal model of an asylum and treats it as a microcosm' (Rosen 1983: 85). The use of madness, and its institutions, as metaphor, can quickly lead to abuse and stereotype. Rather, *The Effect* is a realist representation of an institution which distributes and participates in this dispersion of power.

The Sane in the Asylum, the Subjected Body of the Mad Person

Beyond representing the multiplicities contained within psychiatric power, *The Effect* is concerned with how these various competing semiotic structures impose themselves upon the palpable body of the mad person. The revelation of competing structures within psychiatric power allow the audience to perceive how these structures compete around and enforce themselves upon the mad body.

Connie and Tristan are subjected to the diagnostic gaze, as their behaviour and bodies are weighed up, examined and judged. The clinic is a site of totalizing surveillance. The trialists are subjugated to continual tests: for blood pressure, alcohol levels, weight and height. They are given various psychological tests. They are required to wear telemetry boxes to measure their heart rates. Dr James claims, 'I monitor everything' (Prebble 2012: 23). This extends beyond simply physiological control, into a patrolling of emotions and the self:

Connie I understand that there is a leasing of bodies here, but you can't expect to police how we feel.

Dr James That is exactly my role. (Prebble 2012: 60)

The control over the body has, following a biopolitical structure, led to an attempt to control the self; or rather, the body is impinged and subjected to Power by control of the 'soul'. Connie and Tristan (though, it should be noted, of their own volition) find themselves in a legalistic situation similar to those sectioned. Dr James seeks to control their bodies and behaviour; they're told they are forbidden from embarking upon a relationship, from smoking, from leaving the premises. Dr James attempts to frame disciplinary control as necessary for observation. They are in a state of exception, simultaneously included as Dr James regards herself as 'responsible' and protective of them, and excluded from their individual sovereignty.

The drug has stimulated, beyond physiological effects, a political reconfiguration. They are no longer 'sane', in taking the drug they have imbibed madness. Whatever the neurological or behavioural consequences, the one 'effect' of the drug that seems unquestionable is the dilapidation of political sovereignty. Dr James, attempting to justify her authoritarian policies, states that they are not in control of themselves, not aware of the danger they pose to themselves. As Shoshana Felman has stated, madness is regarded as a 'blindness blind to itself' (Felman 1975: 206). In this, Dr James represents the doubled instinct of modern psychiatry, from a Hippocratic claim to care whilst simultaneously being concerned with observation and control. Moreover, that observation necessitates control (and perhaps, rather than a causal relationship, control is justified and achieved through this observation, both are concurrent), she needs to be able to see wherever they are, control whatever they do.

This mode of control is not just the control of space, but an attempt to inscribe upon bodies through the search for the aetiology of behaviour. In sequences where by Connie and Tristan are being examined, computer images of scans are projected upon their bodies. Far from passive observation, the examination is, in a metonym, inscribing upon their bodies. Moreover, their own body language suggests their own transformation and alienation from their behaviour. Their arms, stretched out, make staccato, robotic shifts downwards as they are

scanned, imitative of the Vitruvian Man, as bodies reduced to purely physical features. All their behaviour is viewed in order to assess the causation of the action, rather than the action within and of itself. This is the diagnostic gaze, the attempt to discern the causation beyond the act or emotion within and of itself.

In the mode of what Foucault identifies as the apotheosis of disciplinary power, Bentham's Panopticon, under the influence of absolute surveillance, Connie begins to internalize the doubt and search for cause. Her relationship with Tristan becomes disturbed, and broken apart. The madness of love cannot withstand the search for its aetiology. This suspicion of others, setting mad person against mad person, reveals the diagnostic gaze is not merely a hierarchal social mechanism, but something ingested and inculcated within the mad person themselves. It is a mechanism preventing even the possibility of solidarity. In Foucault's analysis of psychiatric power, he notes the justification of the asylum, the deliberate concentration of those deemed mad, against the risk of potential contagion, is, 'it is very good to see the madness of others, provided that each patient perceives the other madmen around him in the same way that the doctor sees them' (Foucault 2003a: 103).

A Visit to the Madhouse

Similar to *Head-Rot Holiday*, *The Effect* is not only interested in marking out the multivalent aspects of psychiatric power, but attempts to demonstrate various means of navigating through pluralistic power. But whereas *Head-Rot Holiday* uses the struggling testimony of bystanders, *The Effect* attempts to convey means of negotiating pluralisms by situating its characters in alternative geographies and spaces of madness.

In order to briefly escape from the medical testing facility, Tristan takes Connie to an abandoned building that used to be an asylum. The lighting becomes less stark, the stage decluttered of the props and furniture of the trial facility. The characters physically enjoy and test the space; Connie performs a cartwheel, Tristan performs a tap dance around the edges of the stage. It is the site of their first kiss, of the beginning of their relationship.

Prebble is directly situating her play in the lineage of asylum plays, *The Effect* as concerning the modern asylum. She frames modern neuroscience as being the latest shift in the history of

madness, a new movement in its genealogy, rather than the isolated emergence of a new field. It puts the audience in a dynamic conflict with psychiatric history. Anna Harpin has suggested that the tendency to engage with asylums within Gothic horror, placing madness between the dual-pins of pity and terror, allows us to partition off our anxieties concerning psychiatric history, into the 'long-distant past' (Harpin 2012: np). In contrast, *The Effect*, rather than engaging in a cordoning off of psychiatric history, is inviting us to re-integrate it into our understanding of contemporary psychiatry.

Bizarrely, the asylum, usually presented as the archetypical institution of oppressive psychiatry, is now framed as a site of freedom, of liberation. However, this is not an act of revisionism, a naïve or nostalgic suggestion that the old asylum system was in any sense preferable to contemporary systems. Rather, they are liberated by its distinction from the drug trial's facility; ironically, the asylum provides a respite from the bio-medical gaze and its concern with the pursuit of the aetiology of behaviour. What follows is a subversion of the concepts of the testing facility: of space serving the gaze of the mad person, rather than an organized gaze upon mad bodies; of bodies as active and capable of performing, rather than passive entities for observation.

The asylum provides an environment where the gaze and perspective of the mad person is prioritized, rather than the diagnostic gaze upon mad bodies. Tristan and Connie wonder at the beauty of mosaic floor, Connie suggesting it was a response to the perspective of their patients, 'maybe they thought mental patients spend a lot of time looking down' (Prebble 2012: 39). The drug testing facility was modelled after a panopticon, its architecture is one of continual observation, organized space presented as a gaze 'onto' mad bodies. In contrast, through the image of the mosaic, the possibility of space as object of pleasure, is attendant upon the gaze of the mad person.

When Tristan and Connie enter the asylum, they enjoy and relish the physicality and palpability of space. In part this is enjoying a momentary freedom from the clinical trial, but this reflects in a particular use and embrace of the physicality of their bodies. Connie performs a cartwheel. Tristan performs a tap dance for Connie. He dances around the edges of the stage, testing out

the boundaries and limitations of the space, enjoying the ability of his body to use and shape space. We are presented with two different conceptions of corporeality. The corporeality of the testing facility treats bodies as passive, objects to be analyzed, as comprehended rather than comprehending. This is the body as reduced to its constituent parts. On the other hand, in the dilapidated asylum, Tristan and Connie explore a different corporeality: the body as active, capable of action, of performance.

This could present itself as a utopic image, a monolithic, preferable alternative to the drug testing facility: space as attendant, bodies as capable. Yet, all of this is undercut by the irony of the setting: the archetypical, stereotypical image of the oppressive potential of psychiatry, the Victorian asylum. This is not a permanent alternative, nor a longing look at the past; the scene occurs within the weight of psychiatry's history. The reference to the past exposes the contingencies of the present system of psychiatric power (it is only, briefly, liberatory, because the institution of the Victorian Asylum is over; they can only dance because it is dead), but it does not provide a stable alternative. An alternative mode of apprehending madness is bracketed in an ironic setting: the classical site of psychiatric oppression transmogrified into accidental site of liberation. This is an irony that subverts any notion of permanent alternative, it is an accidental resistance, a contingent liberation.

The Hospital Bed and the Question of Care

Towards the end of the play, when Tristan and Dr James are both in recovery, the sleek moveable couches of the testing facility are replaced by a large bed of a hospital ward. If the Asylum provides a moment of Utopia, undercut by an ironic setting, the final scenes surrounding a hospital bed represent a more sustained and non-ironic attempt to model a pluralistic response to psychiatry. These final sequences situate *The Effect* as more willingly optimistic, and in claim of a 'solution', than either *Head-Rot Holiday* or *Blue/Orange*. This is an attempt by Prebble to move beyond a 'practical critique' into offering possible directions and modes of navigating through the pluralistic Power structures of the contemporary asylum.

Dr James and Tristan both lie in the bed, the doctor and patient now joined by their mutual need to recover, and the treatment that they receive. The doctor-patient divide has been

ameliorated by the experience of mental distress, one from transient global amnesia, the other from severe depression. However, notably, the medical professionals that treat them are not shown; rather, their recovery is defined by their interactions with Toby and Connie respectively. In both cases, notions of care, of treatment, are framed in terms of 'love'. This notion of love, as inexplicable and from one human to another, haunts throughout the play. In his monologue, Toby recollects that, 'my father used to say that it's only love makes it anything except the art of two madmen' (Prebble 2012: 30). Love is presented alongside madness, as similarly inscrutable. *The Effect* seems to suggest that 'love' can only be apprehended, or successful, in the absence of an aetiological account. Connie, treating and tending a Tristan who cannot recollect her, states that, 'I don't care what it was I see that now' (Prebble 2012: 97); she has abandoned her search for the cause of their relationship. Toby, in his declaration of love to Dr James, still frames it in neurological terms, but rejects the ratiocination of cause: 'I love you, Lorn. And it's not romantic cos that's when lies start and it's not family, because that's this wonderful genetic trick. It's just. I've built a bit of my brain around you' (Prebble 2012: 98).

Love is not contained within the biomedical model, yet is necessary for the practice of ethical medical care. Yet, in terms of political resistance, as an alternative means of negotiating through psychiatric power, this is not to provide a singular solution, or a utopic stance. Rather, it is an attempt to view neuroscience, not what (in the programme) Steven Poole terms as the 'arbiter of human activity' (Poole in Billington 2013), but a reconfiguration of the purpose of neuroscience, that 'if the goals are understanding and ultimately, the alleviation of suffering ... then labelling illness is valuable only to the extent that it deepens empathy and advances treatment' (Rudolph and Kaplan 2005: 10) Whilst the discussion of 'love' may seem ostensibly utopic, it has no systematic political content, it is a rejection of any singular, monolithic response. The hospital bed, and its re-adoption of the ethics of care, is marked by variance and difference, rather than Utopia. Connie's response to psychiatric power is to deny any concern with the aetiological, to be unconcerned with the neurological. In contrast, Dr James abandons her refusal to take medication, despite her previous arguments for their inefficacy; this is presented as a renunciation of the self-destruction spurred on by her depression. Set alone, this

could suggest Prebble is endorsing a singular position, however, through their divergence, *The Effect* resists any singular solution or treatment.

This is not to say that this gesture of optimism, that nevertheless resists formulation, cannot be misconstrued, or even vulnerable to more regressive or monolithic political stances. In the play-text, Prebble writes the following ending stage directions:

Dr James, alone looks at the door, looks at the cup/pills beside her, decides, and takes them.

Underneath this we hear the sound of an EEG: electrical activity in the brain produced by neurons firing. Underpinning this is the bass of a heart beat from an ECG. (Prebble 2012: 101)

Underlying Dr James's decision is a deliberate direction to the soundscape, a final confrontation with the physicality, and its relation to the self. The traditional organ of love, the heart, is crossed over against this neurological centre of the self, the brain. This is a reformed confrontation with the audience, of how to account for the sovereign self and its relation to the physical, and frames Dr. James's decision in this context.

In contrast, in the original production at the National Theatre, this scene was underscored by the song 'Keep Breathing' by Ingrid Michaelson. Rather than a confrontation with the ambiguities and complexities of the relationship, this song frames Dr James's decision uncomplicatedly as an act of liberation and survival. In his review for *The Independent*, Paul Taylor noted that, 'as someone who has long had cause to be grateful for breakthroughs in medication, it ends in a gesture of good sense that makes me feel like cheering' (Taylor 2012: np). Rather than an ambiguous interrogation of how we are unable to reconcile the physical and the behavioural (with embedded issues of individual sovereignty and political agency), the ending is an unhindered acknowledgement, acceptance, and embrace of contemporary psychiatry.

The Effect ties together contemporary debates in neuroscience with the political subjugation and state of exception formed by psychiatric power. It interrogates this connection by providing a series of differing modes and sites by which to conceive psychiatry: of present abuses, of brief

escapes in the past, to a potential optimistic future. The drug testing facility serves as a means to reveal present debates and contradictions surrounding psychiatric power, medication and the pharmaceutical industry, whilst demonstrating how these debates attempt to surround and lay claim to the mad body. The dilapidated asylum links recent neuro-scientific developments to past psychiatric institutions, providing an ironic and brief escape from the diagnostic gaze. With the hospital bed, Prebble attempts to forge a more optimistic approach, not providing an alternative 'treatment', but rather an attitudinal shift; however, this can easily lead into Utopianism, a destruction of equivocality, and become interpretable as an unproblematic endorsement of psychiatry.

Conclusion

The plays of the contemporary asylum are confronted with a dilemma. As established earlier, critics such as Harpin have noted realism involves a remaindering of mad experience, the implicit ideology underneath its aesthetic sunders madness from our conception of the real. But, in order to understand the internal logic of the asylum, these plays engage within realism, as an aesthetic strategy. The challenge becomes how to overcome embedded ideological implications, how to shift from a play that merely perpetuates psychiatric power into one that interrogates it. Foucault's notion of the 'practical critique' can partly assist us, outlining the space where theory can no longer participate or denote, and a response to a pluralistic and multi-faceted nature of psychiatric power. What constitutes this 'critique' in dramatic terms, how plays can articulate resistance to a pluralistic power structure, can vary. However, certain core aspects reoccur. Firstly, situating and representing the pluralism of the asylum, rather than as a monolith, allows an act of 'wavering' between ideological positions, to view the contingencies and contradictions of the contemporary asylum; it allows us to perceive the workings of power. Following this, the act of wavering makes visible the various contingent operations of power that attempt to surround, inflict and even define the palpable mad body. In certain cases, these plays have tried to 'dramatize' this wavering and its possible modes, to represent it through either characters or setting; however, this can result in an alternative

monolith, a utopic image, and thereby a distortion or even destruction of the pluralistic response.

The conflicts or contradictions of psychiatric power will vary, according to emphasis and historical context. In *Head-Rot Holiday*, Daniels engages in an intersectional approach; rather than through debates between doctors, Daniels exposes the variety of interstices between patriarchal and psychiatric power, how the variety can obstruct solidarity. In *Blue/Orange*, pitting the Care in the Community against Institutionalization, Penhall frames doctor against doctor, psychiatrist against anti-psychiatrist, to expose the priority of bureaucratic positioning over the ethics of care. Prebble in *The Effect* similarly positions two medical experts against one another, but in the context of pharmaceutical treatments of mental health and the sharp increase in use of anti-depressants. In all of these cases, rather than relying upon a historical perspective, these plays respond to recent developments in psychiatric power, and expose ongoing internal debates and contradictions. Through an equivocality, rather than an adoption of one of the positions, these plays avoid participating in psychiatric power, and rather produce a critique. Through a wavering between different positions, power becomes visible. We can see its contradictions, its conflicts, its biases. Most notably, we see its abuse of the mad body.

Psychiatric power is formed around the control of the mad person. It seeks to control, and it seeks to measure the mad body. However, these plays diverge in the mode of control, and likewise what constitutes the 'mad body'. *Head-Rot Holiday* demonstrates the divergence of this mode of control. For Ruth and Dee, social stigma has (to some extent) been internalized, leading in both cases to self-harm; Claudia, in contrast has attempted to adopt 'tactics' against social structures, but has been punished accordingly. This suggests that psychiatric power does not require obedience, as deviance can immediately be contained into the narrative and state of exception. The original production of *Blue/Orange* worked carefully to show how the mad body, exposed to the diagnostic gaze (of both the doctors and the audience) becomes infringed upon, is manipulated for personal and bureaucratic interest. In Ejiofor's performance, Christopher's body was not the site of diagnostic 'knowledge', containing a true 'diagnosis', but rather was constituted by medication. *The Effect* situates the mad body as something dispersed, and complicated by recent developments in neuroscience. The 'drug trial' creates a

situation whereby categories are confused, the doctor is a depressive, whilst the patients are 'sane' participants. The ingestion of the drug leads to a manufactured 'mad person', and to a legalistic 'state of exception'. The test facility becomes a panopticon, by complete observation is concomitant with an attempt to control behaviour.

Some of these plays attempt various methods to not only 'critique', but to offer modes, and possible directions, of change. In *Head-Rot Holiday*, both textual and dramatic devices are used to suggest means of establishing female solidarity in the face of divergent experiences. Similarly, *The Effect* provides alternative spaces to bracket psychiatry, the dilapidated asylum and the hospital bed. This evidently is an attempt to resist a fatalism, to dramatize the 'wavering' between ideologies within power, to suggest a particular direction or form. At their best, these devices offer potential actions of resistance that make no universal claim for themselves. This however, can run the risk of, instead, providing a monolith, and thereby distorting the equivocation between positions of power that render it visible. Notably, *Blue/Orange* takes care to avoid any affirmative position. *The Effect's* final image suggested to some an adoption of a pro-medication stance.

The refusal to provide a 'roadmap-to-resistance', or a utopic image, could be read as fatalistic. Alone, a passive observation of abuses is unhelpful. However, these plays, in their equivocality and complexity, are offering something more complicated: a self-reflexivity. A self-reflexivity that allows us to perceive contingencies and arbitrary claims on the mad body. To perceive contingency is the basis of all resistance, the precondition behind the radical notion that 'things could be different'.

CHAPTER TWO:

HEARING VOICES, SEEING VISIONS: HALLUCINATION, SPACE, AND MAD EXPERIENCE

What does it mean to find a space for madness outside of the asylum? Plays such as Alan Ayckbourn's *Woman in Mind* (1986) and Anthony Neilson's *The Wonderful World of Dissocia* (2008) shift away from realism, attempt to find a space for mad experience itself. The stage becomes mindscape, as a physical and theatrical manifestation of mad experience. The internal landscape of the mad is made explicit and clear for the audience. The real world is expelled, and we can finally peer into (and through) the eyes of the mad. The 'unreal' experiences of madness and psychosis are exposed through the material stage and palpable bodies. The audience can 'see' madness with new eyes. This is a procedure intensely engaged with space: the internal translated into the external. The exposure of mad experience could seem to be a progressive gesture, an articulation of madness in defiance of its silencing. But, this is to ignore the complicated political structures that surround our cultural conceptions of mad experience.

Madness is often culturally conceived as a personal delusion, as an internal and secret place, secluded from reality. Anna Harpin notes how our cultural idioms place the experience of madness as 'an inherently geographical encounter' (Harpin 2014: 187). Teasing out the spatial politics of this encounter, Harpin suggests that madness, 'is figured as site. Or, perhaps more accurately, as simultaneously site and non-site. To be mad is to be both somewhere and yet nowhere, or at least not here, that is to say "reality"' (Harpin 2014: 187). In other words, in our cultural representations of madness, the act of giving madness its own space is concomitant with our attempt to exclude madness from the political construction of 'reality'. In another articulation of this, Petra Kuppens observes, 'a general problem with working towards an aesthetic that tries to find spaces for the unknowable is that the 'other' too quickly becomes fixed in otherness' (Kuppens 2003: 130).

The representational logic of 'hallucination' exemplifies the notion of madness as a site defined by its exclusion from communal reality. The cultural logic of hallucination is one of private space sundered from external reality. Madness is hearing what should not be heard, seeing things that are not there; it is an unstable subjectivity overriding the senses. To hallucinate defines the experience in conflict with an established reality, as pathology and aberrance. In hallucination, madness is ushered in only to be contained and controlled. In popular culture, films such as *A Beautiful Mind* (2001) have drawn upon hallucination as a narrative twist, a psychiatric equivalent of 'it was only a dream', as the action of the film is revealed to have been the main character's various delusions. Throughout, these intellectual structures imagine hallucination as obstacle to knowledge, as something to be overcome.

The very term 'hallucination' involves a political construction, a particular view of the lived experience of those who hear voices or see visions. Groups such as the Hearing Voices Network have resisted this terminology, noting in their charter that hearing a voice or seeing a vision is a 'real experience', that responses to such phenomena vary widely, and forcing a pathology can be harmful to the individual. They prefer the terms, 'hearing voices' or 'seeing visions'. For some voice-hearers, their experience becomes religiously-loaded, a means to share a space with the divine. There are many alternative conceptions and spatial logics through which to conceive this experience. I use the term 'hallucination,' less to denote the distinct experience, than to refer to the particular hegemonic construction that seeks to contain and control this phenomenon.

The problematic aspects of the logic of hallucination quickly becomes apparent. For instance, the hierarchical power-relations play in our representations of this inner-outer logic. This is a space of madness that exoticizes the experience even as it renders it knowable. It places the audience in a position to 'see' hallucination, and discern it from reality. In doing so, it reifies the partition between reality and madness. If madness is something that troubles our presumptions, then these apprehensions of hallucination seek to contain this instability. We 'taste' madness from the superior position of the sane. Madness is commodified and controlled.

Concomitant with this exoticization of madness is a de-politicization of mad experience. Mad experience is clearly defined as against the 'real'. Society isolates and partitions off mad experience, examines it in isolation to its socio-political context, divides it from other spaces and social praxis. In this, our logics of hallucination fail to regard and engage with the complex fabric with which madness manifests through and alongside other socio-political constructs. Likewise, it ignores how madness has a political impact, that it effects political structures such as family, economy, race and gender. Madness, and mad experience, is regarded as having no political stakes.

The purpose of this chapter will be to examine these concomitant operations of exoticization and de-politicization in more detail, whilst look for theatre's potential to resist and undermine these processes. The spatial complexities of theatre lend it potential to negotiate the relationships between the internal and external, between the real and the perceived. I will be looking at John Hayne's and David Woods' *The Eradication of Schizophrenia in Western Lapland* (2014), Caryl Churchill's *The Skriker* (1998b), and debbie tucker green's *nut* (2013), all plays variously engaged with the spatial logic of mad experience (more specifically, schizophrenia and psychosis) and the creation of 'mindscapes'. I will be questioning to what extent they perpetuate the spatial logic of hallucination, and whether (and if so, the modes by which) they puncture the exoticized private space of madness, and re-politicize our conceptions of mad experience.

Mad Experience, Hallucination, Theatre, and Space

Whilst madness is frequently discussed in spatial terms, of inside and outside, the modes through which we understand the relationship of space and hallucination resists easy interpretation. Part of this is simply the difficulty of theorizing space. Conceptions of space prove difficult to force into neat epistemologies, as knowledge is manufactured through space. We think through space; meanings are created in spatial arrangements. Following Henri Lefebvre, we create representations and through space, knowledge unfolds through space, and our mistake has been to ignore the spatial politics of our intellectual endeavours, whereby, 'the

philosophical-epistemological notions of space is fetishized and the mental realm comes to envelop the social and physical ones' (Lefebvre 1991: 5).

Space requires a nuanced and multivalent apprehension of its construction. Lefebvre offers one of the most consistent and thorough examination of what we mean by 'space'. For Lefebvre, space is not singular, it is multifaceted, playful, complicated. Lefebvre (1991: 33) creates the famous triad of spatial modes, denoting how it is variously experienced and accounted for: as perceived (through Absolute Space), as conceived (through Spaces of Representation), as lived (through Representational Space). David Harvey pushes this further, noting the importance of the relationship between time and space. History and geography are not neatly divided. Harvey (2006: 121) offers a more febrile understanding of space; space can be divided into absolute space, relative space, and relational space. Absolute space is palpable, Cartesian space, a matter of geometry separated from time. Relative space is understood through motions and processes, Einsteinian time, space experienced against time. In Relational space, memory and emotion precede space, time and space have collapsed into one another.

It should be noted, these politics of space face similar difficulties as that of historicism, of making a universal claim against universalism. These politics of space are in danger of universalizing these claims, of attempting to perform an absolute philosophical account for space, or even create a 'space' for space. In doing so, they risk creating a 'philosophical account' for themselves even as they reject the possibility. They are, regardless of intention, to some degree creating an overarching 'map' for these various forms. However, an awareness of the spatial politics of madness opens new possibilities for interrogating the politics of representation. We should approach Lefebvre and Harvey's divisions and topologies as fundamentally heuristic, as pragmatic configurations of space, that open up new ways of looking (even as we note their limitations).

Where does hallucination fit within these abstract varieties of space? Harvey pits his axis of space and time against Lefebvre's triad, so that different modes of apprehending space are put alongside its temporal qualities. In this chart of nine different categories, Harvey situates, 'visions, fantasies and phantasms' (Harvey 2005: 135) in the most abstracted set, as

‘representational’ and ‘relational’. But this situating of ‘visions’ quickly emerges as limited and problematic. For instance, many of those who hear voices or see visions can understand their experience in terms of absolute space, of emerging from inside or outside the head. Likewise, the visions of those who hallucinate frequently exhibit as conceptions, as ‘spaces of representation’. Far from easy to position, hallucination skirts across easy distinctions and topologies of space.

Emerging from this is the impossibility of pigeonholing madness into a particular spatial category. Madness is not a static object, to be analyzed in a stable environment. There is no ‘correct’ space for madness that needs to be unveiled or revealed. In this sense, it promotes Lefebvre’s own suspicion of providing confined spaces, as he notes witheringly that, ‘even illness and madness are supposed by some specialists to have their own peculiar space’ (Lefebvre 1991: 8). We should resist the notion of an ideal space of madness. In this sense, madness is a process, a mode, that overrides traditional borders of spatial arrangement.

Theatre offers a particular challenge in terms of conceiving space. It has become a truism that theatre is a spatial medium, as Gay McAuley has observed, ‘while theatre can indeed take place anywhere (outdoors, in the street, on the bare earth), the point is that it must take place somewhere’ (McAuley 2000: 3). Yet, this argument risks falling into the trap of which Lefebvre and Harvey caution; all things occur within space, there is no ‘outside space’, a play is no more in space than a book, than music, than sleep. Rather, I suggest theatre quickly demonstrates the limitations and difficulties of constructing topologies of space. Theatre offers a particular challenge to Lefebvre. Noting the complexity of the interplay between actor and audience, performance and text, the real and the fictional, Lefebvre suggests,

By such means of such theatrical interplay bodies are able to pass from a ‘real’, immediately experienced space (the pit, the stage) to a perceived space – a third space which is neither scenic or public. At once fictitious and real, this third space is classical theatrical space ... To the question of whether such a space is a representation of space or a representational space, the answer must be neither – and both. (Lefebvre 1991: 188)

Lefebvre is alert to the adaptability of theatre as a whole, and the limitations of his triad in approaching it. Beyond this, however, he fails to account for the diversity of theatre: that different productions will deploy differing spatial arrangements. Theatre reveals these various separations and delineations as contingent, and tests their rigidity. It is precisely this challenge to conventional borders that allows theatre to challenge existing spaces of madness, and to create new spatial arrangements entirely.

As a medium engaged with space, theatre can manipulate and alter palpable, intellectual and emotional spaces. In terms of madness, it can move beyond a simplistic representational space (whereby physical manifestation is direct substitution for mental experience) into a radical space, capable of creating new meanings, new ways of looking through madness. Theatre is engaged in creating new ways of seeing. Following Joanne Tompkins, I want to look at how theatre explores unknown territories, 'how theatre might continue to offer the necessary venue to "try things out for size"' (Tompkins 2014: 14).

The potential of hallucination in a theatrical setting is, therefore, not to provide a distinct space or setting. It is the malleability of the spatial politics of theatre that offers particular opportunities in its approach to the structures of hallucination. Rather than look for how theatre can produce an ideal 'space' of madness, I intend to observe the specific processes and particularities through which theatre conceptualizes (and potentially radicalizes) our understandings of madness. Rather than attempt to create a particular 'space' (whether utopia or heterotopia), I will examine the various strategies deployed by theatre to imagine new spatialities of madness.

Radical Spatialities and Radical Spaces

If we follow the spatial politics of theatre and hallucination as various processes and strategies, rather than the search for an ideal and singular space, how best to understand these shifts and workings? The question relates to where we engage with marginality. Do we maintain the significance and position of the marginal or seek to integrate it within the whole? I want to consider the means of challenging the exoticization and de-politicization of madness through

hallucinatory logics. This involves understanding what a meaningful re-politicization constitutes in spatial terms.

Lefebvre's own comments upon madness demonstrate a frustration with fetishizing the fringe. Attacking the work of Michel Foucault and Gilles Deleuze, he suggests these theorists produced an argument where what was conceived on the periphery remains peripheral. He depicts their theoretical writings as a calling to: 'enjoy yourselves! Don't work! We are all delinquents, sexually obsessed, schizophrenics' (Lefebvre 1976: 116). This results in a failure to attack the 'centre' (for Lefebvre, the structures of normalized everyday life) and central presumptions from which exploitation arises. An attack upon the centre is necessary for Lefebvre, or else critique, 'simply ends up with a lot of pin-prick operations which are separated from each other in time and space' (Lefebvre 1976: 116).

Lefebvre does not deny the importance of marginal concerns, but rather, wishes to tie them into questions of the centre. Understanding madness through its conceptual links (with the familial, socio-economic order, other identities) avoids the danger of perpetuating the marginalization of madness. But, Lefebvre's Marxism leads him into other difficulties, namely subsuming 'peripheral' concerns into a 'central' economic, capitalist system. Rather than regard the particular genealogies surrounding madness itself, madness is sublimated into another political concept. In this conceptual collapse, madness is reduced into illustrative metaphor.

Emerging from this is the necessity of a complicated spatiality, one that neither places madness on the periphery, nor submerges it underneath a prioritized political centre. Rather, I want to consider a porous relationship, that neither essentializes madness into its own discreet space nor ameliorates it under the weight of another concept. Rather, madness is both effected and effecting, it occurs along socio-political lines and likewise has an impact upon and alters these other political concerns. This includes structures of the family, of the economy, and other identities. Rather than see madness isolated – as either defined or ignored – we can see it situated amongst a wider political net.

How can theatre approach this difficult spatiality, to puncture hallucination as a model without rendering madness a political metaphor? The spatial mechanisms that theatre can use to

achieve this are various. In part, through manipulating the audiences' experiences of material and palpable space, theatre can variously divide and fracture the stage, obscure the spectators' vision, play with the position of the audience. Theatre can destabilize our architectures of hallucination, where madness is on the slide and elusive. It is unsure who is imagining what, the hallucination spreads from one 'mad' character to another who is 'sane', psychosis is revealed to be engaged within (and indistinguishable from) gritty 'social reality'.

All three of these plays also engage with genre – the traditional family drama, the mythological and fantastical fairy-tale, the gritty Royal-Court council-estate play – and interrogate their presumptions on the path to rethinking madness. Genre is itself a kind of space, theories of genre often place themselves upon and within space, as Desirée Henderson notes, 'from Bakhtin's "chronotope" to Moretti's map of the novel to Dimock's description of genres as "recursive landscapes," the study of genre has long been influenced by the methodologies for representing and categorizing space' (Henderson 2011: 12). Through the implosion of these calcified spaces, these plays are able to conceive new ones.

Obviously, not all plays that engage with hallucination are inherently radical, progressive, or provide a site of resistance. The particular plays examined in this chapter are not crystalline in their radicalism, they do not provide perfect examples of resistance. I do not claim that the creators of these works were necessarily consciously engaged in creating new spatiality of resistance. Rather, in order to understand how a radical politics of space and madness can be developed through theatre, I am questioning how particular plays have negotiated with hallucination (in both regressive and progressive aspects), and how this might lead us to imagine alternative spatialities. Our cultural idioms, our off-hand phrases, our political imaginations all seek to confine madness into its own private space. Society imposes a logic of hallucination, madness is defined as an obstruction and obfuscation of reality. Theatre's own deep engagement with space, offers particular possibilities (and dangers) in its entanglement with the spatiality of mad experience. This chapter will concern how these particular plays account for mad experience, to what extent they destabilize the logic of hallucination, and how they account for the intersections of madness with questions of family, globalization, and intersectionality.

Uncertain Meanings and the Family in *The Eradication of Schizophrenia in Western Lapland*

If theatre wishes to create new spaces, one of the most obvious tools at its disposal is the manipulation of material space and the stage itself. The spatial configurations and ambitions of *The Eradication of Schizophrenia in Western Lapland* by Ridiculusmus are quickly made evident. Having entered through one of the two allocated entrances, I can see the stage (and the audience) has been divided into two, by a long paper partition. This architectural shift leads to an unconventional theatrical experience. I watch an ordinary domestic scene between a mother and her two sons, Rupert and Richard, squabbling quietly about what to eat for dinner. The mother appears to be on medication. They occasionally refer to an absent father. At the same time, however, I hear another scene occurring that I cannot see. I hear another audience, a different audience that nevertheless exists in the same material space, laughing at jokes I only partially hear. Actors from the scene I watch leave my stage, only to be heard in the other. Lines overheard from the other scene at different points appear to compliment or interrupt the domestic drama. At one point, a completely unknown actor from the other scene wanders into the one I am watching, the characters are confused, interpretation jagged.

After the interval, the same scenes are played again, but with the audiences having swapped their positions. I am now watching a psychiatrist. He treats Richard from the domestic scene (in the domestic scene he had been irritable but not demonstrating signs of psychosis, here he has visions of grandeur, claims to be the writer of Nabokov's novels, the child of Adolf Hitler). At points he directly addresses the audience. The domestic scene, being replayed on the other side of the screen distracts me. But the distraction is different from before, it is one of familiarity, a recollection of experiences immediately past. It compels me to combine the meaning of both scenes, what I see with what I've seen before.

Eventually, as the scenes both finish their repeat, the mother strips away the partition. Many members of the audience stare at one another, an audience that sees itself. The cast begin to play a new scene. The psychiatrist has become the absent father. The mother is now the

stepmother. The scene ends with the offstage death of Rupert, a car accident after a small squabble. But, in no way is an easy and complete meaning finally established.

This description of the *Eradication of Schizophrenia in Western Lapland* reflects some of the difficulties in addressing the play. Short plot descriptions seem impossible; the play deliberately plays upon uncertainties. Likewise, the order of experience fundamentally adjusts your response to each scene. The domestic scene provides us with a sequence of banalities and bickering that resist any major significance or meaning. The psychiatric scene more eagerly and overtly raises the intellectual stimuli of the play, quoting R.D. Laing, and mentioning the Open Dialogue treatment used in Finland, and its effect of 'eradicating' schizophrenia. The order with which we understand and receive these aspects fundamentally changes our intellectual and emotional response.

Moreover, different performances of the production had different layouts according to where they were sited. In a performance at the Dissection Room in Summerhall, the audience are positioned opposite one another, the performers sandwiched between the two sides. In contrast, the performance I saw at the Battersea Arts Centre (BAC) placed the divided audience alongside one another, a single block of seating cut across by the screen. Such simple deviations lead to differing effects and affects. At the BAC, the distraction of noise came from the side, rather than 'behind' the scene being watched; the soundscape of the production did not prioritize one scene over the other, laughter from the 'other' audience distracted and obstructed my reception. The tearing down of the partition in Summerhall leads to an appreciation of a further, literal 'depth', the audience are compelled to look at one another past the performers, but they remain divided. In contrast, removing the partition at the BAC restored the divided audience into a relatively traditional, single block.

Despite these variations, of experience and architecture, we can still unravel some of the consequences of this adjustment of space. Ridiculusmus has structured and divided material space, in a manner that fundamentally shifts how the audience experiences the drama and engages in meaning making. The action I see at any single point is necessarily entangled with the action I cannot see, but can hear. This is partly though engineered moments, when the

action across the two spaces becomes blurred; the psychiatrist and the mother ask the same question simultaneously, and Richard answers both. But also, it is accidental, when an audience's laughter on one side impinges upon the impressions of the other.

Whilst the space may begin to change our mode of reception, the political consequences are not immediately obvious. The unconventional arrangement does not necessitate radicalism. That it has innovated in terms of palpable, material space does not guarantee it has provided a new space in representational, social or emotive senses. It could be a 'gimmick', an innovation purely calculated for market appeal, a material space primarily concerned with itself, rather than any political purpose. Without looking more carefully at the other spatial politics occurring within the piece, how they encourage to use this material space, it is difficult to ascertain whether the production offer a new mode of apprehending madness, or it is merely a sensationalized staging covering a perpetuation of hegemony.

Open Dialogue, Therapy, Representation

The Eradication of Schizophrenia in Western Lapland emerges from a recent rise of Open Dialogue as an alternative mode of treatment for schizophrenia. The work stemmed from various workshops and character exercises performed with practitioners of Open Dialogue. They took the characters developed for the show and took them through Open Dialogue therapy, creating the piece alongside this therapeutic process. In situating the show as emerging from Open Dialogue, the show is centred around one of the recent attempts to challenge and break-apart the dominance of medication treatment model. Even if some of the claims of Open Dialogue have sometimes been excessive of the reality of its application (many of its users still also use medication, for example), nevertheless it has been hailed as an alternative to traditional psychiatric models, as a more 'humane' mode of treatment of psychosis. The production was made at a time of increased intellectual interest in Open Dialogue, since then the model has begun to spread; notably, in Britain, pilot schemes have begun working through the NHS, guided by Finnish practitioners. Whilst this chapter is not concerned in the varying efficacies of treatment per se, concerned rather with spatial logics surrounding representations of hallucination and mad experience, in this case, the play's

emergence from a mode of treatment regarded by many as unorthodox and sometimes celebrated by those positioning themselves as mental health activists, lends a context to the piece.

It is positioned as the first part of a trilogy by Ridiculusmus concerned with mental health. For the second part of this trilogy, they have developed *Give Me Your Love*, exploring the therapeutic effects of MDMA in treating Post-Traumatic Stress Disorder; the next play will involve the inclusion of grief into psychiatric discourse, and the implications of this for the expansion of the pharmaceutical industry. As a small company, Ridiculusmus often tour their works across the country, their projects will naturally alter and shift over time and according to the particularities of the stage. Whilst I shall consider the variety of staging through pictures, reviews and short videos of other versions, this analysis emerges from the version of *The Eradication of Schizophrenia in Western Lapland* I watched at the Battersea Arts Centre in 2015.

Ridiculusmus have themselves spoken and written at length about the genesis of the play and what they have sought to achieve. Crucially, they relate the play's relationship to Open Dialogue. Open Dialogue is a technique developed in Finland by Jaako Seikkula, inspired by the work of Tom Anderson and the dialogism of Mikael Bakhtin. The theory adopts seven core principles as: immediate response, social networks, flexibility and mobility, guaranteeing responsibility, psychological continuity, tolerance of uncertainty and dialogism (Seikkula et al 2003: 165-166). Dialogism is premised upon the notion that, 'all human life is inherently relational and thus dialogical' (Brown 2012: 270). Open Dialogue emphasizes the patient as existing in a context or network; rather than attempt to isolate the patient and rely upon the identification of symptoms, this technique involves group therapy, including large numbers of family members, creating a self-reflective cacophony of voices, in which, 'everyone has the chance to speak, to listen to others in the meeting and to listen to their own utterances' (Brown 2012: 271). The therapy attempts to be non-hierarchical, the therapist avoids prescribing solutions or meanings. Open Dialogue emphasizes that meaning-making, regardless of content, should be encouraged and not policed.

The Eradication of Schizophrenia in Western Lapland was formed in the company's response to Open Dialogue. The company agreed to take part in an improvised, in-character Open Dialogue session at a conference; David Woods would later note the exposure, 'had a profound, transformative influence on the play and our practice in general' (Woods 2015: 36). However, this is not to suggest the play was intended to be an expression or demonstration of the Open Dialogue approach. Indeed, Woods explicitly rejects this possibility, noting that, 'Such "info theatre" is not to our tastes. For us, it encourages a lazy consumerism on the part of the audience that won't lead to genuine learning' (Woods 2015: 138).

Though not an expression or representation of Open Dialogue, Ridiculusmus nevertheless conceive of their play in parallel terms. Woods suggests that their play offers a different notion of the therapeutic, that they, through a, 'minimalist articulation of therapeutic breakthrough, attempt to allow the audience to come to the work with their own narratives, perhaps with traumas that are unresolved' (Woods 2015: 38). The hermeneutics of the play, coupled with its underwriting, allows for the audience to undergo a psychological revelation, a therapeutic process, a curing. Our process of 'reading' becomes entangled with our own psychological profiles.

These ambitious therapeutic claims for the production are laden with certain dangerous assumptions. Whilst we may follow Bobby Baker's claim that 'all art is therapy isn't it?' (Baker 2013: ix), that creation is always a form of process, Woods appears to take this further, suggesting that the production can, in some way, 'heal' the audience, or address past psychological wounds. He is suggesting the production is a space through which people can undergo a therapeutic experience, acting as a healing process.

It is this claim, I would suggest, that leads to the more troubling claims Ridiculusmus has concerning their work. They claim that the effect of the divided staging is to take the audience through the experience of auditory hallucination. In an interview with *The Guardian*, David Woods claims,

It's as if you're having an auditory hallucination ... Initially it'll be overwhelming, chaotic. Then the audience will go out of the theatre, change sides. Slowly the voices will settle

into place. In a way, it's the same with schizophrenia. You don't get cured, but you can recover. (Woods in Barnett 2014: np)

This is not an isolated suggestion. Elsewhere, Woods has noted, 'we felt gave some physical and experiential experience of psychosis to a nonpsychotic audience' (Woods 2015: 36). This suggests an equivalence of aesthetic interpretation with involuntary auditory hallucination. Moreover, this relies on the presumption that no members of the audience have previously experienced psychosis.

I do not wish to suggest that these claims are something to be ignored. Through the staging of the production and the creators' claims, *The Eradication of Schizophrenia in Western Lapland* reifies logics of hallucination. However, whilst acknowledging that to some degree the play indulges in an exoticized 'tasting' of mad experience, I suggest that the play simultaneously suggests a more politically charged mode of meaning making, that destabilizes these structures of hallucination. I want to suggest the play's response and interrogation of Open Dialogue manifests through the theory's latent political radicalism: the acknowledgement and encouragement of uncertainty in meaning-making, and the integration of family perspectives and psychiatry.

Tolerating Uncertainty

The process of 'reading', to attempt to make a stable sense out of the latticed meanings of *The Eradication of Schizophrenia in Western Lapland*, quickly proves difficult. The space is layered with a confusion of perspectives and gazes, amongst which the door between the two stages becomes a focal point. McAuley has persuasively argued that doors play a crucial part in our spatial constructions of theatre, that the door, 'represents the relationship between the here and beyond' (McAuley 2000: 87). Doors denote the boundaries between inside and out, onstage and off, the liminal distinction between interiority and exteriority. As I focus upon the door from either side, process the coming and goings of actors, hear sound travel across it, or even see a small glimpse of an alternative scene through it, the complexities of the production manifest themselves.

Most obviously, neither side is privileged. If a door is a divide between inside and outside, both sides are variously experienced as both. The order of rooms, the chronology of our experiences is decided through lottery rather than design. As a result, neither scene is prioritized as the real to the other's imaginary, as the external to the interior. To suggest the domestic scene is a hallucination of a present-day psychiatric ward (or the reverse) is unsatisfactory. Whilst Richard seems the central figure, the only character who straddles between scenes maintaining his own (if altered) identity, it is uncertain if he is the individual hallucinating. The mother herself is briefly able to 'see' the construction of the space, 'You know what it's like. Today I feel really confused. There's a lot of people moving about' (Haynes and Woods 2014: 22).

Moreover, the bodies of the actors, as they wander from stage-to-stage, are in no way stable. We feel and experience space through bodies, both of others and our own. These bodies resist a stable semiotics. Rupert, the younger brother is also a silent, unnamed patient in the psychiatrist's chair. The mother becomes the stepmother. The psychiatrist is associated with the father. If the text at least provides us with some denomination of when one is the other, the performance resists such easy delimitation. The actors wear nothing different shifting between characters, their acting styles similar; far from establishing difference, the performances seek to obscure the passing from one 'character' to the next.

Finally, the gaze of the audience becomes the object of its own analysis. Are we ourselves supposed to be engaged in some form of hallucination? The psychiatrist directly addresses the audience as a patient, mocking the silence of the audience as un-cooperation: 'You seem to have a rather fanciful picture of psychotherapy. It involves you sitting there, smiling sometimes, saying nothing, or very little, and me sitting here watching you, wondering what you're thinking' (Haynes and Woods 2014: 46). With this direct address, the psychiatrist ushers in the audience into the economy of perspective laid across the play. The layering of meanings becomes impenetrable underneath the abundance of perspective. Quickly, the politics of experience recedes into an infinite regress. The attempts to declaim the various configurations and tessellations of meaning are openly mocked within the text. The psychiatrist, quoting from R.D. Laing's *The Politics of Experience*, attempts to delimit the possibilities that take place when we attempt to understand or know one another. The statements attempt to draw circular lines

of alterity and comprehensibility, 'I do not experience your experience but I experience you as experiencing. I experience myself as experienced by you' (Haynes and Woods 2014: 52). He quickly becomes confused in his alterations between interiority and exteriority, unsure of where to place himself. Failing at verbal communication, he attempts to draw a diagram, to extrapolate a geometry behind these experiential politics. This also fails. We cannot draw any frame, there is no stepping outside experience, we have to tolerate uncertainty.

The various complexities of interiorities, exteriorities, bodies, perspectives are not a test of the audience's perspicacity, or a narrative knot that is to be gradually unwoven. This is a labyrinth without a centre, of both perspective and understanding. Meaning can be briefly and incoherently established, but the physical construction of the play, the blocking of the actor's movements, the interplaying elliptical dialogue, all seek to advance and enhance ambiguities, to proliferate meanings rather than systematize them into a clear apprehensible signified.

Maddy Costa expresses the potential jubilation of experiencing and embracing this uncertainty, claiming, 'there's something electrifying yet oddly reassuring about this experience: what does it matter if nothing makes sense' (Costa 2014: np). Following the various strands of narrative that refuse to cohere is not possible. This is not merely space as mode of intellectual process; it is space as profoundly felt. Ridiculusmus uses the innovations of their staging in order to cultivate this uncertainty. These multi-pronged assaults on certainty in *The Eradication of Schizophrenia in Western Lapland* shift us away from a space concerned with representation. With uncertainty, there can be no representation, madness cannot be laid claim to, be pinned down. Meanings are created, links are drawn, but without finality or solution.

The Family Show

If *The Eradication of Schizophrenia in Western Lapland* compels us to continually make meanings, but without ever settling into a stable narrative, the meanings produced are always entangled with the relationship between family and psychiatry. The two scenes alternatively seen and heard are that of the domestic and the psychiatric. Whilst the play may not settle into an easily established story, nevertheless, the audience are compelled to put the domestic and psychiatric alongside one another, to understand them in tandem.

The place of the family, and its relationship to madness, is fraught in psychiatric history. The pathologization of madness into mental illness revolves around an isolation of the individual. The asylum sunders the domestic and the psychiatric, separating the mad person from the family. This bifurcation has been seen by some as an unhelpful intervention. For the likes of R. D. Laing, the structural complexities of schizophrenia can only be comprehended through engagement with the family. In *Sanity, Madness and the Family*, Laing compiles a series of case files, interviewing the entire family of those exhibiting psychosis. In the competing truth claims and disclosures, a better comprehension of schizophrenia can appear. For Laing, the family is the core unit of socialization, the mechanism through which we learn what is acceptable behaviour, 'getting each new recruit to the human race to behave and experience in substantially the same way as those who already got here' (Laing 1970: 43). Madness and psychosis can only be understood through these family structures, slowly teasing out the politics of speech and secrets.

Open Dialogue likewise places family at the centre of therapy. But, in contrast to Laing, it is less concerned with extrapolating the 'truth' or actuality of schizophrenia. Rather, the mad person exists relationally, so therapy should reflect that relationality. The family is encouraged to attend therapy and Open Dialogue sessions with the person being treated. The voice of the patient is prioritized, but situated amongst the cacophony of alternative, conflicting and alternating family perspectives.

Ridiculusmus's interest in madness and the family predates their experiences with Open Dialogue; the conception of the production was always entangled with the relationship between family and psychiatry. The unpicking of this relationship takes form through an interrogation of 'family drama'. The play attempts to poke at and unveil the precepts behind the genre. Indeed, an earlier title of the play was 'The Family Drama' (Woods 2015: 36). The family drama is a well-established genre in realism, emerging from figures such as Anton Chekhov and Eugene O'Neill, it often plays upon extremities of mental distress emerging from or leading to dysfunctional family structures. It usually revolves around increasing loud and dramatic conflicts, and the gradual unveiling of destructive secrets or revelations.

Woods notes how Open Dialogue attempts to dissipate tension, in sharp contrast to theatre, which, 'generally aspires to the opposite of this; tension is ratcheted to a high level and is maintained for as long as is bearable' (Woods 2015: 36). He explicitly draws a comparison to contemporary 'in-yer-face' theatre, and the tendency for the climatic act of the family drama where, 'big things are communicated in big moments at big gatherings with great intensity' (Woods 2015: 37). He envisions *The Eradication of Schizophrenia in Western Lapland*, whilst drawing upon the genre's concern with family, as a potential site to avoid such dramatic moments, to move away from the classic tropes and cliché.

Ridiculusmus is still drawn to the gravitational moment and orientates around family trauma. But this is a quiet devastation: the absence of the mother. The absence is not caused by some dramatic event, or sensational truth. The audience does not see the moment she leaves, it is only mentioned not shown, simply the consequence of her psychosis. It deliberately undermines the structure of a family drama, there is no emotional climax, nor a scene where secrets are revealed and emotional truths are spoken. The quiet catastrophe reflects the complexities of the relationship between family and the psychiatric.

The play uses its physical staging to play upon these complexities in the connections between madness and family. The staging literally pits family and psychiatry against one another, competing for a voice. The borders, however, quickly become porous. The psychiatrist stands in for the absent father, his divorce problems parallel the family's fragmentation, his open question to Richard: 'You're wondering if your Dad's here?' (Haynes and Woods 2014: 54). The mother of the domestic scene is apparently placed somewhere in the psychiatric ward. Simplistic answers to the relationship are quietly mocked, as Richard suggests the mother has made him ill as well, the psychiatrist responds, 'it's the gene that makes you flip' (Haynes and Woods 2014: 58), a purely biomedical explanation that set alongside the domestic upheaval of the neighbouring scene appears hopelessly simplistic. As they interact, from an acceptance of their interplay emerges an understanding we cannot isolate understandings of madness (and the psychiatrist scene) from the familial (and the domestic scene).

The doubled staging likewise helps emphasize the doubled relationship that occurs. Extremities of mental distress or joy (and the failure to provide adequate support, or even the tendency to penalize mad persons, by the state) are felt through families and social structures. Likewise, family trauma, or upbringing, are a core component in approaching madness; madness reveals itself through family structures. This is not as simple as cause and effect; rather, madness is both experienced and apprehended through the primary social structure of the family. Psychiatric power attempts to isolate madness, to pathologize it into a discreet bio-medical manifestation, it fails to situate it in social structures.

In the eventual ripping and destruction of the partition, Ridiculusmus renounce the possibility of separating the domestic and the psychiatric, one cannot be understood apart from the other. In a Chorus from the play-text titled 'Four Voices in Darkness' (that would eventually be cut from the production), this desire for integration is explicitly stated: 'We want to open up the boundaries / And integrate family perspectives / Into Psychotherapy' (Haynes and Woods 2014: 9). Understanding can only be achieved through their integration and their relationality. This perhaps risks the abandonment of uncertainty, that the dissolution of the partition and coalescence of the performance into the singular, could be seen as a restoration to coherent meanings. Put simply, the domestic and psychiatric have finally been reintegrated, and comprehension is finally possible. Generously, we could frame this shift as less the abandonment of uncertainty, than its acceptance. The space is divided even as the physical division has been removed. Pluralism and polyvocality are still present, but no longer require the dividing construction of physical space.

Hallucination: Family and Madness Coming Together

In what ways does *The Eradication of Schizophrenia in Western Lapland* entangle itself with hallucination, and to what extent does it resist some of its regressive logics? It must be acknowledged that the play, in certain forms, engages within problematic understandings of hallucination. The structure of material space, the experience engendered in the audience, is offered as a means to 'taste' auditory hallucination. This interpretation is encouraged by the creators, that the piece somehow replicates mad experience for the consumption of the

audience. This is further framed in therapeutic terms, that the aesthetic experience is capable of some form of healing. In this sense, the play perpetuates hegemonic structures.

Despite this framing, I argue the play begins to burst and break away from this architecture. The doubled-space is used to cultivate uncertainty, to engage in a meaning-making through multiple voices rather than representational models. In interrogating the spatial logic underpinning *The Eradication of Schizophrenia in Western Lapland*, alternative spatialities of resistance to the traditional hallucinatory logic emerge. If hallucination operates upon an inner-outer binomial distinction (simultaneously essentializing and depoliticizing madness), *The Eradication of Schizophrenia in Western Lapland* works to destabilize these distinctions, to accommodate us with uncertainty. Neither scene is privileged as 'reality', nor as 'hallucination', even as characters interact and change between the two spaces.

This architecture, in turn, allows the play to pit the domestic against the psychiatric. Put together, the meanings the audience are compelled to create are always negotiations between the domestic and the psychiatric, as neither scene provides a narrative 'solution' to what is watched. Madness is touched upon, not within itself, but through these negotiations with the familial and continual (and never finalized) productions of meaning. Madness is regarded relationally, rather than in isolation; we can only understand madness in terms of its relation to the family structures. In this sense, it follows some of the embedded political ideals of open-dialogue, that identity is fundamentally relational and inseparable from the social links surrounding the mad person.

Through engaging with *The Eradication of Schizophrenia in Western Lapland*, new spatialities of thinking though madness can be imagined. This is a spatiality that re-politicizes madness, that neither remainder madness to an exotic and private space, nor renders madness defined purely in the sense of another concept. It is this difficult playing between these two possibilities, of a porous relationality that neither essentializes nor reduces madness, upon which *The Eradication of Schizophrenia in Western Lapland* plays. Flourishing its uncertainties, the play engages with the relationship between family and madness, insisting on their deep

entanglement, but resisting simplistic aetiological accounts of madness as purely a manifestation of family dysfunction.

It is this particular form of re-politicisation of madness, using its spatial architecture of proliferating uncertainties, through which the play offers a more radical apprehension of mad experience. If hallucination is a process by which we de-politicize madness, contain it into a private and discernible space, *The Eradication of Schizophrenia in Western Lapland* introduces a potential spatiality that re-politicizes madness, offers a more nuanced place of madness in the 'real', rather than simply sectioning away mad experience. If space is that through which society thinks and conceives, *The Eradication of Schizophrenia in Western Lapland* begins to point to new ways of thinking madness that evades easy essentialisms or simplistic political overlays.

Away with the Fairies: Globalization, Madness and the Fairytale in *The Skriker*

In Caryl Churchill's *The Skriker*, the titular character appears to chase after the sisters Lily and Josie, seeking to entice them into her world and wishes, to their destruction. Lily and Josie alternatively both yearn for her and reject her. Their wishes to the Skriker are frequently simply passing the Skriker from one to the other: 'I wish you'd have her instead of me' (Churchill 1998b: 251) or 'I wish she'd come and help me then' (Churchill 1998b: 258). They reject the Skriker, but following, immediately yearn and desire her again. As Josie expresses, 'when you've lost her you want her back. Because you can see what she can do' (Churchill 1998b: 268). The play ends with the Skriker victorious, claiming Lily, and flinging her into a desolate future.

Who is the Skriker, what her function in the play, and what does she represent? As a character she appears in almost every scene, but evades easy categorization, transmogrifying from old woman to small abandoned child to American yuppie to Fairy Queen of the underworld. Is the Skriker meant to be the psychotic delusions of Lily and Josie? Or are we meant to take the mythological logic of the play seriously?

The Skriker pushes and stretches what we frame as 'hallucinatory'. It evades easy distinctions. There is no singular person who 'hallucinates', who acts as a gateway for the audience into the

state of psychosis (such as Lisa in *The Wonderful World of Dissocia*). The Skriker switches between Josie and Lily, seducing one and then the other. Josie's mental state and history suggests the Skriker plays a role in psychosis; Josie is first seen as a patient in a mental hospital, it is quickly established that she has killed her own daughter. But the Skriker's seduction of the comparatively 'stable' Lily conflicts with this interpretation. The Skriker draws upon Josie's instability, upon her desperation, culminating in Josie's descent into the underworld. In contrast, the seduction of Lily draws upon material desires; she's gifted a hiccup of money.

Is the fantasy world an illustration, a mode of understanding hallucination, or is it simply mythical imagery without representative purpose? Harpin notes that the Skriker exists as both within the mythological logic of the play and as manifestation of 'real' psychosis. She draws upon a scene where Josie accuses Lily's baby of being a changeling, suggesting the scene is, 'a tightrope dance between mythology and realism' (Harpin 2014: 206). Is the changeling a psychotic delusion or a genuine mythological creature within the play? As Lily cries out to the Skriker, 'I wish Josie wasn't mad' (Churchill 1998b: 278), she frames her sister's fantastical experiences as delusional whilst simultaneously investing into mythology of the wish. As Harpin notes, the wish, 'confirms the real fact of illness in the same instant as it ushers the register of myth back on stage' (Harpin 2014: 207). Through this fundamental ambiguity, *The Skriker* ushers in the possibility of hallucination, only to render it fundamentally undecidable. In this manner, *The Skriker* evades the easy exoticization of madness. *The Skriker* never indulges in an easy inner-outer dialectic of hallucination. In *The Skriker*, the fairytale creatures are simultaneously real and not real, touching between the psychological and the material.

The première of *The Skriker*, at the National Theatre, arrived in 1994, in the petering days of the Conservative government. Churchill had shown interest in the interlacing of gender and late-capitalism throughout the 1970s and 1980s, whether housing markets in *Owners* or interrogations from a feminist perspective in *Top Girls*. But, in 1994, the frisson of neo-liberal reform under the premiership of Margaret Thatcher had withered to the grey status quo of John Major; the jubilation of capital in a play such as Churchill's own *Serious Money* in 1988 had given way to a more wearied perspective of a now Hayekian landscape. *The Skriker* revels and reveals in this desiccated landscape.

My own response and understanding of the play has emerged from watching the production at the Manchester Royal Exchange in 2015. Inevitably, it reverberated to a different political landscape. It followed the rise of austerity Britain following the economic crash of 2008, the unexpected Conservative win at the general election and the sudden rise of the radical Left in Labour in the form of the candidacy of Jeremy Corbyn. Centrist assumptions that had governed political motions of Britain and global politics were being uprooted. Likewise, its position in Manchester shifted the tones and themes of the play; Churchill's play is firmly located in the fairytales of Northern England, its plot involves the journeying of northern working-class women to a metropolitan London. In an environment where the city and conservatism had re-established their cultural and economic dominance, this was a play placed to talk back to the ossified power structures of neoliberalism.

Fairy of Nature or Madness: A Confusion of Meanings

If one difficulty of *The Skriker* is its simultaneous embrace and rejection between the world as phantasm or as real, then this has likewise led to the difficulty of its thematic flexibility, between madness and nature. The damage of the Skriker seems to be both personal and global, of both psychosis and capitalism. The Skriker is another name for 'The Black Dog', a ghostly hound that famously became a colloquialism for depression. She ghosts Josie in a psychiatric ward. Yet, she also associates with globalization, in both ecological and economic senses. *The Skriker* alludes to ecological disaster, as its titular character even appears to draw power from it: 'Earthquakes. Volcanoes. Drought. Apocalyptic meteorological phenomena ... Some people might feel concerned about that. But it makes me feel important' (Churchill 1998b: 282-3). She frequently manifests herself in the symptoms of late-capitalism, of both the emerging underclass and privileged few, as the parentless desperate young child and as the business woman. Following Elaine Aston, 'but always in relations that are hierarchical, vampiric and never mutual' (Aston 2003: 31); Josie and Lily are drained by their encounters with a late-capitalist world.

The critical reception to the 1994 production reflected a discomfort and bemusement with such unstable thematic and symbolic theatre. This has shifted, in reviews for the 2015 production in

the Royal Exchange in Manchester, to an attempt to section it away to a particular theme or topic. This is perhaps most evidently exposed in Michael Billington's review, as he notes how the 1994 production was 'regarded as bafflingly obscure' but that the 2015 interpretation, 'offers, amongst other things, a vision of climate change we can all understand' (Billington 2015: np). He clings upon the ecological as its thematic unit. Susanna Clapp notes its staunchly feminist concerns, noting, 'Churchill's play is almost entirely female. The voice of its ancient Cassandra is dominant' (Clapp 2015: np), whilst Claire Allfree returns to its concern with madness, that the play skewers distinctions, 'between the real and the imagined, sanity and madness, consciousness and the subconscious' (Allfree 2015: np). This search for a singular 'subject' is, according to Paul Vallely, even reflected in the marketing, where the play is depicted as, 'an apocalyptic metaphor for the revenge of nature over human despoliation of the earth' (Vallely 2015: np). But Vallely considers this account 'too limited an account of this dark piece' (Vallely 2015: np), the play bursts outside its own publicity, unable to be contained into such a static interpretation.

The Skriker invites meanings, only to resist their stability. It flirts and flits between different modes of interpretation. Graham Wolfe (2011), pushing this further, suggests that *The Skriker* attempts to push against our tendencies for symbolic order and for clear representational paths. Ann Wilson suggests this resistance to an easy representational or symbolic coda is politically charged, that 'Churchill's refusal to allow the audience access to a position of interpretive "mastery" over *The Skriker* is an act of political resistance (Wilson 1998: 187).

The Skriker, as a thematically febrile play, carves out an ambiguous space in which to conceive of madness. Yet, this ambiguity fosters certain dangers. Ambiguity also can grant a looseness of meaning. From this, the play's engagement with madness can be reduced to the functional and illustrative, whereby we view madness only as a consequence of the globalized forces of the play.

Critical response has commonly focused upon the critique of globalization that permeates the play. *The Skriker* is analogous to capitalism in her simultaneous ubiquity and sickness. Candice Amich extends this analysis to the opening monologue; in the rush and confusion of syntax,

'words and phrases overlap each other, creating a feverish, claustrophobic effect' (Amich 2007: 397). This is extended by Peake's vocal declamation in the 2015 production, setting an irregular pulse, she rushes through phrases only to elongate others. The monologue looks forward, to Josie's murder of her baby, 'I've been a hairy here he is changeling' (Churchill 1998b: 244) and her entrapment in the fairy underworld from her consumption of the underworld's food, 'eating a plum in the enchanted orchard, cherry orchid, chanted orchestra was my undoing' (Churchill 1998b: 245); in the anticipation of the future narrative, 'she plunges us into the future of the play and then retreats into the action' (Amich 2007: 397). Through the opening monologue's playful attitude towards time, it prepares us for the exposure of dislocated identities and inconsistent time frames that are consequential of a globalized economy.

This understanding frames the madness as a consequence of capitalism; broken subjectivities emerge from late capitalism's dysfunction, fractured political structures have led to fragmented minds. Under this interpretation, madness is either an illustrative metaphor for broken subjectivities or simply a consequence of late capitalism's excesses. For Elin Diamond, *The Skriker* in particular is playing upon the fragmentation of identity, in particular distortion of time and space that emerges from the late-capitalist globalization. For Diamond, the Skriker is engaged in the formation of neo-liberal identities, 'manipulating the desire of Josie and Lily and turning them into consumers of fairy glamour' (Diamond 2006: 483). The distortion of time throughout the play reflects the distortion of late capitalism upon vulnerable subjectivities. Madness is perceived as an object, a consequence of the play's concern with globalization.

Whilst these accounts provide a compelling account of the psychological effects of capitalism, for Harpin, the focus upon the politics of globalization, 'has been largely at the expense of a sustained engagement with the drama's relationship to madness and, in particular, psychosis and schizophrenia' (Harpin 2014: 201). Following the opening monologue, Harpin¹² suggests, rather than purely the troubled temporal shifts of late capitalism, that, 'Churchill's sculpting of the Skriker's language is precisely engaged with the apparently distended logic of psychotic

¹² It should be noted, that Harpin troubles previous descriptions of the opening monologue as 'schizophrenic' (see Cousin 1998, Wolf 1996) without an in-depth analysis. Often, the term 'schizophrenic' is problematically used as a shorthand for obscure, unclear or nonsensical. Harpin seeks to resist this.

thought disorder' (Harpin 2014: 205). Following this understanding of the Skriker as a phantom of mad experience, in the 2015 production, towards the end of the monologue the ensemble began to convulse, imitative of electro-convulsive treatment, or an epileptic fit. The Skriker's monologue, in its seeming randomness that opens upon study to pregnant and playful meaning, is offering a new means of 'touching' madness, to reflect upon madness within itself.

In these various responses, the Skriker's engagement in the politics of both globalization and madness is evident. Whilst Amich and Diamond's analysis perceptively note the psychological impact of late-capitalism, they risk not engaging with the play's politics of madness, of rendering madness into a metaphor for the distortions of globalizations. Yet, to ignore the play's engagement with globalization risks an attention to madness 'itself', as object, risking the essentialization of mad experience. I want to suggest that, rather than either essentializing madness or rendering it a redundant metaphor, *The Skriker* cultivates a porous spatiality than can incorporate both without a conceptual collapse. If these two aspects of the play, of madness and globalization, interact in a way that exceeds simply a causal or a metaphorical mode, then we need to explore how this achieved. In particular, to examine *The Skriker's* engagement with genre and the fairytale

Far, Far, Away: Playing with the Fairytale

Churchill herself describes The Skriker as an ancient fairy, 'a shapeshifter and a death portent, ancient and damaged' (Churchill 1998b: 243). This notion of damage is particularly important to the scholarly attempts to understand *The Skriker*; Matt Wolf quotes Churchill, in one of her few commentaries on the play, that it concerns, 'damage to nature and damage to people' (Churchill in Wolf 1996: np). This concern with the global, the personal and their interplay, is perhaps one of the difficulties of the play; it shifts from the intense personal catastrophe of post-natal psychosis to a wider globalized chaos. The Skriker herself is both damaged and damaging; her language is broken and fragmented, yet throughout the play she parasitically draws upon Lily and Josie, seeking their destruction.

In this examination of 'damage', of both the 'person' and the 'world', divisions between the material and the psychological have to be disrupted. Both madness and capitalism operate

between these two different levels, on both the person and the global. Yet, if *The Skriker* achieves a new spatiality, that evades the divide between material and psychological, how is this achieved?

The Skriker plays up the history and cultural tropes of the fairytale genre. In particular, the figure of the Skriker herself opens up the history of and various constructions of the fairy. In the beginning of the 2015 production, as in the marketing, she appears with heavy eyeshadow and a punk hairstyle, resembling a dark, contemporary gothic fairy, something emerging from Mervyn Peake or Angela Carter. Later, seducing Lily to Josie's protest, she almost seems like a faux-prettified plum fairy, mockingly coquettish, as with our contemporary stereotypes of the Edwardian fairy, as a Tinkerbell. Finally, in the underworld, dressed in the famous wig and gown of Elizabeth the First, as the Faerie Queen, Gloriana, or Titania. In playing upon the variations of the 'fairy' (notably drawing upon notions of femininity and their deconstruction), we're reminded of the particular theatrical history of the fairy, whether in the games of the sexual sprites of *A Midsummer's Night's Dream* and Puck's request for applause, or the life-sustaining clapping in *Peter Pan*.

The Skriker is, throughout the play, engaged in questions of the fairytale genre. It openly identifies and connects itself to the Northern folktale and fairytale tradition; the various creatures that litter the otherwise domestic scenes (including Rawheadandbloodybones, a Kelpie, a Brownie, a Spriggan) all emerge from these traditions. If narrative tropes such as 'the true child replaced with a fake' or 'the descent into the underworld' can be found in other cultural genres (Orpheus and Persephone in Greek mythology), this is a play that nevertheless insists upon understanding these constructions through the lens of a fairytale, and the respective cultural associations. Many of Churchill's plays play fantastical beasts or creatures – the spectres of *Fen*, the vampire of *Mad Forest* – but *The Skriker* specifically aligns itself in the traditions, both in terms of imagery and narrative, of the fairytale.

The structures of the fairytale offer *The Skriker* particular possibilities in conceiving space. In an irony that Tracy Davis appreciates, structure gives liberation, 'extreme convention is a form of license' (Davis 2005: 57), whereby the creators can play upon the audience's expectation of

convention. In terms of theatre, productions can take advantage of the particular spatial configurations and structures of the fairytale. The spatiality of the fairytale is reliant upon a central divide, following Alfred Messerli, 'the European fairytale creates two nonhomeomorphic worlds – a magical world of supernatural beings from the beyond, and a non-magical one of normal human beings' (Messerli 2005: 275). Yet, all these narratives involve, in some way, a sense of journeying between these two places. In travelling between these two worlds, a pliable spatiality begins to take shape, leading Messerli to suggest that the spatiality of the fairytale is, 'erratic, not homogenous ... simultaneously contractive and expansive' (Messerli 2005: 282). The invisible becomes visible, eternity becomes a second, and a second becomes an eternity.

These structures of space play interestingly with our own social narratives of madness. Madness, in our cultural imagination, frequently figures as a singular site, as a location 'far, far away'. To be mad, as Harpin lists, means, 'one has lost the plot, gone out of one's mind, taken leave of one's senses; you are out to lunch, round the bend, away with the fairies, round the twist, in a dark place' (Harpin 2014: 187). Madness as hallucination is, much like the fantastical world, defined by its seclusion from the material world, understood by means of this partition, a depoliticized experience sundered from other political concerns. In contrast, capitalism portrays itself as existing on a purely material level; our imagined geographies of capitalism are flat, forged through the accumulation of material wealth.

Churchill uses the genre of the fairytale to create a new space that can explode the distinction between the material and the psychological using the imagery of the fairytale. The fairytale world has thoroughly rooted itself inside the mundane. She fills scenes typically situated in 'gritty realist' drama with the fantastical, blurring the boundaries; the mental hospital occupied by, 'the Kelpie, part young man, part horse' (Churchill 1998b: 247), a bar frequented by 'a Spriggan, grotesquely ugly and ten feet tall' (Churchill 1998b: 253). Frequently, they can't be seen, as the stage is populated by 'A Businessman with a Thrumpin riding on his back. He doesn't know it's there' (Churchill 1998b: 275), or as Lily and Josie sit on the sofa, 'Rawheadandbloodybones sits on a shelf watching, invisible to them' (Churchill 1998b: 275). The Manchester production illustrates this further, as the main stage is surrounded by little

alcoves of 'gritty realist' imagery, of kitchen sinks and bedrooms, with strange, wonderful flowers sprouting out of them. The ecological world of the Skriker has punctured into the real. Both madness and capitalism scale between these two worlds. The spatial distortions of time prevalent in fairytales illustrate how Churchill brings together these concerns. In an episode of extreme time compression, Josie experiences her hundreds of years in the fairy underworld, only to return in the real world at the same time. Lily questions Josie's experience, stating, 'Josie, I was with you all the time' (Churchill 1998b: 276), she frames it as a psychotic episode, as the tumult of individual experience. Yet, the distortions of scale are reversed in the final scene of the play, as Lily's compact with the Skriker leads her to decades in the future, meeting with her descendants in a ruined world. If Josie's experience reflected that of psychosis through the land of the fairies, this reflects reality-in-extremis; as the Skriker narrates of Lily, "Am I fairylanded?" she wandered. 'No,' said the old crony, 'this is the real world'" (Churchill 1998b: 290). Suddenly, ecological obligations are brought to the fore, time distortion a means of apprehending our future. Churchill's use of a classical fairytale device, the varying compression and expansion of time, becomes a means to set alongside psychosis and the material. Yet, beyond simply a collapse between the psychotic and the material, this device seems to indicate both connection and disconnection; they are intertwined yet polar opposites.

Likewise, the fairytale's concern with children - their abduction, their innocence, their vulnerability, their greed – acts as a lynchpin between concerns of madness and globalization. Josie's murder of her own child remains inscrutable; though implied she worried that it was a 'changeling child', these are extrapolations. Yet, the clear framing is that the fantasy world has, in this sense, operated as manifestation of madness, that Josie suffered post-natal psychosis. Yet, the concern for our children, the precarity of their future, is also highlighted as a central concern of globalization and its ecological effects. In the final scene, Josie is confronted by her descendants in a ruined world; our ethical responsibility to the environment is framed as an encounter with our children's children.

The Skriker exploits the doubled-space that the fairytale simultaneously exists in and undermines, acting as a means to deconstruct the relationship between the material and the

psychological, and in doing so opens parallels and connections between late-capitalism and madness. On the one hand, it demonstrates capitalism does not simply occur on a material level, that it works upon and across multiple spaces. But it also places madness as fundamentally involved in the material, in its causes and consequences. Josie must respond to a late-capitalist world that fails to provide adequate resources (politically, bureaucratically, socially) of support. *The Skriker* creates a space that can dart between madness and globalisation, mark their overlay, without subsuming one into the other. Even as it demonstrates connection, it emphasizes disconnection. By flirting between these two possibilities, *The Skriker* hints at possible connections and fruitfully blended understandings, without fully committing to any formalized account of their relationship.

Away with the Fairies: The Magical and the Real in Material Space

If *The Skriker* ushers in confusions, offering its mythological visions as crossing the material and psychotic, productions of *The Skriker* can play upon the materiality of the theatrical space to prod at this divide. Whilst the original production maintained a more traditional staging, subsequent productions have been drawn to staging that pierces the spectator-performer divide more explicitly; both Red Tape Theatre's production in Chicago and a student production in Warwick University were drawn to promenade performance. In the 2015 production, taking advantage of the round stage of the Royal Exchange, some of the audience were placed alongside three, long wooden tables, cutting across the space in the shape of a large 'Y'. The performers would then use both the tables and the spaces in-between to enact and entrance; the main action of Josie, Lily and the Skriker occurs predominantly on the tables, with the various incidental fantastic beasts and creatures scattered across the spaces in-between the tables and audience members.

Yet, the special relationship is not consistently one of porous engagement between spectator and performer. The spatial politics of this staging, and the audience's relationship to the 'fantastical', became most fraught in the transitional scene where Josie descends into the fairy underworld of the Skriker. This scene represents one of the few points where there is no trace of realist setting:

it looks wonderful except that it is all glamour and here and there it's not working – some of the food is twigs, leaves, beetles, some of the clothes are rags, some of the beautiful people have a claw hand or hideous face (Churchill 1998b: 268-9).

The world is purely fantastical, a magical and raucous feast. But even as the descent occurs and the table placed with food and drink, the audience members are not welcome in the land of the fairies. Those seated along the long tables are escorted by various fairies to the perimeter of the space. They remain there for the rest of the performance, with the main space of the performance no longer lined across with spectators and non-performers. The porosity of audience and performer has been rejected, and a new line has been redrawn.

The transition is not incidental, nor an awkward shuffling. The departure of the audience is incorporated into the transition of the scene. The fairies come to take each audience member individually by the hand, and lead them away. The transference is extravagant, it calls attention to itself; a fairy escorted me away, the movements of his hand guided me into twirling into a circle. Those audience members forced to move become part of the spectacle. The process is slow and individuated. In my own experience, I find myself self-conscious as being made, in a small way, to perform.

The relationship between different sections of the audience, one acting as spectacle for the other, is attested to in various reviews, particularly from those located in the upper or lower circle. Several reviewers positioned from this vantage point reflect upon the discrepancy. Allfree, feeling dislocated from the action, ponders, 'perhaps those seated at the tables feel more deeply the threat of rupture onto the real world' (Allfree 2015: np); whilst James Varney observes, 'the luckiest members of the audience (myself not included) find themselves sat in the hollow where the play takes place, at tables more banquet than picnic' (Varney 2015: np). In both these cases, the staging has (if partly through envy) ruptured the experience of the play. They themselves wish to be part of the show's glamour, start to imagine other viewpoints. Far

from simply affecting those 'lucky' few seated by the tables, the staging implicates all audience members in a complex economy of spectatorship.¹³

These two accounts both presume, or hope, for a greater emotional connection for those of us closer to the actors. Yet, despite these politics of connection and disconnection, those of us 'amidst the action' of the play were most visible at our departure. *The Skriker* as a whole appears to encourage slippage between the mythological and the mad. Yet, as the audience appear to travel into the most purely 'psychotic' or 'magical' landscape, the audience are excluded. The production appears to be following some of the tensions of the text, whereby Lily, despite seeing the Skriker in her everyday life, refuses to believe Josie travelled to an underworld. A limit has been reached. In this, *The Skriker* refuses to declare, define, or provide us access, to a 'space of madness'. 'Pure' madness is rendered inaccessible, as untouchable. If the notion of a 'space of madness' is, following Lefebvre, regressive, then *The Skriker* teasingly creates one, only to prevent and obstruct our apprehension of it. If *The Skriker* as a whole uses the fairytale and the fantastical to skirt between both madness and the politics of globalization, then curiously, this production creates a mad landscape only to emphasize its utter inaccessibility. This, coupled with the ambiguity of meanings across madness and globalization, troubles the traditional logics of hallucination.

Madness Through Magical Thinking

The Skriker quickly works to destabilize the exoticization of mad experience through logics of hallucination. The hallucinatory mode of *The Skriker* is troubled, its fantastical modes both encourage and discourage interpretation of its visions as psychosis. The creature of the Skriker seems to evade easy categorization. Both engaged in the mythological logic of the play and as embodiment of psychosis, it seems to exist in a liminal space. We are given a 'mad' character, introduced to her in a psychiatric ward for the murder of her own child, that is later associated with the fantastical visions of changelings; in this, the audience are encouraged to associate the

¹³ This economy is not simply conceptual. Intentional or not, there is the additional irony of the economic component in a play attempting to skewer globalized capitalism. The seats amongst the actors, along the tables, naturally cost more than those in the more detached circles. Hierarchies of spectatorship in this anti-capitalist production are drawn on decidedly financial lines.

strange imagery, not with a quirky 'magic-realist' aesthetic, but as emerging from a psychotic landscape. Yet, these visions extend beyond her and shift to the ostensibly 'sane' Lily like a pathogen, they resist such any simple categorization as hallucination, evade any easy belonging. Likewise, in the staging of the Manchester production, the staging of the fairy's banquet emphasized a pure mad landscape, only to render it inaccessible. The play confuses the easy inner-outer logic of the hallucinatory.

Whilst it is the play least evidently participating in regressive inner-outer distinctions, it is consequentially also the play most vulnerable to a disregard to madness itself. The play evades any easy theme or concern. For some, it's the ecological and economic damage of late-capitalism, imagine on a psycho-fantastical realm. Others focus on its attention to madness itself, aping the ostensible structures of psychosis and schizophrenia, whilst demonstrating the meaning-making processes that emerge from these structures. In isolation, these theories and interpretations risk respectively remaindering madness into metaphor, or essentializing mental health into certain aesthetic modes. In its confusion of themes and meanings, encouraged by the ambiguous ontology of the Skriker herself, *The Skriker* risks sublimating madness into an after-effect (or psychological metaphor) of the forces of globalization and capitalism.

Primarily, through its relationship to the fairytale genre. The structure of the fairytale relies upon a spatiality of 'here' and 'there', of home and far, far away. Moreover, the fairytale relies upon the journeying between these two, between the shift. Its plays upon the visible and the invisible, the dimensions and complications of the fairy, questions of scale. The play then troubles these neat distinctions, between the real and fantastical, as one invades the other. Through this mode, the Skriker can implode distinctions between material and the psychological landscapes, set one alongside the other. I can set the play's concomitant concerns with late-capitalism and madness alongside one another. On the one hand, I can see a capitalism that functions beyond a purely 'materialistic' mode, that has psycho-social permutations, and consequences. Likewise, I can place madness in the material, understanding how it manifests alongside the material circumstances of capitalism.

In using the internal geography of the fairytale, *The Skriker* creates a new geography of madness, one that neither seals away madness, nor renders it an illustrative metaphor of globalization. In contrast to hallucination, the audience approaches a re-politicized understanding of mad experience. Through this re-politicization, *The Skriker* resists the hegemonic logic of hallucination that seals mad experience away into its own space.

Smoke in your Eyes: Spaces of Hallucination, Intersectionality, and Invisible Violence in debbie tucker green's *nut*

In debbie tucker green's *nut*, the politics of madness come in contact with those of race and gender. The loose structure of *nut* could be described as follows. In the first act, Elayne, a reclusive black woman, bickers with her white friend Aimee, her black friend Devon, and a young black boy called Trey. The conversation becomes increasingly ominous, circling around funerals and suicide. In the second act, two characters simply called Ex-Wife and Ex-Husband, insult each other, bitterly recollect their failed marriage, as they wait for their daughter to arrive. In the third act, the audience discover Elayne and the Ex-Wife are sisters and Elayne experiences psychosis of some description. As Aimee, Devon and Trey populate the stage, it becomes evident they are unnoticeable to the Ex-Wife. They are revealed to be hallucinations, the action of Act One all a manifestation of Elayne's psychosis.

There is no uncertainty in the framing of hallucination in *nut*. Unlike *The Skriker* or *The Eradication of Schizophrenia in Western Lapland*, that seep their architecture of hallucination with ambiguity, *nut* clearly designates particular scenes and characters as 'hallucinations' and imaginary. It even uses this distinction as a narrative twist, pulling the rug from underneath the audience's understanding. To this extent, *nut* is participating within and perpetuating the inner-outer logics of hallucination; the audience enjoy an exoticized taste of 'mad experience'. But, whilst fully recognizing these unambiguous hallucinatory structures, I want to suggest that despite these regressive aspects, through an engaged reading of the play, we can see how *nut* works to unpick easy assumptions about the relationship between the political and madness.

In order to do this, some background of the play and tucker green's position in black British theatre is necessary. Both tucker green's place within black British theatre, and the motivations

behind 'The Shed' at the National Theatre (the stage at which *nut* was performed in 2015), interact strangely with the play itself, reveal tensions between subject matter, audience composition, and the aesthetic choices of the play. With the rise of black British theatre onto main stages and new writing theatres across the past twenty years, the predominant aesthetic mode has been realism. Roy Williams, Kwame Kwei-Armah and Bola Agbaje have sought to reveal and expose the diversity of black British experience through broadly realist or 'slice of life' dramas. In contrast, tucker green eschews realism; her plays are frequently situated in traumatic landscapes, as she 'breaks away from the predominance of social realism in black British playwriting by focusing on the emotional aftermath of these issues' (Goddard 2015: 69).

In her few interviews, debbie tucker green shows a wariness concerning the composition of the audiences at these theatres, and her own role in this regards. Questioned by Lyn Gardner about the overwhelmingly white audiences of the Royal Court, tucker green replied:

It won't, if the marketing department does its job properly ... It makes me laugh when I walk into theatres and people are tripping over themselves because I am a black playwright. If you're black and working in a shop nobody trips over themselves (tucker green in Gardner 2005: np).

This juxtaposes on the one hand a notion that her plays are written with a black audience in mind, against the acknowledgement that, institutionally, the audiences to her plays are overwhelmingly white.

The motivations behind The Shed, a temporary stage set-up by the National Theatre whilst renovations were occurring at the Cottesloe, extend this conflict. This stage not only represented a pragmatic stop-by, but an attempt to extend the National Theatre brand. For Ben Power, the associate director in charge of its programming, the Shed was an opportunity to extend the National's audience, claiming:

There are people who go to see new writing Upstairs at the Royal Court or at the Arcola, or who go to the Young Vic for its bar ... And they don't come to the National because they think it's establishment and not for them or they find the building intimidating or the

programming old-fashioned or over- literate. Actually that audience would really enjoy what we do. This is a way of reaching towards that (Power in Jones 2013: np).

This notion of a new audience, emerging from the new writing theatres, as somehow more desirable and worth pursuing, follows a particular image. It suggests tucker green's writing is scheduled, and valued, for her cultural capital with the predominantly white audiences frequenting these new writing theatres.

In order to get around these tensions, Goddard suggests that tucker green moves 'beyond' race, and attempts to integrate black identities into the universal. For Goddard, the characters of tucker green's play, 'happen to be black/women, experiencing traumas that could happen to anyone, rather than black women experiencing such traumas because they are black women' (Goddard 2015: 93). Certainly, many of tucker green's plays have seemed to implode or disturb white presumptions and experiences. In *stoning mary* (2005), a catalogue of catastrophic situations, usually associated with black African experience, are played out with white actors. In this regard, alongside her intention to write for black audiences, she seems to be involved in provoking and confronting white privilege and presumption. But, I am suspicious of the term 'universal', in both the often hegemonic resonances of the term (universal often being equated with the dominant) and the static conceptualisation it provides. I would rather suggest, tucker green veers between black and white concerns, shifting emphasis and perspective. Nor is this ability to veer between perspectives limited to race. In *nut*, tucker green situates questions of race against the identity politics of both gender and madness. In order to understand tucker green's work, we must trace the lines and consequences of violence emerging from various supremacist structures.

I am unaware of any subsequent productions of *nut* since its premiere. Regrettably, I was unable to watch *nut* live in the original performance. Rather, my analysis has been informed by the play text, a recording of the National Theatre production, examination of the stage design documents, various notes made through the rehearsal process, and various accounts by reviewers and bloggers as to the experience of watching the play, particularly in reference to the play's use of smoke as metaphor and sensation.

Smoke and Light: Invisible Violence in *nut*

Violence seeps through debbie tucker green's *nut*. White-on-black violence, male-on-female violence, sane-on-mad violence. The violence is not of an overt, traumatic act; *nut* resists the inclusion of more easily identifiable traumas of her previous work, of domestic abuse in *dirty butterfly* (2003a), of sexual child abuse in *born bad* (2003b). Rather, *nut* is concerned with a violence that resists such easily identifiable traces.

The traces of violence in *nut* seem to be seen in the trails of smoke across the stage. Smoke, and the practice of smoking, gets everywhere in *nut*. Characters lend one another cigarettes, berate each other for smoking, attempt to wave away the smell and foggy air. The cigarettes are shared, enjoyed together, act as a mechanism of connectivity. For the Ex-Wife and Ex-Husband, sharing a cigarette is a brief return to marital intimacy, an oddly sexual encounter, 'she doesn't hold the cigarette but takes a pull from his as he gently holds it temptingly for her' (tucker green 2013: 51). The cigarette allows them to briefly touch one another, the butt of the cigarette transferred across their lips, a nicotine kiss-by-proxy. Yet cigarettes are also a source of destruction and damage. The 'trick' played across the play, of tipping ash upon the hand, become a stand-in for Elayne's self-harm as she stubs out cigarettes on her arm.

The smoke even begins to stain the palpable space of the stage, as countless cigarettes are lit and enjoyed. For Lulu Raczka, this obscuring of sight during the second act between the Ex-Wife and Ex-Husband was a visual metaphor, as 'the smoke from the cigarettes visually blurs the scene, so that the messiness of their relationship seems to hang there, ignored' (Raczka 2013: np). She was not the only critic to feel the significance of this obfuscation, as the writer for the *Evening Standard* noted that, 'the sharing of cigarettes seems to forge deeper bonds than words can. It also serves as a reminder of death. Menace floats in the air yet wafts away amid the characters exaggerated, almost competitive puffs of smoke' (*Evening Standard* 2013: np). The trailing metaphors seem to suggest a continual economy of connection and damage; characters seem only able to forge connections alongside a veneer of harm. The summation of these exchanges seems to leave a smog of violence in which the characters live.

Smoke is both there and not-there, perceptible and yet intangible. Emerging from a cigarette, it reflects a form of violence, sensed and observed, but not easily given articulation. Smoke invades space, obstructs our ability to see. In this, *nut*'s concern with smoking and smoke evokes a common concern with visibility and violence, about a violence that evades easy observation. The smoke of *nut* carries across the stage like the violence between characters. The violence of *nut* is rarely explicit; it does not revolve around a catastrophe or disaster. Rather, *nut* is concerned with a less overt violence, an invisible violence, that doesn't reveal itself or emerge from the consolidated traumatic event. Violence drifts around and between characters like the cigarette smoke they frequently exhale.

The nature of violence in *nut* is difficult, obscured. Aimee, both the imagination and friend of Elayne, never evidently expresses racial hate, or even regression to stereotype. Nor does Trey outwardly claim that Elayne's supposed weakness stems from her womanhood. Yet, in Aimee's continuous assertions of superiority, there emerges the portrait of a white woman psychologically abusing a black woman. Aimee suggests that Elayne's unpopularity would cause her funeral to be only attended by, 'cupful of few friends' (tucker green 2013: 7); she vaguely refers to 'your kinda people' (tucker green 2013: 17) in a derogative fashion, and notes that Elayne will probably die from suicide, encouraging her to do so: 'pills or something mixed with something – that might work for you' (tucker green 2013: 25). Whilst a vague malaise of violence emerges, on initial watching, these exchanges evade an easy slotting into explicit racism. Overt racist epithets are not used, nor a clear stereotype, and yet there is a violence occurring, that evades an easy articulation.

These small exchanges could be simply understood as 'microaggressions¹⁴,' but this is to atomize a violence that is invidiously structural. Rather than simply focus upon the individual event, invisible violence also takes form in the lived experience of existing within a society designed to punish on the basis of race, gender, and madness. In order to attend to violence from the perspective of the persecuted, we must attend in a more complicated meaning-

¹⁴ The term 'microaggressions' has been developed in the work of Derald Wing Sue (2010). For Sue, microaggressions are the 'brief and commonplace verbal, behavioural or environmental indignities whether intentional or unintentional which communicate hostile, derogatory, or negative slights and insults to people from marginalized groups' (Sue 2010: 5)

making process that situates the microaggression both in a social context and the lived experience of those persecuted. In this more nuanced apprehension, we can begin to draw the lines around such 'invisible violence', the unseen modes of persecution in everyday experience (and indeed, how its invisibility is a component of the violence itself). Bluntly, a new spatiality is necessary, through which to see this invisible violence.

In *nut*, debbie tucker green opens up hallucination as a means to create this new spatiality. The initial response to the interactions between Elayne and Aimee is one of confusion, a vague sense of drifting violence, like the smoke in the air. Aimee prods and attacks Elayne psychologically, but the nature of the violence, and its effect, evades articulation. However, in reframing the scene from a realist aesthetic to that of the hallucinatory, tucker green clarifies and changes its significance; Aimee emerges as an embodiment of internalized white privilege, the totalizing effect of being non-white in a white supremacist society. bell hooks, framing it in Foucauldian terms, notes simply that, 'power is inside as well as outside' (hooks 1992: 116).

Understood this way, we can perceive how *nut's* use of a problematic logic of hallucination is imbibed in a deeply political consideration of visibility and invisibility. tucker green uses hallucination as a revelatory device, the previously obscured suddenly made clear. Far from 'divorced' from reality, the hallucinations revealed are pregnant with political significance. These experiences, as the accumulated consequence of living as a black woman in a racist and sexist world, are not phantasms to dispense, they are palpable and real lived experience. Madness exists and manifests itself alongside other political structures of identity.

Realism, the Ex-Wife, Gender and Madness

This opening of space, to make invisible violence visible, is not confined to Elayne, but also in the experience of the Ex-Wife. In doing so, tucker green opens a commentary on different aesthetic modes, and their possibilities in depicting experience of violence. The second act almost acts as a critique and pastiche of realism. With character names such as Ex-Husband and Ex-Wife, the roles appear functionary; filling in for the appropriate tropes, it almost forms a parody of its genre. But the scene is not structured purely satirically; tucker green is not completely dismissing the possibility of realism. If the name Ex-Wife is perfunctory, and

suggests the tendency of a certain realist tradition to easily insert black characters into traditional character tropes, her development across the play beyond this functionary cliché encourages a more nuanced understanding. Rather than a complete denunciation of the genre, tucker green seems more interested in exposing its inadequacies in portraying the complexities of oppression.

Much as with Elayne, in the exchanges between the Ex-Wife and Ex-Husband, the audience garner the sense of violence; though there is no physical abuse, the scene is exhausting to watch, as the two batter against each other psychologically. Perhaps more evidently than Elayne's phantasms, he pokes and prods at the Ex-Wife's insecurities, saying to her, 'You was a shit wife ... Now you showin your colours as a shit mother' (tucker green 2013: 53). Addressing his daughter's absence, and the Ex-Wife lack of knowledge as to where, he condemns her parenting skills, 'What kinda parent is that – that on page two of your parenting books parta the chapter – 'Don't Give a Shit Where They Are?' (tucker green 2013: 52). Most insidiously, he suggests the daughter is happier in his company, that she prefers him as a parent, that she sings joyfully in his company. The beautiful singing of the daughter, that the Ex-Wife has never heard nor will hear, becomes a taunt: 'She can sing the phone book and find a melody in it' (tucker green 2013: 49).

The image of the singing daughter follows through into the third act, as Elayne and the Ex-Wife meet and negotiate with the various psychological pressures inflicted upon them. As they talk of the husband, Elayne says to the Ex-Wife, 'he can make you think things' (tucker green 2013: 71). Again, we return to invisible violence, to the secret interpellated abuses, but this time to the 'sane' woman. The audience are enticed to imagine her own phantasms and ghosts; it's no coincidence that the third of Elayne's hallucinatory figures is a singing child. I imagine Elayne's own tormenting images, of her daughter singing, happier in the company of her father, the ghost forged through patriarchal, psychological abuse of her previous partner. And yet, the audience is not given unfettered access to this image; if I am encouraged to imagine and see similarities between Elayne's hallucinations and the Ex-Wife's persecutions, then I am deprived direct access.

Across both Elayne and the Ex-Wife, we see how the logic of hallucination is used as a platform to open up a new type of space, one that can reveal invisible violence. This is not, within itself, a radical apprehension of madness. To use madness simply as a 'device' without acknowledging its own politics, its own substantiality, would be to de-politicise it as functionary metaphor or tool. However, *nut* does not simply use madness as a metaphorical device to open up the politics of other identities. In the final exchange between the two sisters, alternating between mutual verbal abuse and affection, the madness of Elayne becomes the obstacle between herself and the Ex-Wife. The Ex-Wife patronizes and insults Elayne, says she is 'a fucking liability' (tucker green 2013: 68). She tries to silence Elayne, 'no-one wants to know ... bout your fuckin whatever-the-fuck goes on with you up there' (tucker green 2013: 77). The Ex-Wife echoes the various phantasms, observing and mocking Elayne's isolation and loneliness. Madness, to put it simply, is not only a mode of 'seeing' invisible violence, it is an object of violence, a cause of oppression and persecution. In this scene, madness is set alongside race and gender into the complicated economies of violence in identity politics. In *nut*, the regressive hallucinatory inner-outer logic is used in order to directly situate madness in a political context.

Intersectionality and Space

The economies of violence throughout *nut* follow the lay lines of intersectionality. Intersectionality, described succinctly by Patricia Hill Collins, 'refers to particular forms of intersecting oppressions, for example, intersections of race and gender, or of sexuality and nation. Intersectional paradigms remind us that oppression cannot be reduced to one fundamental type, and that oppressions work together in producing injustice' (Hill Collins 2000: 18). Intersectional theory emerged from developments of black feminism in the 1980s and 1990s, with key figures such as Crenshaw and hooks arguing that approaches to identity had to be multivalent, or risked falling into alternative structures of dominance. Crenshaw suggests that, in both legal and intellectual terms, to focus on a single axis of identity has led to an 'erasure' of certain identities. For Crenshaw, 'this single-axis framework erases Black women in the conceptualization, identification and remediation of race and sex discrimination by limiting inquiry to the experience of otherwise-privilege members of the group' (Crenshaw 1989: 140).

This continues, for example, in my own positioning to this work. I am white, male, middle-class. My social privilege is not simply the cumulative effect of these various identities, but how they interact and meld into one another. bell hooks eloquently describes the predicament of cultural studies:

I am continually distressed by the willingness of one group to repudiate domination in one form while supporting it in another – white men who take sexism seriously but are not concerned with racism or vice versa, black men who are concerned with ending racism but do not wish to challenge sexism; white women who want to challenge sexism but cling to racism, black women who want to challenge racism and sexism but claim class hierarchy (hooks 1994: 6)

If this is a difficulty for theatre, it is likewise a difficulty for intellectual frameworks.

Throughout her work, tucker green has continually examined concepts of race and gender alongside one another, and how various forms of abuse play along these lines. In *nut*, she complicates this further, examining the sprawl of madness, and how it plays against these other identities. To grapple with how *nut* situates madness is to grapple with tucker green's apprehension of intersectionality. Elayne experiences hallucinations, she has prescribed medication; but her hallucination, her experience of madness, occurs along the lines of her experience as a black woman, of internalized white and male privilege.

In *nut*, intersectionality becomes bound up with the possibility of solidarity, and its subsequent failure. The possibility of forming alliances in *nut* against this economy of violence seems to be continually frustrated. Amongst this ubiquity of invisible violence in *nut* is the suggestion that identity will always be an instigator of difference rather than communality. Aimee and Elayne share the same gender, but Aimee emerges as an embodiment of white privilege. The Ex-Wife and Ex-Husband share the same race, but find themselves adopting and resisting lines of regressive patriarchal structures. In many ways, this adoption of difference over solidarity becomes the chief focus of the play, it draws out the similarities of Elayne and the Ex-Wife, literal sisters, nevertheless divided by Elayne's madness. The play seems to adopt a pessimistic view of intersectionality. That, regardless of potential solidarity, there is always something to

divide: women divided by whiteness, those of the same race divided by gender – and finally, two black women, divided by the barrier of madness.

Understanding intersectionality gives us another possible configuration of invisible violence. Intersectionality claims that the critical frameworks that we deploy, by regarding identity as occurring on a single axis, often ignore and fail to account for certain identities (such as black women). We fail to see violence, it remains invisible, because our critical frameworks fail to account for the multiplicity of identity. Intersectionality, seen statically, can almost seem an impossible (though always to be pursued) ideal. There is always another identity, another complexity, another specificity we've failed to account for adequately. For this reason, rather than succumb to a fatalistic intellectualism, it is desirable to imagine intersectionality as dynamic, as process.

The difficulties of intersectionality can be understood through spatial lines. Intersectionality aims to flow between different spaces of identity, to break apart cordoned-off barriers of identity. Kyoo Lee imagines intersectionality as 'interstitial,' conceives Crenshaw's project as a geographical project, an attempt to create, 'a cartography of the margin, not some general or universal or generic map' (Lee 2012: 469). Identities are not stable, they cannot be held and contained, and the task of intersectionality is not to create a 'fixed space' with can account for these possibilities, to simply provide a definition for previously under-examined identities, but rather to be 'a ninja of organic intellect' (Lee 2012: 475). In other words, to always be open to new possibilities, configurations, and modes of identity.

It is a new conception of space which tucker green creates in *nut*. If the hallucinatory logic opens a way of articulating the invisible violence behind microaggressions, it also demonstrates how this violence occurs upon an intersectional basis of identity. If *nut* is concerned with division, it is likewise concerned with the possibility of forming a communal resistance; the possibility of alliance against power seems a continual concern of tucker green's work, as Marissia Fragkou notes of *random*, the play, 'opens up the possibility of a provisional community, addressing a heterogeneous audience' (Fragkou 2010: 80). Again, tucker green's

challenge is, amongst the diversity of identities and differences which we all weave within and away from, how to form solidarities?

New Spatialities of Madness: The Possibility of Solidarity

In the final scene of *nut*, the sisters begin to unconsciously imitate each other's oppressor, echoing lines and insults of the Ex-Husband and the hallucinatory persecutors. Elayne throws doubts on the Ex-Wife's ability to be a good mother; she repeats the taunting image of the singing daughter. The Ex-Wife mocks Elayne for her lack of friends and isolation: 'Who the fuck company you got? Who's here? Who comes round here?' (tucker green 2013: 63). As they bicker, disagree, rub against one another, they cannot connect without causing damage. Yet, Elayne sees the connections between the two of them, stating plainly, 'You're like me' (tucker green 2013: 71). The Ex-Wife repeatedly rejects this; for the Ex-Wife, the psychosis of Elayne precludes any possible solidarity or identification. In the end, Elayne attempts to connect the only way she knows how, through sprinkling ash onto the hand of another. But the Ex-Wife refuses to engage, doesn't put her hand out, as 'Elayne gestures for Ex-Wife's hand. Ex-Wife doesn't respond and doesn't touch her' (tucker green 2013: 81). The ashes fall on the floor. The sisters have failed to connect.

This failure to connect, to imagine a shared space occurs as the audience are invited to see a different spatiality, that strides across the 'realist' and 'hallucinatory', that can incorporate both the mad and the sane. The play renders visible the communalities between Elayne and the Ex-Wife, how they are both persecuted (and attempt to resist) by structures of patriarchy and white supremacy. Yet, the inability to approach madness results in being the final barrier, as the Ex-Wife is unable to see or accept potential communalities with her sister. The space the two characters occupy is divided, fragmented; unlike the play, their experiences are partitioned from one another. Rather, they have to continue to exist in the haze of violence that haunts the play.

In this, the complexity of tucker green's attitude to madness is revealed. Hallucination in *nut* provides the audience with a new means to conceive the lived experience of invisible violence, and the interrelations of race, gender and madness. Likewise, *nut* dramatizes how the exclusion

of madness breaks alliances, limits understandings of identity. If the play is a pessimistic examination about how the multiplicity of identity leads potential allies frequently becoming persecutors, the third act places madness, and the rejection of mad experience, as the final culmination of this. Moreover, that the rejection is double-edged, not only of mad persons, but of the new spaces made conceivable by incorporating mad experience.

To what extent does *nut* perpetuate the political structures of hallucination, and to what extent does it resist the concomitant exoticisation and de-politicisation of mad experience? Compared to the architectures of hallucination in *The Eradication of Schizophrenia in Western Lapland* and *The Skriker*, *nut* presents us with the most simplistic and regressive understanding of hallucination. It cleanly delineates hallucination from the real, and doesn't seek to meaningfully disturb these boundaries. Yet, whilst *nut* relies upon a simplistic logic of hallucination, it uses this as a springboard to explore the political dimensions of mad experience and the place of madness within intersectional politics. It undermines the notion of 'realism' as an adequate mode through which to apprehend the complications of identity politics. In order to understand the complexities of political violence, we have to incorporate lived experience, understand how the accumulation of oppression results in a psychological violence. Hallucination becomes a device through which we can understand the complexities of the reality of political violence.

This, by itself, could regard madness as metaphor, as a mode that fails to pay attention to the specific politics of madness itself. However, *nut* extends beyond this, incorporating madness into its complex web of intersectional politics. In Elayne and the Ex-Wife's failure to form solidarity, I see how the politics of madness is subject to its own form of invisible violence. In this, madness sits alongside race and gender in a complicated economy of violence. In *nut* the logic of hallucination is used against itself, to create a new spatiality that reveals the complexities of invisible violence, how the intersectional politics of race, gender and madness are deeply enmeshed, and reveal the possibility of new connections.

Conclusion

As we reckon with 'mad experience', its visibility or invisibility, we find a complex interaction between engagement with and resistance against certain political structures. Suddenly the mad

person comes to the fore, stepping outside of the asylum. But, even as we attend to mad experience, we exoticize it, de-politicize it. The purpose of this chapter has been to imagine how new possibilities of imagining mad experience might be created, how to resist the hallucinatory logics that surround and bracket our understandings of mad experience, and in doing so, re-politicize our understandings of mad experience. Each of these plays engages with the troubled relationship between our constructions of madness and constructions of reality. These are all plays that open up the politics of the mindscape, of mad experience and hallucination. They play upon the thresholds of visibility. They variously participate and resist the spatial configurations of hallucination. All these plays tease out questions of space with regards to madness, and in doing so, disturb the neat boundaries through which we place madness. From this more troubled entanglement with madness, they re-integrate madness with the political.

This entanglement with hallucination is not always radical or resistant. The plays cannot completely evade hallucinatory logics. To entangle with mad experience directly on stage is to entangle with the political constructs and cultural idioms that surround any aesthetic consideration of 'mad experience'. The creators of *The Eradication of Schizophrenia in Western Lapland* claim that the process of watching the play is directly analogous to experiencing auditory hallucination. The play is, in some sense, complicit in an essentializing of madness and acting as an exoticized 'tasting' of the mad experience. *The Skriker*, of all the plays, evades such essentialization, maintaining the relationship between its fantasy world and psychosis as fundamentally undecidable. Yet, such ambiguity can lead to a conceptual collapse of madness into metaphor or illustration, evidenced by the critical disregard to the play's engagement with mad experience, sublimating it into the politics of globalization. In *nut*, the binary distinctions of inner and outer are maintained in its dramaturgy, by the end of the play, the audience are able to discern between the 'hallucinatory' and 'real' characters. Even if we accept hallucination as fundamentally 'revealing' a political reality, this still risks reducing madness into a tool or a device in service of other political identities. There is no stable ideal, between these two possibilities of madness is either essentialized or disregarded.

Yet, each of these plays puncture the political structures of hallucination, even as they find themselves enmeshed within them. With *nut*, its adoption of hallucinatory tropes act as a platform to proliferate question of visible and invisible violence, to the necessity of incorporating mad perspectives into any adequate understanding of the 'reality' of political violence. If *The Eradication of Schizophrenia in Western Lapland* is structured to suggest equivalence between its unconventional staging and the experience of auditory hallucination, then its insistence upon the complexities of experience continually interrupts and obscures this possibility. In *The Skriker*, such ambiguity is necessary to avoid easy designations of the Skriker, allowing for a porous account of the relationship between globalization and madness. As I parse out the plays' reductive structuring of hallucination against their more resistant aspects, no 'perfect' image, or preferable dramaturgy emerges. Their modes of resistance are wholly entangled with their more troubling architectures of mad experience.

In all these cases, these plays have exploited the internal spatial politics of genre to supplement and inform their own. The Family Drama, the ever-heightening stakes with an understanding of madness as simply the psychological manifestation of familial dysfunction, is confronted and denied. The fairytale's internal spatial logic, of a home and a far, far away, is opened in parallel to the relationship between the material and psychological. The urban, council estate, Black British drama, with its gritty exposure of material violence, is presented to demonstrate its political inadequacy, to frame the necessity of mad perspectives. All these genres have troubled relationships with madness and mental distress. In parallel with the plays' general engagement with hallucination, the adoption of a 'restrictive' or 'regressive' modes facilitate a more radical agenda.

In doing so, they reveal how mad experience occurs alongside a variety of political concerns. *The Eradication of Schizophrenia in Western Lapland* re-integrates madness and structures of family, our meaning-making always teasing out their relationship. *The Skriker* contracts and expands space-time to chart the relationship between madness and globalisation. Whilst *nut* offers madness not only as another consideration to the fabric of intersectionality, but a mode through which to reconsider the economies of violence and identity. In all these cases, madness exists alongside and through these political concerns. These wide socio-political concerns

influence, bracket, and frame the lived experience of madness. But likewise, the consideration of madness radically reframes these political constructions, and (without naïve or romantic utopian expectations) offers new ways of seeing.

It is the re-integration of the political into our consideration of mad experience that these plays chiefly offer. If hallucination divides between mad experience and reality, in these plays, the private space of madness is, to some extent, burst. Whilst not perfect examples of resistance, these plays offer a radical new direction in our spatial configurations of madness. And in doing so, these plays begin to shift towards a creation of new idioms, new architectures, and new spatial logics. Space is that through which we think, it acts as a core mechanism through which hegemony is perpetuated and resistance is possible. These plays offer a radical imagination. Through an interrogation of space, through a playfulness in its construction, these plays begin to conceive of new ways of thinking and seeing madness.

CHAPTER THREE:

OTHER LIVES AND RADICAL PERSPECTIVES: WITNESSING THE SUICIDE, WITNESSING THE MAD

As with hallucination, the suicide has become a core aspect of our construction of madness. Perhaps less evident, nevertheless, suicide is understood as an act of madness. With few exceptions, society tends to read suicide in psychopathological terms. Suicide is deemed tragic, as unnecessary, thereby irrational, subsumed in madness. The increasingly suggested position is that typified by Kay Redfield Jamison, that, 'the most common element in suicide is psychopathology, or mental illness' (Jamison 1999: 100), and that certain mental illnesses, 'are particularly and powerfully bound to self-inflicted death' (Jamison 1999: 100). One cannot talk about the mystery of suicide without echoes of our understandings of madness.

Our conceptions of suicide have not always been aligned with madness. Greco-Roman conceptions of suicide were profoundly different, less bound up with a focus upon 'individuality' and the 'self', rather prioritizing position within a community. Timothy Hill, defying pathological interpretations, insists that, 'the Roman self that emerges from Latin writings on suicide is in the final analysis purely socially defined' (Hill 2004: 16). The term 'self-murder' emerged in the late-sixteenth century, reflective of criminal and theological rather than medical concerns. Critical approaches across this time reflect a theological and moral defence of the individual, voluntary act of suicide. John Donne in his treatise *Biathanatos* (1981) and David Hume's *Of Suicide* (1998) follow this model, interrogating the suicide as an individual, potentially justifiable act.

The term 'suicide,' emerges in the mid-seventeenth century, reflecting an increasing secularization of the concept. Voluntary self-murder shifts into the involuntary structures of madness, Rab Houston notes, 'in the sixteenth and early seventeenth century nearly all suicides were found *felo de se*; after about 1750 nearly all were *non compos mentis*' (Houston 2009: 91). Andreas Bahr reflects, 'the invention of "suicide" mirrored less stringent prosecution of self-killing ... the concept of "suicide" reflects a gradual and complex historical process of

pathologizing and decriminalizing the act of taking one's own life' (Bahr 2013: 620-1). In this, whilst the process is necessarily complicated and non-linear, the voluntary act of self-murder is slowly replaced by the involuntary compulsion of suicide. As this shift is made manifest, the power structures of madness and suicide become firmly enmeshed, the pathologization of suicide made possible through this entanglement. Ian Marsh notes that Jean-Etienne Esquirol, student of Phillipe Pinel, establishes the pathologized logic of suicide, 'that as suicide was madness and madness was medical, it followed that suicide was medical' (Marsh 2010: 115).

Through this period, our narratives and conceptualisations of madness and suicide become compounded. Accounts of contemporary suicide are now almost exclusively phrased in psychiatric terms. In Marsh's terms, suicidal acts, 'are now, for the most part, understood and explained by reference to psychopathology and mental illness' (Marsh 2010: 27). Suicide is deemed tragic by its irrationality, subsumed in madness. Likewise, our understandings of madness are often buoyed and informed by a fear of suicide. Following Marsh, the 'redescription of suicide also changed, in part, what it was to be mad' (Marsh 2010: 132). The state penalizes the mad person, forcibly detains them under the *1983 Mental Health Act 1983* or the *Irish Mental Health Act 2001*, upon the basis that they are of immediate harm to self or others. The violence of suicide has become justification for the violence of the state.

By imposing the biomedical model, we limit our interpretative possibilities. Marsh notes how the biomedical model results in the, 'marginalization of other meanings of self-accomplished death – an act of protest or resistance, of self-determination, choice or will, an event of moral, criminal or political concern, even as subject of philosophical debate' (Marsh 2010: 4). Marsh himself advocates a Foucauldian genealogy as a mode of resistance. Without rejecting that mode, and fully supporting the possibility of a practical critique of suicide, I want to explore alternative possibilities and methodologies that performance can offer to resistance. To this end, I want to explore two broad alternative strands by which to apprehend suicide – the socio-political and ethico-individualistic voluntarism - both in terms of how they offer productive alternatives to the psycho-pathological, and also some of the further problems they bring.

Suicidology: Durkheim, Sociology and Politicized Accounts

Bio-medical models, whilst imagining the suicide a passive victim, locate the cause of suicide in the brain, a disease to be cured. In contrast, various sociological and political models have imagined the suicide as a victim emerging from various sociological and political frameworks. The pioneering figure of this practice is Émile Durkheim, who uses suicide as a platform by which to create modern sociology. In *Suicide* (2002), by means of the increasing accumulation and gathering of statistical and numerical data, Durkheim performs a quantitative analysis, forming a topography of suicide into four different 'types' of suicide. For Durkheim, 'social forces, conducive to low or high social integration, produced distinctive types of suicide that he arranged in pairs: anomic and egoistic; altruistic and fatalistic' (Wright and Weaver 2009: 5).

Under this argument, though suicide cannot be eliminated, it can be reduced by attending to social cohesion. Durkheim shifts from the amoral de-political bio-medical model, into one that positions society as cause, and thereby responsible. It pushes the possibility (and moral necessity) of a political response. By drawing attention to suicide as sociological phenomenon, we can begin to imagine our own political responsibilities to the phenomena. Namely, the way we form society, the way we participate within it, can lead to suicidal behaviour.

Whilst this socio-political perspective provides us with a framework to reinstate our responsibility to the suicide, it also provides certain problems. It risks reducing suicide as a mere illustration for social fracturing. Beyond this, Durkheim uses the troubling silence of suicide from which to establish a new discipline. Laird notes, 'the rhetorical energy in Durkheim's study is directed not at explaining suicide but carving out sociology as an autonomous new field' (Laird 2011: 529). Durkheim is less concerned with listening to the suicide itself, than forging a new discipline in the space of its silence. Moreover, in the use of numerical data to draw larger patterns, Durkheim risks failing to attend to the catastrophic individual event of suicide.

There have been various critiques of Durkheim's approach within sociology. Jack Douglas (2015) suggests an interpretivist approach, emerging from Durkheim's failure to consider how the suicides themselves interpret the event. To do this, Douglas performs a qualitative approach,

interweaving the substance of suicide notes, family members, diaries, interviews with unsuccessful attempts into his analysis. Yet, from this he extrapolates his own topography, using the silence of suicide as an object for sociological illustration. Again, the emphasis is upon an attempt to explain suicide, and use this explanation as a platform for sociological analysis.

Naturally, sociology's relationship with suicide is wide and extensive, and a fully comprehensive analysis would be the work of a thesis, rather than a section of an introduction. Rather, I want to observe how certain sociological models of suicide, in following either quantitative or qualitative analysis, succeed in politicising suicide, at framing it in a wider sphere, but in doing so, risk speaking upon suicide, attempting to explain it away, or even systematize it. In the attempt to create categories of suicide, it can reduce the individualization and heterogeneity of suicide.

Ethical Relations to the Individual Suicide Event

Works such as Jean Amery's *On Suicide* (1999) and Simon Critchley's *Notes on Suicide* (2015) approach suicide differently, offering a differing mode of attacking the psychopathologized. These, in part, return to the more moral, individualistic works of Donne and Hume, but for a secular attitude. Rather than attempt to construct a different cause of victimhood, these works question the attribution of victimhood itself. Namely, through a more individualistic, ethical mode of enquiry, a re-establishment of suicide as choice, as a voluntary death. Why shouldn't someone choose to commit suicide? For Amery, the aim must be, 'rehabilitating voluntary death as an act as natural or as unnatural as every other kind of death' (Amery 1999: 52). Rather than a political structuration of the suicide act, this is an ethical re-framing of how we regard the suicide itself.

Amery and Critchley reject the attempt to reduce suicide into the political. Amery in particular attacks the attempt of suicidology to impress itself upon the individual suicide, suggesting that, 'whenever suicide is observed as objective fact, as when scientists observe galaxies and elemental particles, observers become distant from voluntary death' (Amery 1999: 3). For Amery, the crucial point is the inaccessibility of the suicide as an experience; the lived situation, 'can never be communicated, so that every time someone dies by his or her own hand or even

just tries to die, a veil falls that no-one can lift again' (Amery 1999: 8). The living can provide no testimony towards suicide. Those who have attempted and failed can provide us with nothing to resurrect the thrust of the leap: 'a rescued suicide has returned again to the logic of life and speaks its language to the satisfaction of those who belong to it and society in general' (Amery 1999: 20) Meanwhile, suicide notes are gestures to the world they intend to abandon (or, indeed, destroy). They say nothing of the momentum of the suicide itself.

Yet, how can we make this neat separation between the political and the suicidal? Amery's suggestion that, 'each human being essentially belongs to himself or herself – outside of the network of social engagements, outside of the network of a biological destiny and prejudgment that condemns one to life' (Amery 1999: 99-100) is deeply uncomfortable, a position that removes itself from any communal concerns. Moreover, this de-politicization is itself a form of 'imprinting' upon the act of suicide, a form of essentialism. Why can't suicide be, itself, an act of political rebellion? By positing his own Sartrean declarations of radical individual freedom, Amery disqualifies other possibilities.

In order to maintain this argument, to maintain this sundering of the individual lived experience of the suicide from the political, both Amery and Critchley both find themselves, despite themselves, in phenomenological and even psychoanalytical postulations upon suicide. Amery makes the claim that, 'suicides are frightened of the nothingness that they want to take to themselves' (Amery 1999: 48). These dubious essentialisms are in conflict with proclamations of the impossibility of understanding or interpreting the suicide.

To square this circle, they invoke their own history or current experience of suicidal ideation in order to legitimize their position, despite their suggestion that the previously suicidal can no longer speak for the suicide. Amery draws upon his own history of suicidal behaviour to justify his wider proclamations on the suicide. Meanwhile, Critchley plays upon the possibility of his own potential suicide; opening with the proclamation 'This book is not a suicide note' (Critchley 2015: 11), he later disowns the statement, notes his recent struggles with suicidal thought, then notes, 'of course, to say this is to confess that the first sentence of this book is perhaps not to be trusted' (Critchley 2015: 16). Even as they have observed that the living, the survivors of the

attempt, cannot speak for the suicide, they do it anyway. Their claims necessitate recourse into faulty autobiographies that they themselves have already discredited. Despite the claims of the incommensurability of suicide, these works nevertheless inflict their own form of epistemological violence. Namely, these modes of thought, obsessed with individualized lived experience, to the point of its utter de-politicization, try to speak upon the silence of suicide.

The Possibility of Witnessing

Each of these different modes of addressing suicide raises different questions of the suicide itself. We can use them to parse the different significations of suicide, and the silence involved with it. From the socio-political, the suicide is victim, unable to speak or reply, led to suicide by the surrounding socio-political environment. Yet, the suicide is also a self-imposed suicide, a deliberate withdrawal. The suicide silences themselves, a self-created silence. So, our understandings of suicide can shift between the imposed and the wilful. Whilst these models can be helpful in moving beyond a pathological model, there is also a danger of totalizations. There is, as I have noted, a tendency of these varying critical approaches and epistemologies to over-claim, to subsume suicide within their respective framework. Rather than simply provide a partial, possible account, they are drawn towards an explanation for suicide. Yet, suicide exceeds any stable narrative thrust upon it.

The temptation to explain suicide is a violent one, to fail to respect and account for the incommensurability of suicide. I am suspicious of the search for an alternative totalising explanation for suicide. Suicide is elusive; it evades simple causalities. Wherever you look, suicide is elsewhere; and yet, we cannot ignore the suicide. Suicide compels us to look, even as it rejects our gaze. It is this complication of the gaze, what it means to look, that concerns this chapter. Whilst I could attempt to imagine a fragmentary perspective that incorporates its own fallibilities, or a pluralistic model that anticipates multiplicities, I am concerned more with a refutation of explanation itself. I want to self-reflect upon the act of explanation itself, what it means to explain or respond to suicide. I want to look at our looking; in other words, I want to understand how to witness.

To witness, far from a speech-act communicating knowledge, is not about such transfer of information. Witnessing incorporates the impossibility of adequate expression from the addressor, and comprehension by the addressee. Jacques Derrida (2000a) notes that the very premise of 'bearing witness' is the impossibility of proof. If proof were available, no testimony would be necessary. In other words, embedded in the act of testifying is the notion that what is being testified to is impossible to verify. Lyotard suggests to bear witness to something is not to claim to represent or signify something. Rather, it is to attest to the impossibility of expression, 'to recognize that what remains to be phrased exceeds what can presently be phrased' (Lyotard 1988: 13). To witness is to say: 'I cannot say what I saw', or 'I cannot understand what you experienced'. In the absence of adequate expression, this becomes a radical act.

Yet, we should not conflate witness with simply looking, nor as passive resignation. And whilst some have persuasively argued that looking can be potentially a radical act, as can listening, I am less interested in witnessing as sentiment than witnessing as an act. When we use the word witness, in the context of Derrida and Lyotard, they are frequently using the term 'temoignage'. But temoignage does not simply mean 'to see,' but rather to testify, or to bear witness. I want to consider witnessing not simply as a type of sight, indeed want to suggest it can move beyond sight, but rather a very particular form of politico-ethical engagement, tied up in understanding the complexities of positionality, acknowledging the limits (even impossibility) of comprehension, but accepting the necessity of engagement.

Much critical literature refers to witnessing as a singular concept, as bound up in one particular act. Yet, what is meant by witness, and what form of witnessing occurs, is not singular. In his analysis of Paul Celan's poem *Aschenglorie*, Derrida (2000a) noted the semantic and etymological confusion of the verb 'to witness' within and between different languages. Likewise, Shoshana Felman and Dori Laub (1992) distinguished between three different orders of witnessing. Through this confusion, the multivalence of witnessing, and its regard for madness and suicide, becomes clearer.

The first level describes testifying to one's own experience, 'the level of being a witness to oneself within the experience' (Felman and Laub 1992: 75). In the act of testimony, we account

for our own lived experience, and thereby bear witness to ourselves. For Derrida, the authority of testimony emerges from phenomenological experience, from the specific and privileged position whereby only the witness can 'know what he has seen, lived, felt' (Derrida 2000a: 199). Derrida claims that, 'a testimony is always autobiographical: it tells, in the first person, the shareable and unshareable secret of what happened to me' (Derrida 2000b: 43).

Laub's second level of witnessing refers to, 'the level of being a witness to the testimonies of others' (Felman and Laub 1992: 75). An act of testimony cannot exist in isolation. It is necessary to have both an 'addressor' and an 'addressee'. In other words, it is necessary for there to be someone to 'witness the witness'. The role of this witness is not to incorporate the 'lived experience' of the testimony of the original witness, rather it is to concede to the impossibility of transference. The witness of testimony, the witness of the witness, as Derrida states, 'does not see for himself what the first witness has seen; the addressee has not seen it and will never see it.' (Derrida 2000a: 189)

Derrida also observes a third notion of witnessing; he claims that Aschenglorie manages to witness the process of witnessing itself, that is, the process of witnessing. Laub similarly notes the third level of witness as 'being a witness to the process of witnessing itself.' (Felman and Laub 1992: 75) Derrida focuses on Celan's phrase, 'no one bears witness for the witness'. Derrida suggests this marks a focus on the limitation (arguably, the impossibility) of witnessing. It is an act of communication premised on the failure of communication. For Derrida, it is this examination of 'extremes' that qualifies Celan's poem as an act of meta-witnessing.

Rather than pose these different levels as stable positions, to be allotted or discerned critically, I want to suggest they are all interacting and concomitant parts of any act of witnessing. All witnessing involves the declaration and positioning of testimony, the involvement of an external addressee, the interrogation and upheaval of witnessing even as it occurs. These positions shift and change. Through these reflections of gazes, we can begin to respond, without explaining, rather, look back upon our looking.

These theories of witnessing have elaborated a model of ethical and political engagement that actively avoids explanatory models. If the intellectual legacy of what it means to witness is rich

in development, as something that necessarily exceeds traditional modes of semiotics, then there are two limitations to the majority of work that conceives upon what it means to witness. Firstly, many of the theoretical formulations of 'witnessing' are constructed around oral or written testimony; the theatrical, with its emphases upon presence and the spectacle, offers particular difficulties and potentialities in any consideration of witnessing. Secondly, much of the scholarship surrounding witnessing emerges from Holocaust studies. Felman and Laub established their 'crises of witnessing' as they embarked on one of the most extensive oral histories of Holocaust survivors. Derrida unpicks this possibility or impossibility of witnessing through Paul Celan, the irony and necessity of speaking of the Shoah in German, the language of the guards. Lyotard's declaration of the necessity of witnessing, as a mode of resisting the Differend, emerges from a passionate philosophical rejection of Holocaust denial. But suicide contains different complications and questions for what it means to witness. The structures and complications of madness, of agency, and of culpability, come to the fore.

Witnessing and Performance

In terms of the performative, there has been a surge in recent scholarship concerning witnessing in performance. Certain critical approaches pose witnessing as an interruption of the 'traditional' mode or understanding of theatrical spectatorship. Thereby, politico-ethical engagement in theatre is imagined as a mechanical shift of the audience's perception, from passive 'spectator' to actively engaged 'witness'. Hans-Thies Lehmann, suggesting an aesthetic of response-ability, suggests that particular modes that emphasize the, 'mutual implication of actors and spectators in the theatrical production of images' (Lehmann 2006: 186), can elicit an ethico-political response. These forms of argument have tended to emphasize the ethical potential of aesthetically innovative and formally experimental work; the transformation takes form through an interrogation and deconstruction of the axioms of spectatorship. In Nicholas Ridout's terms, these are works that render, 'the audience actively aware of their own participation in the event rather than a passive recipient of media saturation' (Ridout 2009: 58). Spectatorship of the audience, in this sense, must be mechanically and fundamentally shifted.

This position, that equates audience participation with politico-ethical engagement, quickly proves problematic. Most famously, Jacques Rancière has outlined the patronizing assumptions in understanding the spectator as passive, requiring a theatrical production to 'wake them up'. In *The Emancipated Spectator*, Rancière pushes for a more active and democratic anticipation of spectatorship, that, 'emancipation begins when we challenge the opposition between viewing and acting' (Rancière 2009: 8). In this, he shifts away from the suggestion that the spectator is one who has to be 'educated' by the theatrical production. Anna Harpin (2011) elaborates further on this, on how even the assumed mechanical passivity of the audience member can be pregnant with ethical and political questioning. Indeed, the traditional passivity of the audience, in the face of action that otherwise would have elicited immediate response, leads to a more layered consideration of what it means to 'respond'.

If we dispose of the notion of 'mechanical' interaction as somehow more interactive, this challenges our ability to discern 'witnessing'. Whilst we may disturb any clear distinction between spectatorship and witnessing, or hierarchical understandings of passive and active looking, does it follow that all spectatorship engages in the ethical and political wrestling of witnessing? Rancière seems to suggest all attempts to discern differing values of spectatorship is fraught with anti-democratic sentiment, that all lead to a vilification of the spectator; he critiques both Artaud and Bertolt Brecht's attempts to manipulate and alter spectatorship, that they themselves fall into this dichotomy of the passive and active, 'they have claimed to transform theatre on the basis of a diagnosis that led to its abolition' (Rancière 2009: 5). But, any notion of witnessing requires some aspect of discernment, of the political and ethical frameworks of looking; Rancière's democratic principles leave little space with which to critique our modes of looking. This frames the difficulty of understanding theatrical witnessing: how to frame witnessing as distinct, without recourse to problematic dichotomies of passivity and activity.

If witnessing is understood as ongoing (and never completed) process, rather than state, or transformation, or event, between the various levels of witnessing (testimony, witnessing, meta-witnessing), we can evade some of the more simplistic dichotomies of spectatorship and sight. Pursuing this further, I want to shift away from the concentration of the audience or

'spectator' as the object of analysis. With overly stable categories of witnessing, there is a risk of falling into patronizing notions of 'educating' the audience. I want to suggest that witnessing in performance is not simply something to be cultivated in the audience, or isolated, but rather a series of ongoing processes within the production itself. We can understand the production itself as incorporating and wrestling with these differing aspects of witnessing, creating its own testimony, bearing witness to its testimony, reflecting on its own processes. Rather than see the performance as engaged in a confrontational dialectic with the audience, I want to understand the audience as potentially enveloped in these various processes. The audience, rather than an external force to be positioned or altered, becomes incorporated within the various negotiations.

Witnessing and Suicide in Performance

Suicide offers particular challenges to how we understand what it means to witness. Witnessing the Holocaust gave us a particular vocabulary, of victim, perpetrator and bystander, as famously categorized in Claude Lanzmann's *Shoah*. Even the particular complications of this, of Sonderkommando forced into complicity, of the Musselmann who is incapable of bearing witness, fall in the background of Nazi persecution. In suicide, these barriers become far more confused and perilous. The question of victimhood is fraught: is it internal decision or external compulsion, to what extent is the deliberate suicide to be framed as a tragedy, or one of political resistance. With suicide, the troubling structures of agency in madness come into play.

As elaborated, using witnessing in terms of both performance and suicide offers new perspectives upon what it means to witness. But likewise, the interaction in witnessing between performance and suicide is further complicated. Suicide's own relationship to performance is fraught. On the one level, suicide is a deeply performative act, a demonstration. Suicide is an extreme act, written upon the body. And yet, suicide is also a withdrawal from the world (even an elimination of it, from a phenomenological perspective). It is an elimination and erasure of the self, a rescinding from the social gaze. Suicide is both a deeply performative act, and one that evades performance. The plays of these chapters all, in some sense, grapple with this aporia.

Some thinkers have attempted to rupture the connection between madness and suicide, and thereby hold a mode of resistance. They wish to expose the historical contingency of the connection between the concepts, or reframe suicide as a potentially 'rational' act. I am not interested in such a separation. Such separations are often formulated on a faulty historicism that proclaims the separation of concepts as somehow more 'natural' than their conflation, or a naïve undesirable construction of madness. Rather than arbitrarily split these concepts for epistemological clarity, I want to re-imagine suicide as a constituent part of our construction of madness. Our relationship to suicide is a component of our response to madness.

This is not to suggest suicide is not singular. Across these plays are reflected different apprehensions of it. How suicide is lived, as experience and as a process. How suicide exhibits itself in the midst of the leap, as precarious and undecidable. How suicide seals itself off in its completion, as an isolated, finished event. These plays, far from monolithic, examine the differing modes of what it means to witness suicide. Various, these plays stretch from an interrogation of what it means to adequately intervene, to a reflection upon the violence (and incessant compulsion) of interpretation, to the strained complicated call of witnessing that flutters between desire to be acknowledged and wish to recede from our gaze.

I want to look at how these plays witness madness through suicide. This will, in part, involve a complication of the representation of madness, but beyond this, will involve an interrogation of our interpretations and understandings of suicide, crossing over ethical and political lines. Moreover, I will interrogate how these plays respond to this complicated nexus of witnessing, posit their own particular ecologies and configurations, and look back upon their own looking. In all of these plays, it will involve to some extent their negotiation of the fictional in representations of suicide. I will question, not only the theatrical and metaphorical modes by which this may be possible, but examine how these plays incorporate the audience into these processes.

Victim, Perpetrator, Bystander: Seeing the Witness in 4.48 Psychosis

'Witness me' (Kane 2001: 243): this imperative emerges in the final moments of Sarah Kane's *4.48 Psychosis*. *4.48 Psychosis* continually refers to issues of sight, of light and of looking. The main character of the work repeatedly implores for our regard. Yet, coupled with this, they seem to reject the gaze of the audience, of the stage. There is an injunction to look away; sight has become constraining and crippling. Between this appeal and rejection, the simultaneous construction and interrogation of witnessing takes place.

Kane's play, first produced in 2000, represents a watershed moment in depictions of mental health and madness. The subsequent two plays of this chapter, David Greig's *Fragile* (2011) and Bush Moukarzel and Mark O'Halloran's *Lippy* (2014), whether consciously or not, emerge in the wake of the rupture of *4.48 Psychosis*. *4.48 Psychosis* is a play that eschews traditional narrative description; influenced by Martin Crimp's *Attempts on Her Life* (2007), the script has no clear direction or characters, rather taking the form of poetic fragments. The play appears to wander between internal monologue, duologues between patient and psychiatrist, entreaty to an imagined other, the recitation of psychiatric exercises and documentation. Sprawling across these fragments appears to be a voice, articulating its pain, its descent into the suicidal, culminating into a suicide imagined as an act of disappearance.

Unlike the subsequent two works, whereby suicide is an external event, whether precarious or completed, *4.48 Psychosis* attempts to engage directly within suicide and the suicidal as lived experience. In this sense, suicide is not object, or singular event, but rather experiential process. It is about the rise to the leap. And yet, *4.48 Psychosis* avoids causal accounts, it positions the suicidal process, not to ask the why, but to interrogate the possibilities of response. If there is discussion of causation, it is in the refusal of easy explanations. The main character of *4.48 Psychosis* repeatedly resists any Werther-like Romantic notion of suicide: claiming, 'I do not wish to die' (Kane 2001: 207) and 'I have no desire for death. No suicide ever had' (Kane 2001: 244). This seeming paradox appears throughout the play: 'I have become so depressed by the fact of my mortality that I have decided to commit suicide' (Kane 2001: 207).

This is a portrait of one who takes their own life but do not wish to die. Far from a romanticized embrace of suicide, *4.48 Psychosis* examines how suicide occurs despite its undesirability.

Understanding *4.48 Psychosis* through the lens of witnessing is not necessarily new. Alicia Tycer (2008) interprets the play through a notion of melancholic witnessing. In a review of Christian Benedetti's production, Lyn Gardner notes how the production is, 'an exploration of ways of seeing' (Gardner 2009: np). And yet, many of these productions frame witnessing alongside, or even under, other constructions. For Tycer, the psychoanalytic construction of melancholia props her notion of witnessing. These interpretations offer crucial developments in understanding *4.48 Psychosis*, however they situate witnessing underneath other constructions. I want to look at witnessing from the perspective of witnessing itself.

Haunting the analysis of this play is, inevitably, the circumstances of Kane's own death. 'How do you judge a 75-minute suicide note?' (Billington 2000: np) asks Michael Billington, in his notorious response to Kane's final play. The play had been written during a period of severe depression, Kane had committed suicide soon after its written completion; the first production was thereby posthumous. Billington would elaborate the remark, comparing her to Sylvia Plath, implying Kane belonged to a lineage of suicidal female writers, 'recording the act she is about to perform' (Billington 2000: np). Likewise, some frame *4.48 Psychosis* as a work that Kane had martyred herself to produce. Charles Spencer described it as a work of 'artistic heroism' (Spencer 2000: np), that it was a chronicle of Kane's depression such that, 'it is impossible not to view it as a personal howl of pain' (Spencer 2000: np). In assent, Susannah Clapp describes the play as, 'a declaration of suicide' (Clapp 2000: np). This framing of the play as autobiographical extends beyond the original production. It is described by Charles Isherwood as being, 'close as world literature has ever come to receiving a dispatch from a dead soul' (Isherwood 2005: np) and Billington continues to insist that, 'the play can hardly be divorced from the tragic circumstances surrounding her suicide in 1999' (Billington 2008: np).

What does it mean to dub something a suicide note? The suicide note reflects our desire to locate a clear meaning to suicide, to explain it away. Society attempts to contain the suicide by forming pathologies and ratiocinations. This tendency, to seek explanation rather than

engagement for the unknowable, extends beyond individual scraps of writing. Critics even turn entire lives into suicide notes, forge teleological biographies from their actions and their work. From an aesthetic point of view, denoting something as the suicide note sets work outside the daunting difficulties of the cultural and the aesthetic. Billington, in his review of the original production, would not allocate a star rating. Perhaps this was intended as a sign of respect, yet it also unavoidably denotes the play as 'unreviewable'. To call something a suicide note is to take it outside the realm of aesthetic judgement. This often falls, unsurprisingly, upon gendered lines. In Billington's review the reception follows a worrying tradition of forming a 'genre' of female writers who commit suicide. The critical reception of writers such as Virginia Woolf, Sylvia Plath, and Anne Sexton has sometimes focused on the mythology of their suicide to the detriment of the appreciation of their worth as writers.

The irony is that *4.48 Psychosis* is a play consummately concerned with how our gaze, the way we look, can be an unbearable violence. A play so consummately concerned with troubling the way we respond to suicide has been imprinted and contained as a suicide note. In a play that focuses upon the act of silencing upon those designated as mad, many critics have refused to listen. This irony, however, should not be mistaken for a purposeful intention on the part of Kane. That would re-inscribe the work into a romantic incorporation of the suicide act as something built into the genus of the play. Rather, this analysis will attempt to elucidate the deft association of sight and damage across this play, and the potential to witness through a radical, contradictory means of looking.

Kane's play premiered in 2000, shortly following her suicide. Kane's plays had often negotiated questions of suicide: both the Soldier and Ian commit suicide in *Blasted*, Phaedra kills herself in *Phaedra's Love*, Robin hangs himself in *Cleansed*. But this represented a departure, in its examination of interiority, a self-reflexive act of looking at looking. Influenced by Martin Crimp's *Attempts on Her Life*, in *4.48 Psychosis*, Kane resisted many of the traditions of the dramatic text, drawing closer to an interior monologue. Whilst Kane's play premiered in the same year as Joe Penhall's *Blue/Orange*, they almost seem to remark from opposite positions; Penhall examines the gaze of the institution and its treatment of the mad, whilst Kane looks from the interiority of the mad person to their mistreatment under these institutions.

4.48 Psychosis has since become well established as part of the canon, attracting a variety of productions across the globe. If I am interested in its significance to the context of Britain and Ireland, it should nevertheless be noted that the significance of this play stretches outside these borders. Likewise, it should be noted the subsequent plays of this chapter will, inevitably, have been shaped by their apprehension of suicide by this play. My own experiences of the production have been limited to student productions, rather than any professional version. Thus, my own analysis of the production will primarily use upon the text of *4.48 Psychosis* and draw upon photography and certain descriptions of various productions, with a focus upon the original production by James MacDonald at the Royal Court in 2000.

Testimony: Sight and Light

If *4.48 Psychosis* is a work that returns to suicide as something lived as experience, what does it mean to testify to this effect? The main character repeatedly returns to light as an image to express herself, as a mode to explain her own acts of looking. If witnessing cannot be contained as simply sight, nevertheless metaphors of sight and looking can reflect back on the witnessing act. Typical imagery of depression depicts it as darkness or fog, or even the Miltonic imagery in William Styron's *Darkness Visible* (2004). In a sharp inversion, Kane evokes suicidal depression as sharp gleams of penetrating light. Depression, far from a cloud, is an illumination of an unbearable reality:

a consolidated consciousness resides in a darkened banquet hall near the ceiling of a mind whose floor shifts as ten thousand cockroaches when a shaft of light enters as all thoughts unite in an instant of accord body no longer expellent as the cockroaches comprise a truth which no one ever utters (Kane 2001: 205)

Light pervades the play, in gleams through her mind: 'Hatch opens/ Stark Light/ and Nothing' (Kane 2001: 239). The image of light, in its absolute white, has resonated across design decisions. Harpin notes how various productions of the play have been realized, 'through shards of brilliant light, white boxes and the multiplying reflections of glass' (Harpin 2014: 190). Throughout, these productions draw upon light, idealized white light and white space, and reflected gazes.

The use of light exceeds easy analogy. Light is not simply visual metaphor; it is the precondition of visual metaphor. The main character puts it in idealist terms: 'Why am I stricken? / I saw visions of God' (Kane 2001: 228). Light is the pre-condition of sight, as a result, it stretches beyond a metaphor. Derrida, in *White Mythology: Metaphor in the Text of Philosophy* (1974), notes how the heliotropic metaphor is always imperfect, acting as a metaphor of a metaphor. In using light, Kane's metaphor will always fail; the use of light becomes the base of the failure to testify. The main character refers to light, as unbearable and utterly clear, but exceeding the everyday and the expressible. The light of suicidal depression is not a concrete metaphor with signifier, it is the process of sight itself.

Kane weaves this concern with sight and light within many of the traditional constructions surrounding our understanding of witnessing. The classic trinity of witnessing, of victim, perpetrator and bystander dominates the play. Even the structure of the play tends towards this division; James MacDonald's original production of *4.48 Psychosis* was performed with three actors, according to David Greig, 'representing the division of a person into victim/perpetrator/bystander' (Greig 2001: xvii). Depression itself constitutes this old division, whereby, 'Depression is anger. It's what you did, who was there and who you're blaming' (Kane 2001: 212).

Within this, what is the position of the main character to this triad? Certainly, the character is a victim of this 'light of depression'. It precludes her ability to speak. The light is not merely inexpressible, it damages the ability to speak, it infiltrates the person who sees. Illumination, far from liberation, damages the ability to testify: 'I had a night in which everything was revealed to me. How can I speak again?' (Kane 2001: 205). Accompanying this, is a dissolution of self. The main character, despite the revelation of the light, seems incapable of forming a formal self, 'It is myself that I have never met, whose face is pasted on the underside of my mind' (Kane 2001: 245). Yet, the main character does not simply position herself as victim, rather she blames herself, she exists as perpetrator as well. As the doctor asks 'And who are you blaming?' she can only reply 'Myself' (Kane 2001: 212). Elsewhere, she frames her blame in more genocidal terms, 'I gassed the Jews, I killed the Kurds, I bombed the Arabs' (Kane 2001: 227). Likewise, the main character is a bystander to herself. She is dissociated from herself, stands as bystander to

her own roles as persecutor and victim. Mind and body have become utterly separated, and the main character can find herself as spectator to herself: 'Here am I/ and there is my body/ dancing on glass' (Kane 2001: 230). Again light and sight become image for the main character's predicament, this time as reflection. In original production of *4.48 Psychosis* at the Royal Court in 2000, directed by James MacDonald, a large mirror was positioned above the stage at a 45-degree angle. This manipulated and extended the possibilities of the theatrical space, actors could lie down on their back and the audience could see their faces clearly; reminiscent of a Busby Berkeley film, the bodies of the actors formed arrangements on the floor. In photos of the production, the actors appear on the mirror as if they were suspended in the air or floating, continuing Kane's exploration of disembodiment.

Across the piece the audience see the main character shifting between the positions of victim, perpetrator, and bystander. Kane uses light as a means to explore the complications of sight and image with regards to suicide as experience and process. Across these possibilities, images of light and sight are insidious and damaging. She is victim to the light, in rendering speech impossible, she is persecutor, as the light reveals her as culpable, she is bystander, as the light dissociates body from self. In this, light and sight are used to establish the impossibility of testimony, that to see is to be unable to exclaim or explain.

Psychiatry and the Absence of the Witness

If sight is shown to be internally damaging, capitulating to the erasure of the individual, then *4.48 Psychosis* extends this to a critique of contemporary psychiatry and the damage present in the external gaze. In objection to some of the interpretations that shape *4.48 Psychosis* as a personal cry of pain, or internal monologue, some critics have emphasized the play's overtly social and political commentary. Graham Saunders claims that *4.48 Psychosis* is, 'only ever partly introspective in its treatment of mental illness. For the most part it is an impassioned critique of the hospitalization and treatment of those with mental illness' (Saunders 2003: np). In this, Saunders perhaps is leaning too heavily on the divide between personal and political; in *4.48 Psychosis*, internal monologue is politically structured, the therapeutic sessions are warped by internal distress, the two have collapsed into one another.

If *4.48 Psychosis* uses light as an inexpressible metaphor and metaphor of inexpressibility, then the language realm of psychiatry is attentive only to the destruction of metaphor. In a discussion, where the subject claims to have plans to ‘take an overdose, slash my wrists and then hang myself’ (Kane 2001: 210), the doctor responds by merely pointing out the logistical difficulties. Later in the conversation, when the subject claims that, ‘I feel like I’m eighty years old’ the doctor responds, ‘that’s a metaphor, not reality’ (Kane 2001: 201). When confronted with the notion that, ‘the defining feature of a metaphor is that it’s real’ (Kane 2001: 201) the doctor begins to question whether the subject is delusional. Throughout, the doctor consistently refuses to acknowledge metaphorical and poetic language, the means by which the subject attempts to express and account for the lived experience of depression, rather attempting to reduce it to the literal, to the language realm of the psychiatric.

Both the bureaucracy and the language of the medical establishment is critiqued and mocked by Kane’s incisive gallows humour. The mental establishment is a faceless institution populated with, ‘Dr This and Dr That and Dr Whatsit’ (Kane 2001: 209). Kane evokes the trope of the delays and waiting periods in the NHS: ‘I dreamt I went to the doctor’s and she gave me eight minutes to live. I’d been sitting in the fucking waiting room half an hour’ (Kane 2001: 221). In one segment of the play, a list of medication and the main character’s varying reactions is spoken. The majority of the medication does not appear to help her, creating distressing side effects or exacerbating her condition¹⁵. Eventually, when the subject consumes an overdose of aspirin and mixed with alcohol, the only comments of this suicide attempt are, ‘Severe stomach pain. No other reaction’ (Kane 2001: 225). Kane satirizes and parodies how the language of the medical establishment translates even suicide, a result of extreme mental distress, into biomedical terminology.

The power of medical language is not only an external political force; it insidiously affects the internal state of the ‘I’. Kane references a variety of psychiatric tests throughout the work. Throughout the play, several sections are merely a selection of numbers darted around the

¹⁵ The exception to this is Melleril (the only anti-psychotic on the list) which is marked as ‘co-operative’ (Kane 2001: 224). However, the insidious term ‘co-operative’ marks a greater concern with patient compliance than well-being.

page. These sections are representative of a psychiatric test, whereby the patient counts down from a hundred in sevens. Each section progressively becomes more ordered, from a jumble of numbers scattered around with mistakes to a consecutive, ordered perfect line. This increase in 'sanity' and success in the test nevertheless correlates with an increase in desperation and suicidal thought. It is the language of the medical establishment which prevents her from understanding herself: 'My life is caught in a web of reason/spun by a doctor to augment the sane' (Kane 2001: 233).

Again, the complications of sight, of seeing, relate back to the triad of victim, perpetrator and bystander. The consequences of the failure to witness are framed as more consequential than the absence or success of the look. To look in this way, is to affect the one who looks as well. 'Please don't cut me up to find out how I died' (Kane 2001: 241). In describing how she died, she states, 'I'll tell you how I died. One hundred Lofepamine, forty five Zopiclone, twenty five Temazepam, and twenty Melleril' (Kane 2001: 241). In attempting to respond to the main character's distress, through translation rather than witnessing, the psychiatric industry commits harm on to the subjectivity of the witness herself. Bystander becomes perpetrator. Finally, in a complication of this critique of psychiatry, the doctor is positioned as victim as well: 'Most of my clients want to kill me ... I fucking hate this job and I need my friends to be sane' (Kane 2001: 237).

Alongside the internal damage of the main character through her own insight, through the portrayal of the medical establishment, the play demonstrates the damage that sight can inflict from an external force. Psychiatry attempts to bracket and control the main character. If *4.48 Psychosis* demonstrates how light and insight become acts of violence upon the self, it also frames how the contemporary psychiatry inflicts violence through the failure to see, the attempt to deny and contain all metaphor and experience. Again, across all these possibilities, sight and reflection become a form of violence, modes of sight become potential forms of violence.

The Theatre and the Audience, Possibilities of Sight and Witnessing

Across these two different interrogations of sight, as the internal light of insight of the self and the external diagnostic gaze of psychiatry, the audience are given understandings of sight as damage, of violation. The illumination of depression, obscures the possibility of testimony, and actively damages itself. The sight of depression eradicates the self, disembodies the identity of the testifier. The perspectives of the psychiatric industry, their perspectives, are likewise damaging. Destruction of metaphor leads only to a disregard and diminution of experience on the part of the suicide. If sight is continually a source of damage, can it ever become a more productive mode? Can our understanding of witnessing through looking and through sight ever be productive, beyond a catalogue of the harm sight can inflict?

We return to the stark, short imperatives at the end of *4.48 Psychosis*: 'Validate me/ Witness me/ See me/ Love me' (Kane 2001: 243). This call seems to be to both the audience and the theatre itself. The audience and play are called upon to witness the main character of the piece. Testimony involves the direct appeal to the addressee to regard and watch them. *4.48 Psychosis* is constantly invoking and responding to this appeal. The shortest 'segment' of the play is merely the two words, 'RSVP ASAP' (Kane 2001: 214); these two short acronyms emphasize the notion of testimony as a desperate 'message' that, rather than passively consumed, demands an active response.

Yet, the main character of *4.48 Psychosis* also resists the gaze of the audience and the play. In a dialogue with an apparent doctor, the main character repeats the phrase 'Look away from me,' as she seeks to resist the medical gaze that subsumes her experience of mental distress into a biological phenomenon (Kane 2001: 227-228). The medical establishment fails in its ethical obligation to act as witnesses to the subject. However, later the phrase 'Don't look at me' is repeated without the habitual dash that Kane uses to denote dialogue. The addressee of the phrase has changed into a wider appeal. It is not only the gaze of the medical establishment the subject wishes to avoid, but the gaze of the stage, of the mirror, of herself, and of the audience. The play catches the audience between two possibilities. On the one hand, the appeal to be looked at, in the desperation of being unable to articulate the knowledge of depression. On the

other hand, the evasion of the gaze as diagnostic, from the impositions of a psychiatric model. This contradictory movement, between a call to be looked at whilst resisting the gaze, is central to *4.48 Psychosis*'s response to witnessing suicide as lived experience. In the final moments of the play, as the central character appears to commit suicide, the main character calls out to 'watch me vanish' (Kane 2001: 244). In play-text, the words dissipate and spread out upon the page. To watch something vanish, to see something disappear, invokes a doubled motion, of an appeal to watch as an ethical engagement, against vanishing as a reticence and withdrawal from such a gaze. It is between these two positions, the appeal to be looked at, the renunciation of the gaze, that *4.48 Psychosis* finds the productive potential for witnessing.

Steve Earnest describes his experience of the mirror in the production, noting how the actors appear on the mirror as if they were suspended in the air or floating, and how the four horizontal gaps in the mirror created the impression of a prison. Most interestingly, he states that, 'the production gradually trained the audience to watch the action in the mirrored surface' (Earnest 2005: 300). In a play that returns to the different implications of what it means to look, this production trains the audience to look differently. Much as the text veers between the imperatives to watch and to avoid watching, the production simultaneously encourages the audience to watch through the mirror, whilst (by means of the gaps in the mirror) suggests the 'gaze' may be itself a form of prison. The stage, and the gaze upon it, is both liberation and imprisonment.

In that final gesture, 'please open the curtains' (Kane 2001: 245), theatre itself has become the object as well as mode of investigation, a fully meta-theatrical sentiment. On the one hand, to open the curtains, is to start the theatrical, suggesting the main character is pleading for the theatrical, that in the wake of suicide, she seeks theatre as a site of witnessing. However, the line is also placed at the end of the play; the traditional convention, to close the curtains, seals the play off, a particular period of fictional representation that is then cut off. But, in the final gesture of opening the curtains, theatre doesn't close down, but extends. In this sense, opening the curtains, is not merely to begin the theatrical, but to extend beyond it, to refuse the concrete limitations of theatrical space. It opens up theatre, stretches the theatre beyond its

original moorings, looks beyond the representational space. This curious final phrase, seems to both invoke theatre as a possible space of witnessing, and seek to move beyond it.

James MacDonald's original production contributed further to this notion, as the ending of the play was accompanied by the opening of the theatre's shutters, letting in the noise and traffic surrounding the Royal Court permeate into the space. On the one hand, this is the notion that the theatrical can incorporate the external, letting the sounds invade the theatrical space. On the other hand, it is a gesture to the outside, to moving beyond the theatrical. Again, as with the pleading and rejection of sight, in *4.48 Psychosis*, witnessing is made possible through a doubled movement, between embrace and dismissal.

In *4.48 Psychosis*, the different possibilities and politics of looking become apparent. Through looking, understanding the complexities of the look, we can appreciate the impossibility of testimony of the suicidal (as unbearable light), the harmful consequences of the violating diagnostic gaze, and the possibility of witnessing as response. Across the play, looking is frequently either painful or an infliction. In the complexities of sight and light, barriers between victim, perpetrator and bystander become blurred; the politics of suicide upsets the traditional triad that repeats itself in Holocaust studies. The main character is victim to the light, is made to feel perpetrator, as the source of the light, and, in her disembodiment, stands as bystander to herself. The psychiatric forces, ostensibly a bystander to the main character's suffering, nevertheless in their failure to respond, insistence on transcribing metaphor into the literal, become perpetrator, whilst the doctor herself becomes a victim to the pressures of her job and position. Violence abides, positions shift with a glance, and damage proliferates.

The potential of witnessing through looking, in such an evisceration of the violence of sight, may seem bleak. But it is precisely through the evisceration and critique of what it means to look that *4.48 Psychosis* can gesture towards what it means to witness. The play invokes the necessity of witnessing, even as it demarks the dangers of looking. Witnessing, in *4.48 Psychosis*, takes on a radical form of sight, of both looking and not looking, of wavering between the two possibilities. Likewise, theatre itself is held up as a site of witnessing, but nevertheless the play seeks to stretch beyond the theatrical, into the wider world. The audience

are enmeshed within these processes, encouraged to look and not look, just as the stage is framed as both ideal site of witnessing and utterly inadequate. These seeming contradictions become the only mode through which to witness and engage with the aporia of suicide and sight.

What's My Motivation? The Implications of Engagement in David Greig's *Fragile*

If witnessing has frequently evoked questions of sight, it is by no means exclusively preoccupied with questions of light and image. Witnessing can also involve an interrogation of response, what it means to respond, and how we react to the mad person as suicide. In David Greig's *Fragile*, suicide is placed within a debate concerning the consequences of Conservative economic policy and resulting dilapidation of psychiatric health services. Jack, a psychiatric user, is distraught that his local centre is going to be closed down. He goes to the house of Caroline, one of the workers at the centre and threatens to commit suicide by self-immolation. He compares his action to the Tunisian activist Mohammad Bouazizi, whose self-immolation contributed to the Tunisian revolution. Caroline attempts to talk him down, repeating his political slogans, trying to suggest that such an 'extreme act' is unnecessary for political change. The piece ends ambiguously, as Jack decides whether to set himself alight, or hand the lighter over to Caroline.

Complicating this further is the mode by which Caroline's character is represented in the performance. The play, 'in the spirit of austerity' (Greig 2011: 51), has only one actor, playing the character of Jack. The role of Caroline is, rather than embodied through an actor, played by the audience as a whole. The play begins with a request of the audience to play the part. This is not a request for the audience to speak in unison: 'Some of you may not want to do everything on the slides. That's fine. Some of you might not want to do anything. That's also fine' (Greig 2011: 52). The role of the audience to speak the words of Caroline is a choice. The audience members are encouraged to speak from lines projected upon a screen.

Fragile was produced in 2011 in *Theatre Uncut* alongside a series of other plays addressing the budget cuts of austerity. The original *Theatre Uncut* was a series of short plays addressing the budget cuts to theatre funding and general policy of austerity of the coalition government.

Since then, the company has produced a number of shows with new plays addressing topics such as the Scottish Referendum and the 2015 General Election. The explicit concern of *Theatre Uncut*, as written on their website, is 'to raise debate and galvanize action' (Theatre Uncut 2012: np). In terms of this, *Fragile* runs the risk simply of 'using' suicide as an emotionally manipulative device to deplore Conservative economic policy. Questions of madness, in particular suicide, have often been deployed as a rhetorical or emotional device, without a serious interrogation of the politics of madness or suicide itself. However, *Fragile* incorporates these concerns and questions, and is not naïve about its own understanding of the political; it is a play concerned with what it means to politically protest, our responsibilities to communal protest, and troubles our relationship to the suicide in those circumstances.

I want to look at how *Fragile* structures its engagement with suicide, how it resists a naively biomedical model, and how it places suicide in relation to its wider politics. But, beyond simply a practical critique of how suicide is placed, this will study how this converges and reforms into an examination of the politics and ethics of sight. I want understand the mechanisms by which *Fragile* looks at its own looking, ushers in the question of responsibility, and engages in an act of witnessing. I will look at how *Fragile* navigates the ethico-political axis when we engage with suicide. Also, I will examine how the role of the audience plays alongside the act of witnessing in *Fragile*. That is not to say that *Fragile* creates witnesses in a transformative effect, but rather the audience are enveloped within the play's negotiations with suicide, response and responsibility.

A close friend of Sarah Kane, David Greig has produced a substantial and wide-ranging body of work since the 1990s, he earns particular cultural relevance as one of Scotland's most successful playwrights and directors, currently acting as the artistic director for the Lyceum Theatre in Edinburgh. If the breadth of Greig's output defies identification of characteristic themes or occupations, nevertheless, Greig appears drawn to the politics of connection, specifically, the difficulty and possibility of meaningful communication across nation-states. Whether the railway station in *Europe*, the cornucopia of nationalities in *The Cosmonauts Last Message to The Woman He Once Loved in the Soviet Union*, or the staging of Western-Arab

interactions in *Damascus*, Greig appears drawn to the borders that forge cultural identities yet breed difference.

In *Fragile*, responding to the specific national backdrop of austerity, his concern with connection seems drawn to that between the mad person and the carer. Writ more broadly, he seems concerned with the ethical logics of responsibility between those in positions of power of care (if undermined by the state and legislative powers) and the dispossessed. An attention to the vulnerable (whilst not depriving them of agency within the narrative) seems to govern this play and its response to madness and suicide. The analysis of the production emerges from the text, having neither seen the original production nor obtained a recording.

Within The Leap, Precarity, Interaction

Fragile confronts us with suicide at its most precarious: within the 'leap' itself. The other plays of this chapter are concerned with how we engage with suicide as known fact, documented statistic, or psychological process. Plays such as *Lippy* are placed after the leap, are concerned with the aesthetic possibilities and ethical responsibilities within mourning. 4.48 *Psychosis* is more concerned with the illumination of suicide as process than with the suicide as event. But *Fragile* embeds the audience in the event of the leap itself, and in doing so, emphasizes the suicide as an unnecessary, as something potentially evaded. This uncertainty should not lead us to take the moment of suicide less seriously, as Amery notes, 'a subsequently "rescued" potential suicide is often at the moment of the act a deadly earnest real suicide, so much so that the distinction between suicides and suicidal ... is quite arbitrary' (Amery 1999: 81). If the other plays of this chapter are concerned with how we regard suicide as a completed occurrence, by looking at the suicide amidst the leap, by not 'completing' the event in narrative terms, *Fragile* emphasizes the preventability of suicide from within the event itself.

Yet, to usher in the suicide as a 'preventable event,' and to invoke our responsibilities, is to usher in the difficulties of causation. To simply evoke a semblance of responsibility is not necessarily radical. Simplistic portrayals of suicide frequently portray it as an irrational and brief compulsion, as a condensed, pure moment of irrational madness. In such accounts, our responsibility to the suicide is that of a liberal individualism; simply to say the right thing, to

argue and persuade for the irrationality of the event. In doing so, we risk avoiding the wider socio-political tapestry within which the suicide is concerned and emerges.

Audience interaction in this sense does not necessitate a deeper response to suicide and may even obscure it. Ludological framing and gamification of suicide within the leap can quickly re-enforce de-politicized understandings of suicide. It can suggest deep cultural structures can be rendered simply solvable through individual action. In this sense, the framing of ethical responsibility involves an individual encounter that somehow can be seated outside or above the political.

This is not to claim ludological interactions are all inherently a depoliticized modes of engagement. Instead, I am pushing against the notion that audience interaction within itself ushers in a new, radical form of spectatorship. To involve the audience in forms of spectatorship that veer outside conventional theatrical modes does not necessitate a radical political position. Rather, we need to situate the mechanics of the production alongside a critical analysis of how *Fragile* critically frames suicide. I suggest the radicalism of *Fragile* emerges not simply from its particular form of audience interaction, but how this manifests alongside a deeply political and radical conception of suicide itself. Moreover, far from innocently deploying an interactive framework, it deconstructs the possibility of theatre to elicit responsibility.

Multiplicities of Suicide Within the Leap

Rather than naively understand the mechanics of interaction as a mode that directly transforms audience members into 'witnesses,' we must look at how the 'interactive device' of the play converges with the wider narrative structuration of suicide in the piece. If suicide is commonly framed as the result of madness, the regrettable result of biomedical mental health problems, in what way does Greig resist or conform to these expectations? Most of all, if representation of the suicide is confined to within 'the leap' itself, how does Greig allude or relate to the personal and social structures that surround the leap itself?

Jack attempts to frame his suicide as a political protest. He compares himself to Mohamed Bouzazi, a Tunisian protestor whose self-immolation contributed to the Tunisian revolution.

Jack frames his suicide as a possible catalyst for change, romanticizing about, 'the day he lit the spark which changed the situation' (Greig 2011: 62). Jack, in these terms, rather than understanding suicide as an expression of self-hatred or self-destruction, expresses his act as an abandonment of the self in lieu of the political ends.

The mode of suicide – self-immolation – has a historical, cultural and metonymic implication of the elimination of the self in favour of igniting political change. It takes various forms, emerging in Asian cultural and religious practice, notably in particular forms of Buddhism and Hinduism. More famous contemporary examples include the Buddhist monks protesting the South Vietnamese government's oppressive regime in the 1960s, Tibetan Buddhist monks objecting to the Chinese occupation of Tibet, and cases against the reservation system of India. Speaking of the Tibetan immolations against Chinese rule, Tsering Woeser even rejects the dubbing of suicide, as, 'self-immolation is not suicide, and it is not a gesture of despair. Rather, self-immolation is sacrifice for a greater cause, and an attempt to press for change' (Woeser 2016: 26). During the Arab Spring, the more commonly Buddhist and Hindu practice of self-immolation occurred within Muslim communities in Tunisia, Algeria and Egypt. Given that cremation is, in general, understood as haram in Islam, the act of self-immolation takes on further complications.

With this particular genealogy, Greig's use of self-immolation sits uncomfortably as an appropriation of a very particular non-western act. The occasions of self-immolation have commonly been used as a means of western oppression; Gayatri Spivak famously exposes how the practice of sati was used and framed by westerners in order to propagate orientalist structure; its abolition by the British administration, 'has been generally understood as a case of "White men saving brown women from brown men"' (Spivak 1994: 93). In the case of *Fragile*, Greig is drawing upon a romanticization of self-immolation, as the ultimate political sacrifice and a gesture of helplessness. The piece as a whole could be seen as an uncomfortable transposition of a non-western practice with a specific and complicated genealogy into a Western setting, possibly even hinting towards equivalences between the Arab Spring and potential protests against austerity in the United Kingdom. Greig's problematic attempt to find a parallel in a non-

Western context, an indulgence in orientalism, is the result of the little space Western conceptions of suicide give to the political.

Self-immolation is an action rooted in the impossibility of alternative protest, of extremity. Greig draws upon this as a call for political action, Jack challenging the audience to protest, that such an extreme act should not be 'necessary' to ignite political change. As Caroline suggests alternative forms of protest, such as a sit-in or an internet campaign, Jack is cynical about their efficacy: 'the old train of shittiiness will just go rumbling on down the old shitty tracks. How do I know that won't happen Caroline?' (Greig 2011: 63).

Yet, *Fragile* is not only concerned with an apprehension of how suicide can be figured as political protest. Jack is also presented as a vulnerable body, as a member of the precariat severely affected by the instabilities of a neoliberal economy. He is dispossessed of the psychiatric services upon which he is reliant. He, in part, acknowledges his own vulnerability, 'I am mentally completely fucked' (Greig 2011: 58). The piece does not simply romanticize Jack as a strident, self-sacrificial protestor. As the name of the piece connotes, Jack is fragile. The audience are confronted with suicide as a consequence of political and economic violence upon precarious lives. Suicide as intentional act is being complicated, by a consideration of how the dilapidation of mental health services deprives vulnerable lives of resources upon which they are reliant, resultant in a rise in suicidal behaviour.

In this, we can see how *Fragile* is playing with multiple levels of un-decidability. Most obviously, the aforementioned incompleteness of the leap, the suicide as preventable. The ambiguous end of the play buoys up the un-decidability of the event. Jack could complete the act, or hand the lighter to Caroline; the act is in suspension. But beyond this, *Fragile* is also drawing upon the precarity of mad lives in an environment of austerity. The title is expressly concerned with precarity, fragility being a core consequence of precarity, as Butler states, 'precarity exposes our sociality, the fragile and necessary dimensions of our interdependency' (Butler in Berlant et al 2012: 170). Jack is reliant upon services of which he is suddenly deprived. In both these senses, following Claire Wallace, *Fragile*, 'is a piece of theatre that works significantly to make the precarious palpable' (Wallace 2014: 130). Likewise, in negotiating both of these factors, the

impact and variability of our own responses is illuminated. To frame the suicide as avoidable, to frame austerity as optional, is to provoke our own responsibility for the suicide, to question how we can respond to it.

In both these cases, we are seeing a radical re-conception of suicide in political terms. Greig steers away from simply presenting suicide as personal tragedy, as inevitable outcome of internal instability. Rather, his understandings of suicide are framed between two political possibilities. Firstly, suicide as an intentional political act to protest and plead for change. Secondly, suicide as a consequence and human cost of austerity economics. In these two conceptions, we can read Jack's suicidal behaviour in two contradictory impulses: suicide as an active choice by a political agent against suicide as a result of neoliberal expediency upon passive victims. Likewise, both reveal potential political responses: to render suicide-as-protest unnecessary and to resist austerity's violence to precarious lives.

The piece, in negotiating these different possibilities, never clearly resolves their possibility. Jack even anticipates designation of madness as a means to discredit suicide as legitimate protest. Asked by Caroline to take his lithium, he responds, 'Fuck lithium Caroline. That's what Mr and Mrs Bouazuzu probably said to Mohamed. That's what anyone would have said to Mohamed' (Greig 2011: 62). Jack clearly inscribes himself as politically aware and active, and the piece is cautious of denuding him of agency. Yet, his protest concerns the deprivation of psychiatric facilities, that which renders him more vulnerable to suicidal behaviour. He acknowledges and owns his own vulnerability. Rather than settling upon a singular 'mode' or understanding of suicide, the piece is continually on the move, shifting between the two different apprehensions, showing how their mutual reliance and contradiction form an aporia.

This is, within itself, not necessarily an act of witnessing. To simply present ambiguities, to critically equivocate between frames of understanding, does not necessitate a self-reflexive gaze, an examination of our own sight, to look at our looking. To understand how this presentation of the aporia bleeds into an act of witnessing, it is necessary to examine how these critical structures interact with the interactive innovations of the piece. In doing so, I will

approach how the audience is enveloped into the play's own consideration of violence, and questioned how to adequately respond to the suicide.

What's My Motivation: Suicide and Audience Interaction

This chapter is not simply attempting to suggest theatre can provide a 'practical critique' of suicide, that can unpick or reveal the complexities of a suicide. Beyond this, I want to look at how theatre works out the complexities of our responsibility to suicide, through a self-reflexive gaze. In the case of *Fragile*, this involves following how its understandings of suicide converge with its mechanisms of audience interaction. Rather than arguing for a naïve transformative effect, I want to look at how the play incorporates and ensconces the audience in these questionings of suicide, and how the audience are encouraged to work out their own responses and responsibility. Wallace suggests that the mechanisms of the play, of the audience speaking the lines of Caroline, 'realigns relationships in the theatre space, casting the audience as a community but also more obliquely as agents' (Wallace 2014: 131). But how does this complicated realignment take place? I want to perform a more detailed excavation of how the play challenges the audience with the question of our response to suicide, even as it troubles our propensity to understand the event.

The first, most immediate level of interaction is one of roleplay. The audience are called upon to play the individual role of Caroline. Caroline is a character not embodied through an actor, but rather constructed in the fragmented call-outs of the audience. Caroline is not simply a function constructed by the audience – the audience are instructed to read out the specific words printed out for them – but only comes into being through audience participation. But in doing so, the audience become entangled in the phantasm of the character and her motivations. They are required, if at a dispersed and fragmented level, to embody Caroline. As Caroline (and the play as a whole) is confronted with Jack's suicide, the audience are similarly called upon to assess and consider her responses, to consider the individual character's motivations.

Simultaneously, a complicated notion of the communal begins to take place. The audience are also being called upon and formed as a political unit. Some of Caroline's lines appear almost as

political anthems, 'We'll call people. We'll use the internet. We'll start a campaign' (Greig 2011: 63). In this sense, Greig is not simply interested in establishing the character of Caroline, but attempting to forge a political communality amongst the audience. The words are not only spoken by individuals, but by a chorus. In this sense, this call for communal endeavour as protest involves an ironic interpretation of conservative rhetoric; during the explanation at the beginning of the play, the communal construction of the play is explained to be, 'in the spirit of big society' (Greig 2011: 51). This sense of community is buoyed up by the audience's own decision to attend an event called *Theatre Uncut*, itself a political choice. Likewise, the audience's necessary action for the piece to function asserts the need for communal action. Individuals can choose not to participate, but in order for the play to work, at least one person must read out the lines. If the play's narrative exposes the complexities of Caroline's response, the performance is ushering in a communal response to austerity as a whole. It breaks out of the individual narrative into a wider consideration of political action.

The audience are both playing the part of Caroline and forming a communal unit, and through these forms are involved in the play's question concerning how we regard and respond to suicide. But in what way do they converge in terms of their response? For Wallace, the audience becomes implicated in Caroline's apologies: 'if they participate as planned, the audience are obliged to explain the very situation they themselves are protesting by their presence at the Theatre Uncut performances' (Wallace 2014: 131). Across these two levels is an engagement across both individual and communal, across our responsibility to Jack, but this is necessarily taking place within and through a political environment. Both as the character of Caroline and as community, the audience are working out suicide both a protest and as a vulnerability of the precariat. In terms of an individual ethical level, the audience are brought into the intimacy of the duologue, and a response to Jack. Through this, Greig unveils the inability of framing suicide prevention in anything other than radically political terms. The work calls upon the audience to respond seriously to Jack's framing of his act as political protest, and to Jack as a victim of austerity. Simultaneously, however, the audience are fostered as a community, bursting out of the individual encounter. In part, the structural change and resistance needed to ethically respond to the suicide can only occur on a wider level, expanded

out of the individual encounter with Jack. *Fragile* draws possible lines between Caroline's individual responses to Jack and wider, communal terms.

Witnessing and the Self-Reflexive Gaze

Towards the end, *Fragile* more concretely becomes a reflection of spectatorship, action and responsibility running across both the individual level of Caroline and the communal level of the audience. The lines towards the end of the play, as the audience/Caroline follow Jack in shouting out, 'We're coming out from under the wardrobe ... This situation is all fucked up and it has to change ... That's what we'll say', (Greig 2011: 64) take place on multiple levels of understandings. The audience speaks out the mantra as a political unit, an enforced communality, taking a political stand. Yet, simultaneously, in part through Caroline's motivations, the words are incorporated as the desperate attempts to say anything in order to prevent suicide. As Wallace notes, 'following her admission of an overwhelming sense of pessimism and powerlessness ... is not particularly convincing' (Wallace 2014: 131). The individual motivations of the character undermine the communal politic of the audience.

Furthermore, the sequence questions and exposes the mechanisms of audience participation deployed in *Fragile*. The lines are simply repetitions of Jack's own mantra. In seeing Caroline simply repeat the words spoken to her by Jack, a black mirror is formed of the audience's own behaviour in simply reading out the lines on the page. If Caroline's lines are politically inert, empty repetition, to what extent is the audience's own activity similarly vacuous of radical intent? Even as it is invoked, the political communality is being undercut by the substance of the text. In this sense, *Fragile* is questioning the audience's own participation, the sincerity of their engagement, their ability to act and respond outside of the confines of the performance.

In this crisis of overlapping positions and intentions, *Fragile* places the audience in an interrogation of motivation, response, and witnessing. In the introduction to the play, as the audience are informed of their role in the performance, they are amusingly implored to not ever ask, 'What's my motivation?' (Greig 2011: 52). Yet, ironically, this crisis of perspective posits exactly such a question. It throws into relief the presumed action of engaging with the piece, speaking out the words of Caroline, repeating the power-point presentation. In both

individual and communal sense, the question of motivation opens up a level of responsibility. What is Caroline's responsibility to Jack: is it simply defined by her ability to talk him down from suicide, or does it involve a deeper form of engagement? What are the motivations of the audience for participating in the performance, to what extent will it take form outside of the performance, and how does it reflect our wider communal responsibilities to suicide in an age of austerity? *Fragile* is invested in mechanisms that question the motivational structures, of why and how the audience respond to both Jack's suicide and austerity as a whole.

Beyond an interrogation of the audience themselves, the play appears to be eviscerating its own claims to radicalism, or substantive response. Far from simply interrogating the audience's own agency, it is also deconstructing theatre's own potential to act as a radical force. As the piece forms a mimicry of the interactive device of the piece within the narrative, *Fragile* develops a self-reflexive and critical perspective.

In other words, *Fragile* uses the latticing of various motivations to bring our response to a crisis. Far from simply advocating a particular or single response, *Fragile* brings into our gaze the various crises and contradictions in our response to suicide. It uses a mechanism that appears to ape or mimic social action, only to drastically undermine and challenge its efficacy. It is this self-reflexive crisis which involves a mode of witnessing. Far more than simply sight, witnessing emerges a complicated mode of response. Witnessing anticipates its own crisis, indeed, is premised upon its own failure.

Agency and Response to the Precarious Suicide

Our constructions of suicide have often returned to questions of agency and motivation. Across *Fragile*, a complicated nexus of motivation and response comes into play. The motivation of the suicidal is interrogated, as Jack is held simultaneously as passive victim of austerity and active protestor. The motivation of Caroline and her attempt to prevent his suicide is highlighted against the motivations of the audience as political community. And finally, the motivations of the piece itself, the efficacy of the work itself, are brought into question. Through relating these different interrogations of agency, of the suicide, of Caroline and the audience, of the

theatrical, to one another, it is possible to witness what it means to respond to the suicide amidst the leap.

Fragile does not 'transform' the audience from passive spectators into active witnesses. However, it inveigles the audience within the wider questions of our responsibility to suicide, and complicates their position with regards to the performance. Questioning and emerging from looking at suicide from within the leap, it creates an undecidable understanding of suicide and is consistently both ethically and politically charged. It expresses a concern with the fragile and precarious lives of psychiatric users, and through participatory mechanisms, it inveigles the audience into these interrogations. Using multiple levels of participation, whereby audience are simultaneously individual character and political collective, in a self-reflexive gesture, it troubles the very political gestures it brings into being.

It Didn't Happen Like This: *Lippy* and the Crisis of Voice

In *Fragile*, the act of witnessing relates to the leap of the suicide, an interrogation of responsibility to suicide as unfinished, and thereby precarious and preventable. In contrast, what does it mean to witness suicide as a finished event? Our approaches to suicide contain multiplicities; to witness the completed suicide requires different engagements with responsibility and representation. There is no longer any prevention possible in the finished suicide, the subject we witness is outside the realm of intervention. Simply referring to the prevention of future suicides, whilst perhaps socially beneficial, is a displacement of the question. What does it mean to witness those who have completed suicide, what does it mean to respond and what do we owe (politically and ethically) to the dead?

Lippy is a response to a real-life suicide pact that occurred in Kildare, Ireland. In 2000, Frances Mulrooney and her three nieces - Josephine, Catherine, and Bridg-Ruth – sealed themselves inside their house, and starved themselves to death. They shredded and pulped their documentation and correspondence, stuffing it into black big liners. Despite a dearth of information, the act elicited attempts to make sense or meaning. Their deaths provoked moderate press interest, including a Channel 4 documentary aimed at detailing their deaths. A few fragments written during the starvation were discovered, which the *Irish Independent*

presumptively suggested 'reveals that the women starved themselves to death to repay a karmic debt as part of a new age philosophy which has its roots in Hindu worship' (*Irish Independent* 2002: np). The family was economically precarious, they had been forced to move from Dublin, and deprived of housing benefits; even the discovery of their bodies was precipitated by the landlord delivering a note telling the women to vacate the premises (*Guardian* 2001: np). Added to this complicated nexus of meanings is the particular significance starvation has in Ireland, from both the Famine and the structures of martyrdom surrounding Bobby Sands and the hunger strikes.

In *Lippy*, the conflation of these meanings is brought to a crisis. The summary of the play, repeated in both the programme and the back of the playtext, is a clear resistance to any verbatim or documentary claims:

In 2000 in Lexlip, co. Kildare, an aunt and 3 sisters boarded themselves into their home and entered into a suicide pact that lasted 40 days. We weren't there. We don't know what they said. This is not their story.' (Moukarzel and O'Halloran 2014: back-cover).

It is this refusal to represent or account for the suicide (even as it is drawn to the event) that marks the mode of response *Lippy* takes to the completed suicide. In breaching the question of the suicide pact, *Lippy* seems to suggest its impossibility of representation. Rather than attempt to explain away the incommensurability of the suicide event, *Lippy* is more concerned with examining the limitations of our capacity to account or represents the actions of the Mulrooneys. Beyond simply the epistemological question of the possibility of knowledge, this extends into a politico-ethical questioning: what is the violence we do when we attempt to explain? It is this concern that marks *Lippy* as engaged in an act of witnessing. If *Fragile* deployed meta-theatrical devices to question the possibility of proactive engagement, *Lippy* is a more reflective glance at the possible damage we inflict in our response.

Lippy is perhaps the work least evidently concerned with psychiatric service. Unlike *4.48 Psychosis*, there is no indictment of violence to the psychiatric services. Nor is it engaged, compared to *Fragile*, in the interplay between neutering resistance by appeal to mad structures and the consequences of ameliorating psychiatric services. Yet, our constructions of suicide are

inseparable from suicide; as Ian Marsh relates, madness is always the causation of the suicide, whilst suicide becomes the justification for the treatment of the mad. *Lippy*, in its questioning of our fascination with suicide, is opening up our cultural structures of madness when it comes to the suicide-as-event. Whilst not directly relating to psychiatric forces, it is witnessing the power politics of theatre, and exploring the unsafe borders between witness and accomplice.

Dead Centre's work has often orientated around voice, around its manipulation and alteration. A comparatively young company, their first work, *Souvenir*, played with voice, with performers Charlotte Moukarzel and Andrew Bennett only present through their voices. Meanwhile, in *Chekhov's First Play*, the audience were given headphones, as a director's commentary was laid over the action of the play; monologues spoken over, complaints about the actors moving away from their blocking, allusions to inter-cast romance. *Lippy*, in its evocation and evisceration of what the voice can do, offers us a new conception of what it means to witness.

Dead Centre is a company based in Ireland; the play surrounds a group suicide of four Irish women, and the play makes references to the Irish literary exile, Samuel Beckett. The context of Ireland reshapes and alters our understanding and interpretation of madness and suicide. If marked similarities can be drawn between British and Irish mental health treatment, nevertheless, the colonial past between the two countries complicates and deepens our understanding. In a play about voice and the voiceless, these themes take resonance in a country deprived of a voice, even a language, by colonial forces. In a play about starvation, the Great Irish Famine inevitably looms in the background. In a play about the desire for self-eradication, of using self-starvation as resistance, Bobby Sands and the hunger strikes immediately are evoked. If the silencing of a voice, and the tension between it being self-willed or imposed, comments upon suicide, nevertheless, it echoes and reverberates in a colonial past.

Lippy demonstrates the entangled theatrical ecologies of Britain and Ireland; that a billiard ball approach to cultural analysis becomes increasingly redundant. Moukarzel himself is British; their productions tour outside of Ireland, not only in Britain, but around Europe and Australia. This analysis emerges from my attendance of their production of *Lippy* at the Young Vic in

London in 2015. Compounding this, I saw their production of *Chekhov's First Play* at the Bristol Old Vic in 2016. In other words, their influence stretches outside of a specifically Irish context, they bring the preoccupations and cultural resonances of Irish theatre to other theatrical ecologies. In this sense, whilst awareness of a theatrical production's cultural moorings remains crucial, this analysis will interrogate and incorporate *Lippy* as a play that emerged from and then infused across cultural borders.

The Ethical-Moral Boundaries of *Lippy*, Treading in the Real

Lippy evades simple summary, the work seems to trouble the explanatory nature of traditional narrative. This introductory section involves an 'after-show talk', in the front of the stage, with curtains to the rest of the stage closed. Throughout this, the Interviewer questions the Lip-Reader about an imaginary show that the audience have supposedly witnessed beforehand. The show apparently concerned questions of lip-reading, and much of their conversation revolves around lip-reading, its practicalities, and its politics. The suicide pact is alluded to, that the Lip-Reader had been hired by the police to investigate a video of two of the sisters, 'looking at some CCTV for the Gardi, helping them to decipher something to further their investigations' (Moukarzel and O'Halloran 2014: 24), and that it had briefly been the subject of a potential theatre project. Towards the end of this section, an impromptu lip-reading takes place between the interviewer and lip-reader. This eventually breaks down, as the Lip Reader relates the story of how the Mulrooneys were discovered. Pondering over the bin bags they had filled with their documentation, after shredding and pulping, he notes:

It's like they didn't just want to die and leave this world, they wanted to get rid of any trace of their existence. They wanted to make it like they were never here. Completely cover the tracks of their existence. (Moukarzel and O'Halloran 2014: 28)

The gauze rises for the second section of the play, to reveal the stage as the house of the Mulrooneys. Subsequently, a series of abstract scenes involving the suicide pact of the Mulrooneys is played. These series of sequences obliquely tell the story of their starvation, whilst simultaneously deconstructing the possibility of representing the events. The voices of the Mulrooneys are distorted and manipulated, at one point they are given surtitles, later their

lips sync to pre-recorded male voices. The Lip-Reader invades these scenes, bursting from one of their bin bags stuffed with mashed, unreadable paper. He interacts in the scenes, attempts to engage and interpret with the women. In one scene, he offers a cup of tea to Bridg-Ruth, encourages her to eat; the teacup breaks apart in her mouth, 'she bites the cup. It cracks in her mouth. She chews the china. Blood runs down her face' (Moukarzel and O'Halloran: 36). At another point, he speaks out their dialogue, as they mouth his words. The section ends with their deaths.

The final scene is a monologue, written separately from the rest of the play by Mark O'Halloran. A pair of large lips are projected onto a screen, an image briefly glimpsed in the first section of the play. The lips talk without pause, in fragmented glances of thought, reminiscent of Samuel Beckett's *Not I*. They belong to Catherine, who speaks of the past, of her father and his drinking problem. Amongst this, brief speculations on loneliness and death are uttered. She states death is, 'Private / Entirely / Personal / It can't be shared / Only witnessed / And even then / Even that / Is futile' (Moukarzel and O'Halloran 2014: 62). At the end of the play, the gauze separating the front and the back of the stage is made transparent. But rather than revealing the house of the Mulrooney's: 'Everything has gone. It is a completely bare space; no room in Leixlip, no paper, no debris, no bodies. An empty theatre' (Moukarzel and O'Halloran 2014: 63)

Lippy, unlike the other two plays of this chapter, stems from a real-life case. It actively plays upon an actual, documented group-suicide. Rather than seek recourse in fiction, create its own fictional story as a means to circumvent the moral quandaries of representing 'real' suicide, *Lippy* uses an actual case of suicide even as it demonstrates the ethical and political consequences of theatre's limitations and inclinations. It is in these ambiguities and unfinished contradictions of the process, and situating and implicating itself within its own critique that marks *Lippy* as engaged in witnessing itself, rather than an external commentary upon it.

I am interested in witnessing as an utterance (rather than simply sight), that is never completed, that acknowledges and struggles with aporia. In this uncertainty, *Lippy* resonates along the ambiguities of suicide itself. The completed suicide always ushers in this question of self-erasure, the obligation to look against the response of self-erasure. Treating suicide as

simply another speech-act reduces our understanding. Suicide is a desire for self-erasure, not an active articulation; suicide eliminates communication even as it is uttered. And yet, suicide is simultaneously an act, a performance; if it is the elimination of the self, this elimination is necessarily written upon and through the body. As a result, suicide figures as aporia, an act that precludes its own utterance. If this aporia is at play in all suicides, the suicide pact in *Lippy* puts it forward in the extreme. Starvation as a mode of death, the destruction of all communication and written documentation, all stands as an act of the reduction and elimination of the self, in both material and non-material senses of the word. And yet, the extremity of the gesture, seems to invite attention, to place suicide as a performative and meaningful act that requires some form of meaning-making.

Any act of witnessing not only requires us to look (and declare) at the victim, but to reflect upon the process of witnessing itself. The various levels of witnessing (the testimony of the victim, the witnessing of the testimony by the bystander, the self-reflexive witnessing of witnessing itself) are always simultaneously operational. Thus, rather than create a false division, between an examination of the suicide itself against an investigation of our modes of understanding, we should understand that witnessing in *Lippy* is necessarily involved in both. To engage in how we look at suicide is part of engaging with suicide itself. In this sense, I want to follow how *Lippy* presses and pursues our modes of reflection upon suicide, how it deploys theatre as a mode to reflect and look upon its own behaviour, in particular through understandings of voice, and meta-textuality.

Putting Voices into Mouths

If *4.48 Psychosis* was a work that returned to sight as a means to explore the complexities of witnessing, then *Lippy* is a work that returns to images of the lips, the distortion of words, hearing and voice. The opening section of the play is an exegesis of lip-reading, as explicit critical commentary upon the activity. Lip-reading offers us a model through which to understand the processes of reclaiming and understanding a silent voice. Through lip-reading, we attempt to forge a voice out of the visual. The Lip Reader takes the silent moving lips, and grafts a meaning out of their motions. In a similar way to how we take documentation (in

suicide, notoriously the suicide note), and attempt to forge an explanation, lip-reading is not simply a passive interpretation, but an active and forceful implantation of meaning. Indeed, as is foregrounded in *Lippy* itself with a clip of John Terry's racist abuse upon the football field, such lip-reading can even have legal consequences: 'a man can be convicted because of what his lips say!' (Moukarzel and O'Halloran 2014: 19).

Why is lip-reading necessary? The lip-reader talks us through examples from *2001: A Space Odyssey* and *Casino*. In *2001*, the crew have entered a sealed-off room to attempt to avoid the surveillance of Hal, the homicidal computer A.I. In *Casino*, the two gangsters attempt to cover their mouths, in order to protect their conversation from government. In both cases, lip-reading becomes a means to overcome resistance; it is a mechanism of surveillance, a forceful attempt to gather a voice which the subject has attempted to seclude. Lip-reading is, necessarily, something done forcefully upon the subject.

Beyond simply the common thread that lip-reading is often performed on the unwilling or the unknowing, lip-reading also offers the possibility of misunderstanding, of incorrectly putting words to lips. As the Lip-Reader explains during the after-show, 'a single shape made by the mouth can have multiple meanings. The word "bear" is the same as "pear" for instance' (Moukarzel and O'Halloran 2014: 21). Multiple meanings can be extrapolated by the same physical movements, offering the possibility of mistake. Towards the end of the play's after-show talk sequence, an impromptu lip-reading is set up between Interviewer and Lip Reader. As the Interviewer tells his story of awkwardly going to a gig, the Lip Reader incorrectly guesses many of the words, only correctly forming fragments, and creating a deeply distorted and different story. In contrast to the Interviewer's tale, the story of the Lip Reader is fragmented, violent and misogynist; 'in crowds of people' becomes interpreted as, 'I smashed her head in' (Moukarzel and O'Halloran 2014: 26). The overlapping of the two speeches, as the Lip Reader talks loudly (his own ears blocked by headphones playing loud music) over the Interviewer, gives an impression of two stories competing for a voice; the Lip Reader's interpretation is violently talking over that which it seeks to interpret. Ironically, the only word the Lip Reader self-consciously struggles with is 'violating' (Moukarzel and O'Halloran 2014: 26).

Lip-reading is a mode of interpretation that exceeds reclamation into a reinvention of a silent voice. Within this reinvention is not only the possibility of failure, but potential violence in its intervention. In *Lippy*, lip-reading becomes a mode through which to examine political structures behind meaning-making. Lip-reading takes a trace of the voice, the physical movements of the lips, in order to assert a dominant narrative. It parallels to our tendency to take the paraphernalia of an event (such as the scraps of paper written by Bridg-Ruth as she was starving) to find explicable narratives. It becomes a wider image of the mechanisms by which we make meanings and expound upon the completed suicide as an unknowable event.

Witnessing, the Textual and the Voice

The practice of lip-reading is explicitly engaged in our understanding of the voice. In other words, we should not merely understand witnessing or constructions of power in simply textual terms. Beyond simply language, *Lippy* is expressly concerned with the question of voice. If *Lippy* returns to the silence of the completed suicide, and our compulsion to speak over it, then this silence is particularly rooted in voice. Lip-reading in *Lippy* more specifically revolves around the notion of voice, its location in the body, words as spoken and emerging from something corporeal, as occurring within and resonating alongside space. If we accept that part of witnessing suicide (and madness more broadly) is contesting with silence, then we must look at how *Lippy* takes advantage of the theatrical opportunities in investigating the voice and its potential silencing.

What is voice? Voice acts as signifier and inscriber of identity; Kristen Linklater draws upon its Cartesian suggestions, 'voice *is* identity. Your voice says I am' (Linklater 2010: 43, italics in original). But also, voice is concerned with corporeality; it emerges from the body (and is culturally demarked by it). Adriana Cavarero takes this even further, suggesting that, 'voice is so inherent to the human body that the body can be considered its instrument' (Cavarero 2012: 71). Likewise, voice can only take place in space. If we experience voice through space, we also experience space through our voice. Erika Fischer-Lichte notes how the voice conjoins these various concerns, that the voice unites, 'totality, corporeality, and spatiality so that the performance's materiality constantly regenerates itself within it' (Fischer Lichte 2001: 130). As

Annette Schlichter and Nina Sun Eidsheim declare, 'simultaneously tied to the body and entwined with the external environment, the voice exists in a complicated interaction with multiple physical and sociocultural formations' (Schlichter and Eidsheim 2014: np).

Voice takes place at a multitude of levels of understanding, it often plays along these various differing levels, or across them, or in-between. Konstantinos Thomaidis and Ben Macpherson note that 'this sense of "in-betweenness" pervades discourses about voice' (Thomaidis and Macpherson 2015: 3). Voice becomes something that occurs across both language and body. Voice acts as a nexus of a multitude of concerns, that exceed simply an understanding of voice as language. Voice, far from singular, is pluralistic.

To understand the voice as something not simply understood as textual, but as something multifarious, is to anticipate the immensity and diversity of silence, and its operations. Particularly when we understand silence can, beyond simply a linguistic absence, be also a vocal act. If voice is understood as an emergence from the body (rather than simply an aural transcription of language) then the self-starvation of the women, a mode of suicide that exemplifies the amelioration of the corporeal, is also in part the elimination of their voice. If voice occurs within a space, if we understand a space (in part) through vocal properties, by how our voice carries and reverberates, then by boarding themselves with the house, by sealing themselves in, doesn't this offer another means by which they withdraw and hold themselves up?

To understand voice as not simply textual, is to apprehend further dimensions of power and violence. If silence manifests through the body, then we can violently disrupt the silence of the body, force words through the body. If silence wishes to close off the space in which it resonates, then we can open up these spaces. *Lippy* explicitly engages and plays along these distortions and complexities of voice. Far from simply textual, it attempts to witness through aural distortion. In *Lippy*, lip-reading, its relationship to the voice, as forceful interpretation, as attempting to sunder voice from body and space offers a particular way of witnessing this violence. We can understand violence not only in terms of the semiotic, but in the multivalence

of voice as well. In doing so, our response, our witnessing, can also exceed a purely semiotic understanding of our utterance.

Lippy repeatedly returns to the image of lips and distortions of the voice. The voices of the aunt and sisters are never left alone, are always troubled. At one point, Bridg-Ruth and Catherine mouth to pre-recorded dialogue, 'their lips move and sync with the words we hear. Their voices are male voices' (Moukarzel and O'Halloran 2014: 36); the dissonance of the vocal tone to body not only serves to emphasize the violent construction of these represented voices, it reminds us of the often gendered terms in which this violence takes place. In one sequence, the Lip Reader speaks dialogue whilst the women mouth to his words, the 'Lip-Reader stands with the microphone, wearing headphones as in Part One and lip-reads' (Moukarzel and O'Halloran 2014: 39). If the Lip-Reader frames it as his 'reading' their dialogue, the impression is more one of them acting out his words; later, he admits to the possibility of his own mistake, echoing the possibility of the same shape of the mouth creating two different sounds. He is forcing his voice onto their bodies. The Lip-Reader, the modes of interpretative power he deploys, are clearly linked as patriarchal; at one point in the second section, he transforms into the absent father-figure himself, asking Josephine with anger, 'Aren't you going to talk to your father? I am still your father you know' (Moukarzel and O'Halloran 2014: 40).

Lippy examines, not only the more generalized concern with how interpretation can be violent, but how clarification and explication can obscure meaning, how the elliptical can be more pertinent. In particular, the manner in which it utilizes real-life scraps written by Bridg-Ruth throughout the starvation. She walks towards the audience as she speaks the words written in the leftover fragments: 'We must cast off these dense physical bodies which to me are like great overcoats which our soul inhabits' (Moukarzel and O'Halloran 2014: 35) But as she enters the section of the stage where the after-show panel was performed, the other women cover their ears and her words begin to be covered by a large static noise, 'similar to the effect of bad reception when speaking on a telephone' (Moukarzel and O'Halloran 2014: 35). In this movement, the piece is contrasting two different spaces. Through the transferral of the voice from one space to the other, from a space of seclusion to a space of explication, meanings and

understandings are obscured. Talking and testifying suicide is distorted the moment it shifts into explanation and explication.

Another manipulation of Bridg-Ruth's written testimony appears at the end of the second section. A microphone is held over Bridg-Ruth's mouth, and swung like a pendulum. Her voice is heard intermittently, as she reads out a real-life fragment, trying (and failing) to wrestle with their starvation, with loneliness, again with excerpts from the fragments written by her throughout the starvation. The Lip Reader, in taking away her microphone, attempts to lip read her final words, but only makes out the words, 'Remember to put the cat out' (Moukarzel and O'Halloran 2014: 44) His intervention has only led to a banality. In attempting to simply explain away, rather than engage with the complexity of the suicide event, he reduces and obscures engagement. In attempting to clarify her voice, to read over her voice, to speak over silence, he fails to wrestle with the complexities of suicide and its meaning, the ambiguities and complexities of the event.

Across these examples, in various manners, voice is used to enact and illuminate the processes of 'retrieving' a voice, of the violence involved. Theatre's particular relationship with voice, allow for a forceful examination of the violence through the vocal (rather than simply semiotic violence). That voice is something immediate, unrepeatable and specific to body and space, then perhaps reflects back on our assumptions on retrieving voice from text. The play's engagement with real-life testimony, using fragments written by Bridg-Ruth Mulrooney, position this not simply as external observation, but active ethical and political engagement. The play is continually looking back upon its looking, using the image of voice and lip-reading to cautiously upset any simple representative claim. Put simply, the play seems to return to a singular refrain, that, 'it didn't happen like this' (Moukarzel and O'Halloran 2014: 36).

Meaning Making in the Community of the Audience

Beyond this manipulation of the voice, about the broader themes of violence and interpretation, *Lippy* is particularly interested in theatre's own position towards interpretation and violence. The concern with the voice in *Lippy*, is a concern with meaning-making, with our responses to the completed suicide. The profession of the Lip Reader, is not only for the police

in reading CCTV footage, but as an actor in the imaginary show of the after-show talk. This simultaneous role of the Lip-Reader as 'actor' and as 'interpreter,' directly parallels the dangers of meaning-making with that of the theatrical. In *Lippy*, witnessing suicide constitutes an examination of the theatrical form and mode. Lines between the real and the fictional are deliberately teased. The play-text specifies that, 'the names of the Interviewer, Lip Reader, Adam the Technician and Front of House should be changed in accordance with the actors playing these roles' (Moukarzel and O'Halloran 2014: 13).

This positioning of role as actor is not isolated to the Lip Reader. A UV light is shone at the figures of the four women, creating silhouettes. As the women leave, their silhouettes remain, marked upon the back wall by the ultraviolet. The stage description specifies, 'Hold the image for as long as possible as silhouettes fade' (Moukarzel and O'Halloran 2014: 29). The women re-enter, now dressed in forensic gear, and examine their silhouettes. Taking out chalk, they draw outlines of themselves. They do this hurriedly, with, 'some urgency as the outlines of the figures are fading' (Moukarzel and O'Halloran 2014: 30). This sequence takes place at the beginning of the second part of the play; it reveals a concern with delineation and meaning-making, with meta-theatrical devices (the actors playing the Mulrooneys as forensic scientists).

As David Sack describes it: 'four figures in hazmat suits investigate, cleaning up the refuse, righting an upturned table. They are a forensics team, physically resetting the scene to retrace its unfolding' (Sack 2015: np). The sequence paints the actors as engaged in an act of forensics or autopsy. Even as the audience are introduced to the actors who play the Mulrooneys, the performers are framed as distanced from the roles they play, as tracing over the negative image that the women left behind. The role of the actor, for both the women and the Lip Reader, is framed as interpreter. *Lippy* returns to voice as image of the violence of interpretation, of meaning-making when meaning has been deliberately rejected. *Lippy* emphasizes, through these meta-theatrical glances, theatre's own involvement in these processes of making meaning.

Lippy leans upon the marginalia of the theatrical event, of its conventions, the after-show discussion and the interval. In these, it becomes notable that these supplementary conventions

to the main event infringe upon our meaning-making. This is not simply a questioning of the role of the stage, of performers, of the spectacle of theatre. It is directly involving the audience's own complicity in this meaning-making process. Namely, the audience are themselves part of these various proceedings, whereby they attempt to delineate and enforce clear meanings upon events that refuse such clarity. Again, this is not to suggest the audience are necessarily transformed or educated by the structures of the play. The audience is neither passively separated by these structures of witnessing, nor the sole source of them. Rather, the audience is inveigled and incorporated into the wider structures of witnessing occurring across the play. The play uses an investigation of voice and silence, and incorporates meta-theatrical devices to examine theatre's own complicity, and potential resistance, to violent meaning making. But, beyond this, the play places the audience within this meaning making process. The pseudo-interval offers a particular challenge to the audience, our understanding of the communal, and our response to our own voice. The Lip-Reader laments the decline of the interval in contemporary drama:

It's a shame that we don't have intervals nowadays, they've fallen out of fashion. It's a pity, as they're a good chance for the audience to get to know themselves. A chance to talk to your neighbour, get to know your neighbour, get to dislike your neighbour.

(Moukarzel and O'Halloran 2014: 42)

Following this, the Lip-Reader offers an alternative interval, one existing inside the play. This interval takes the form of a recording of the audience prior to the beginning of the play, as they enter the theatre, fragments of conversation chosen and emphasized. The recording is played across to the audience, their own voices emerging in bursts and fragments.

The audience are implied within these structures. My own experience, listening to these disembodied voices, was one of conjoined voyeurism and vulnerability. As Sacks suggest, 'perhaps, in the manner of the Mulrooneys, we recognize our own voices taken from us and redeployed' (Sacks 2015: np). But the audience are also still framed as complicit in this violent meaning-making. I was wary of my own voice, what I might have said, yet curious about the minutiae and mundanities in the voices of others. The audience are subjected to a form of

violence, but also invited to partake in the violence. In situating audience and performer both within these meta-theatrical gestures, the larger processes of meaning-making, in both creation and spectatorship, are interrogated and encompassed. This self-reflexive gesture, of examination turning back on itself, of considering how to respond to the suicide and reflecting upon our reflection, shift *Lippy* from an operation of critique into an operation of witnessing.

Resistance to Meaning and the Voice

The final monologue of the play, of Catherine's lips, relating her personal fear and thoughts, is oddly essentialist for a work that repeatedly returns to the damage of representation. It seems to insinuate the father abused Catherine: 'Your legs are wet too he said / The dew had fallen / We'll wipe you down / Inside / It's late' (Moukarzel and O'Halloran: 56-7). This seems out of kilter with the more nervous aesthetic elsewhere in the play. The monologue was written separately from other sections of the play, by Mark O'Halloran. In the context of the rest of the piece, which has deconstructed lip-reading, the relationship between the visual and the voice, and theatre's place in this meaning-making, the monologue seems oddly absurd, a sudden simplistic recourse into the explanatory models of psychological realism.

Yet, this final image is undercut and pierced. The image had briefly appeared before, in the Question and Answer session, when, 'an image flashes up on the screen, but it is not the clip they were expecting. It is a huge mouth speaking in silence' (Moukarzel and O'Halloran 2014: 21). When the audience see it in the end, they have already positioned it in the space of needless explication. The gauze, upon which the image of the lips has been projected, becomes transparent. Behind it, is a barren stage, without any of the features of the house in Leixlip the audience saw before. In an odd reversal of the final gesture of *4.48 Psychosis*, where the theatrical becomes a launchpad towards the outside, *Lippy* returns all representations to fictional imposition and the theatrical. Behind the naïve lips that splutter simplistic psychological truths, is an empty theatricality, a vacuous fiction.

Despite this, the play is not simply a condemnation of the theatrical. The play is an eviscerating critique of how we force voices into the voiceless, the abuse of power that occurs surrounding these interpretations. It uses voice and lip-reading to explore the modes by which

interpretation becomes violence. It directly implicates theatre and the audience in these interpretations, as involved in these meaning making procedures. But it is precisely in the self-reflexivity, in the staging of the emptiness and violence of these interpretations, that witnessing becomes possible. As Sack observes, 'it i`s only in the empty theatre that the women of Leixlip can appear – precisely by not appearing, by *not* saying “not I”' (Sack 2015: np, italics in original). If the completed suicide exists as a spectacle of self-elimination, then theatre's relentless exposure of the emptiness and violence of representation, far from mere self-criticism, becomes the appropriate response of the witness.

Conclusion

Suicide and madness are bound to one another as concepts. We justify our treatment of the mad through the threat or potential of suicide, whilst suicide is admonished and understood in almost exclusively terms of madness. This chapter has not been about attempting to decouple these concepts, or forming a practical critique of suicide. Suicide, alongside madness, seems to invite interpretations that act as forms of violence. Rather than trying to encapsulate suicide, in a finally complete interpretation, these plays wrestle with the politics and ethics of interpretation itself.

What this wrestling constitutes varies largely across each. Each of these plays deals with a different view and approach towards suicide. In *4.48 Psychosis*, suicide is understood as lived experience, as a process. *Fragile* places suicide as precarious event, as preventable, before the leap. The suicide in *Lippy* is completed, finished, sealed-off, utterly inaccessible. Witnessing, across these plays, does not reveal itself as uniform, or simply a speech act. Witnessing is a response to a particular dilemma, or aporia. The witnessing of *4.48 Psychosis*, as a direct response to testimony, is a doubled movement of sight. As sight and looking become modes of violence towards the main character, the possibility of witnessing as a radical form of looking, as both looking and not looking, presents itself. *Fragile* teases out what it means to respond to the uncompleted suicide, what it means to prevent as opposed to engage. Unlike the doubled movement of *4.48 Psychosis*, *Fragile* gestures towards the possibility and necessity of a response. The possibility of effective action, that stretches across the individual encounter and

the communal politics, becomes clear. In *Lippy*, the response to the completed suicide is always a violent one, and witnessing becomes a continual withdrawal, even as we are compelled to give it a voice.

If these modes offer a hope, a resistance to the violence of interpretation to suicide and madness, nevertheless they are premised upon the mutual necessity and impossibility of the act. In *4.48 Psychosis*, witnessing is an aporia of sight, an impossible act of both looking and not looking. In *Fragile*, the mode of theatre to enhance an 'active' response is revealed as fundamentally inadequate. *Lippy* presents an evisceration of theatre's attempts to give a voice, but acknowledges theatre is always compelled towards this meaning making. Perhaps, rather than understand this as the 'impossibility' of witnessing, we should follow it as the incompleteness of witnessing. Witnessing is not an occurrence that succeeds or fails; in these plays, witnessing appears to be a never-completed process.

What is involved in this process? Witnessing requires an interrogation of itself, a witnessing of witnessing; witnessing must acknowledge and incorporate its own failure, it relies upon its own deconstruction. In each of these plays, failure comes to the fore in self-reflection, whereby the inadequacy of theatre to act as a site of witnessing is bound up with the attempt to do so. In *4.48 Psychosis*, the curtains are called to be opened, the sound of the outside of the theatre is beckoned. In *Fragile*, the mechanisms of response within the theatre are demonstrated to be pallid images, inefficacious in the final analysis. *Lippy's* final image, and almost as an inverse of *4.48 Psychosis's* gesture of bringing the world within the theatre, reveals to the stage to be barren, lifeless, without meaning.

This tension, between the theatre and outside, is perhaps a site of contention for this understanding of witnessing. If it is part of the process of witnessing as an ethico-political response, then it is also cause to its failure. Our continued critical bracketing of *4.48 Psychosis* as a suicide note emerges from a tendency to evade deep engagement with work by suicides (in particular female authors) in favour of pseudo-autobiographical interpretation. David Greig's uncomfortable cultural appropriation of self-immolation in *Fragile*, results from an uneasy attempt to relate the fictional suicide to the wider political climate. *Lippy* works continually to

investigate this interpretative violence, but finishes with a monologue that provides easy answers over ethical engagement.

If the theatre is interrogated in its capacity and failure to witness, then the audience is likewise placed within the ecology of the theatrical, implicated in the processes. This is not a transformation, this chapter has been at pains to suggest that witnessing is not something that 'happens' to someone, but rather that the audience are incorporated into the wider structures of witnessing across the plays. If witnessing involves a self-reflection about interpretation and meaning-making, then the audience are always complicit in these modes. The calls from the main character to witness in *4.48 Psychosis* are directed, in part, to the audience, the mirrors and reflections of the original production enforcing this implication. Audience response, what it means to engage, are central to *Fragile's* interrogation of response. The Question and Answer session and the Faux-Interval both serve in *Lippy* to integrate the audience in its severe critique of meaning-making.

Witnessing offers a means to look at our looking. Many studies of witnessing have revolved around the semiotic and trauma studies; these plays show the possibility of extending our understandings of witnessing to the theatrical and suicidal. They show how we can move from beyond an attempt to lay claim to a concept, into a mode whereby we incorporate our own positionality, that this mode stretches across both political and ethical concerns. The critique of witnessing is bound up with the act of witnessing itself. Witnessing is simultaneously a critique of how we respond, look, interpret a phenomenon, and an action that moves beyond a critique. If witnessing is never fully successful, if witnessing is always in process, then nevertheless these plays begin to resist the old forms of violence inflicted through structurations of suicide and the mad. Rather than simply offer another interpretation, they reflect upon their own position, their relation to the suicide, and look back on their looking.

CHAPTER FOUR:

MADNESS AND THE ETHICAL ENCOUNTER IN AUTOBIOGRAPHICAL PERFORMANCE

The practice of autobiography is enmeshed in the politics of speech and narrative. The capacity to speak has always been intrinsically political: who can speak, to whom, and of what do they speak? The demarcation of language and speech is a manifestation of power. It is for this reason that autobiography – within which the speaker and object of speech are synonymous – is popular with a variety of marginalized and persecuted groups; through autobiography, they become able to ‘resist marginalisation and objectification and to become, instead, speaking subjects within agency’ (Heddon 2008: 3).

Autobiography as a genre is, as Jenn Stephenson notes, ‘more than simply a recording or retracing of a fixed, pre-existing life experience’ (Stephenson 2013: 3). Indeed, following the work of Phillippe Lejeune (1989), autobiography as the perfect expression of a pre-existing subject is an impossibility. Rather, it is the construction of a narrative out of one’s life, consolidated by what Lejeune refers to as the ‘autobiographical pact’, the acceptance by producer and spectator that what is shown is somehow ‘real’, despite its status as art. In the case of performance, this translates into an implication that the performer becomes the performed; that whilst we acknowledge the disjunction, somehow performer and performed become indistinguishable.

Autobiography through performance has been marked as an idiosyncratic genre; Linda Park-Fuller suggests that, ‘not exactly like a conventional play, a public speech, a literary narrative, or an autobiographical essay, this form, which partakes of each, defies traditional identification, containment, and criticism’ (Park-Fuller 2000: 22). The particular ontology of performance grants new possibilities to the politics of autobiography. As Peggy Phelan (1993) has famously argued, the ephemeral nature of performance capacitates its potential political radicalism. Performance - through its disappearance and ‘unmarked’ nature - can circumvent power-structures that are embedded in written, archived work. Moreover, watching theatre takes

place amidst a community; the spectators as much a part of the event as the performer. As Hans-Thies Lehmann suggests, theatre is a 'real gathering', where, 'the aesthetic act itself (the performing) as well as the act of reception (the theatre going) takes place in as a real doing in the here and now' (Lehmann 2006: 17). The politics of the relationship, not only between performer and audience, but between audience members becomes relevant.

Performance, by its very ontology, can provide autobiography with a particular set of aesthetic, political and ethical opportunities. Obviously, it is possible for playwrights to create autobiographical works, thereafter performed by others. However, these performances do not engage in the particular politics of the physical presence of the author on the stage. Peterson defines 'autobiographical performance' as when the 'author is onstage in the body of the performer' (Peterson 1997: 12). In other words, the performed self is the performing self. It is this form of theatre (as opposed to autobiographical work, by a director or writer, which is performed in the absence of the author) that this chapter seeks to explore.

The utilisation of the performer's body is a core feature of autobiographical performance. All performance is engaged, to a certain extent, with the politics and presence of the body; it has even been suggested that the notion of body of the actor (all actors, whatever characterization, are in a sense playing themselves) highlights a common thread between autobiography and performance. The body lends particular significance to autobiographical performance. The body of the subject is site and archive of the history that is being attested to. Moreover, the presence of the body dictates that the ending of this 'life narrative' is, necessarily, the performance itself.

Whilst much attention has been given to the rise of autobiographical performance (Peterson 1997, Sandahl 2003) there has been limited discussion on its particular application with regards to mental health and madness. This is despite a variety autobiographical performance concerning mental health, including amongst others the work of Kim Noble, Bobby Baker, and Adrian Howells. Autobiographical performance gives an opportunity for those silenced by modern psychiatry to speak against it, and supplant the narratives of the psychiatric paradigm with their own. Moreover, as Geoffrey Reaume has critiqued, the academic establishment has given, 'no serious attention to the voice of mad people who make up the background to their

studies' (Reaume 2006: 170). The practice of autobiographical performance counters this, it legitimizes and centralizes the mad person as a producer of meaning and narratives concerning madness.

The rise of autobiographical performance may appear surprising, in the context of post-structuralism and post-modernism. We have seen an increasing scepticism to the idea of the 'essence of the individual', or a notion of the self that is unmediated by society. However, the decline of the 'unmediated self' does not necessitate the death of selfhood as a concept; rather, it must incorporate the construction of identity. In other words, we must recognize that identity is a narrative construct; selfhood is, 'a cloth of stories woven together' (Ricoeur 1988: 246). If we understand selfhood as a process and construct, the importance of autobiographical performance becomes more pronounced. Rather than a declaration of identity or an excavation of selfhood, autobiographical performance becomes potentially a process by which identity is formed and created.

Many performers of the genre of 'autobiographical performance' have belonged to various marginalized groups, including those who have been involved with psychiatric institutions. There has been much work concerning women, homosexuals, transgendered people, disabled people, and mad persons. Some of the appeal of autobiographical performance to these groups is immediately apparent: from a practical perspective, the solo performance is comparatively affordable for emerging artists; moreover, the solo autobiographical performance, by its very nature, can avoid the structural social stigma and bias involved in the casting process.

It is, however, the importance of narrative in the construction of identity that causes autobiographical performance to be a useful site of resistance for marginalized groups. Narratives frequently operate as power structures for prevailing hegemonies. In order to challenge these narratives, counter-narratives must be provided. Thus, marginalized groups have the most to gain from autobiographical performance, as their 'official narratives' have frequently been alienating and stigmatising. As Park-Fuller suggests, 'experiences of illness, grief, crime, humiliation, crisis, and victimization are told personally and publicly, because, *off-stage*, these *personal* stories are largely untold - at least outside of confidential groups.' (Park-

Fuller 2000: 23, italics in original) This is pronounced in the case of madness; those designated as mad persons are frequently held to be inadequate or unreliable narrators of their own experience.

The Dangers of Essentialism

The counter-narrative of disenfranchised groups is still a 'narrative,' rather than a revealed, essential 'truth'. Counter-narratives do not resist through automatically claiming a greater veracity. Rather, they provide an alternative to the hegemonic narrative. Often, this in part occurs through humour and irony, mocking the supposed 'authority' of mainstream narratives. Alternatively, they re-appropriate the language of the hegemony they wish to resist, with individuals proudly declaiming themselves as 'crazy', 'mental', or 'mad'. This follows Judith Butler's claim that, 'those who are abjected come to make their claim through and against the discourses that have sought their repudiation.' (Butler 1993: 170) Moreover, they site the disenfranchised individual as a legitimate producer of narratives.

However, whilst autobiographical performance has the potential to be politically radical, it would be naïve to suggest that all such performance is necessarily progressive. As Deirdre Heddon observes:

Some might prescribe to essentialist notions of self and identity, thereby further repressing or constraining us. Some might speak 'for', rather than 'as' ... In acknowledging the potential of autobiographical performances, we need also to acknowledge the dangers. (Heddon 2008: 6-7)

Under this understanding, the danger of an individual claiming to be representative of an entire identity, ignoring the vast heterogeneity of experience, is brought to focus. Moreover, there are dangers of what Jennifer Drake (2002) describes as autobiography as self-revelation, whereby the performer unpicks and analyzes their own life with an aim to explain or solve a quintessential identity. In doing so, the performer fails to demonstrate the political construction of identity. Within some communities, certain autobiographical narratives have been regarded as politically neutered. For instance, in some homosexual communities, there is a wariness to the narrative of 'coming out'. Robert McRuer suggests that the narrative of

'coming out' is a, 'suspiciously white and middle-class move towards "self-respect," not a revolutionary social change, and many contemporary coming-out narratives might be seen as products of this shift towards individualism and essentialism' (McRuer 1997: 36). Likewise, within disabled communities, there is a suspicion of 'overcoming' narratives, Carrie Sandahl claiming that, 'I do not consider them crip stories or elements of crip culture; they fall squarely into the charity case and overcomer models' (Sandahl 2003: 42-43). He connects these narratives to the attitude of 'Better Dead than Disabled' and support for euthanasia amongst the non-disabled.

In these cases, we are seeing the rise of the depoliticised self, the result of a sentimental 'essentialism' regarding the individual. Performance is particularly vulnerable to the mythology of 'authenticity' that essentialism brings. As Heddon observes, the confrontation with the body of the performer, 'makes performance all the more tempting (and dangerous) a medium through which to make claims for the "real" or "truthful" self' (Heddon 2008: 27). I would suggest that these essentialist narratives, far from inculcating 'acceptance', overwhelmingly produce pity in the audience. Pity, 'implies not only compassion but contempt for the object, who is seen as weak or inferior.' (Sandahl 2003: 42) This is a pity that is divorced from the political, and far from eliciting an ethical response, obfuscates its possibility. Far from establishing resistance, Sandahl notes that, 'playing the "suppliant" does not win one civil rights or even common respect' (Sandahl 2003: 42).

However, it is possible to create a narrative that resists such a reactionary essentialism, by acknowledging and incorporating the contingency of its narrative. In others words that, 'narrative imagination never forgets its origins in narrative imagination' (Kearney 2002: 83). Park Fuller (2000) distinguishes between two different forms of autobiographical performance: as regressive 'confession' and as progressive 'testimony'. Whilst confessions perpetuate existing power structures, performance-as-testimony acknowledges the political construction of their identity, and the performance is not merely a representation of identity, but is rather explicitly procedural and constitutive of the identity itself. Moreover, many works engage in a refusal to disclose or reveal personal identity. Drake explores modes in which the performers, 'demonstrate that the self, close as we hold her, sleeps and wakes far beyond the reach of our

own arms' (Drake 2002: 214) . For Drake, by positioning self-revelation as a public performance, performers can refuse to disclose and establish their right to privacy. Thus, the progressive autobiographical performance, in order to function as a site of resistance, requires the recognition of the political structuration of identity coupled with an incorporation of the fundamental alterity of the performer.

The framing of autobiographical performance with the mad person as revealing an essentialist truth, and thus uncovering themselves as 'knowable', tends towards a relationship between audience and performer premised upon pity. Autobiographical performance that disturbs this notion, that frames identity as political and the performer as Other and unknowable, results in a different frame of spectatorship. It is necessary to examine other models of autobiographical performance by people who are 'mad' in order to establish how a relationship and connection not based upon pity, but rather upon alterity, and thereby an ethical encounter, can be achieved.

The Ethical Encounter, Performance and Levinas

'The only thing that can distinguish theatre now is an ethical stance' (Read 1993: 6). This bold statement by Alan Read, placing ethics as the principal objective of contemporary theatre, quickly leads to another question: what constitutes an 'ethical' theatre? Claire Wallace notes that in the work of both Read and Lehmann, there is a suggestion that, 'theatre's ethical promise lies in illuminating and enacting forms of relationality and connection' (Wallace 2014: 118). That it is theatre's concern with connectivity – not only between performers, but crucially between performer and audience – that capacitates it ethically.

In terms of ethics, I am not referring to the adherence to a system of rules, the possession of certain personality traits, or the pursuit of certain consequences and outcomes. Rather, ethics is an encounter that occurs between the self and an Other, whereby the self understands itself as responsible to and for this Other. Ethics is not the systematisation of this obligation, it evades systematization, to systematize is to do violence to it; rather it is the compulsion and feeling of obligation itself. Nor is it the reciprocation of this obligation; the ethical relationship

between the self and Other is fundamentally a-symmetrical; the self feels obligated, but does not claim the Other reciprocates this obligation.

The work of Emmanuel Levinas can be helpful in elucidating the notion of ethics; following the 'ethical turn' in Theatre and Performance Studies across the last 15 years, the work of Levinas has been useful in understanding the ethical possibilities of theatre. Levinas (1991, 1994) claims that ethical responsibility is instilled by the face-to-face encounter with the Other. This face is not a literal 'face', but nevertheless is phenomenological, an encounter with a presence that is Other than ourselves. The encounter with the face results in an ethical 'demande' to the self; the Other remains unknowable to the self, but the self is obligated. This phenomenological aspect to Levinas's theory explains the appeal to those studying performance; the presence of the performer and the audience's relationship to the performer's embodied presence is a defining trait of performance.

The application of the philosophy of Levinas to performance is not unproblematic. Levinas himself was highly sceptical of art, arguing in his article 'Reality and its Shadow' that the aesthetic process was a needless obstruction to the naturally occurring ethical encounter, claiming that it, 'constitutes, in a world of initiative and responsibility, a dimension of evasion' (Levinas 1989: 141), that it is 'the very event of obscuring, a descent of the night an invasion of shadow' (Levinas 1989: 132). In this spirit, it is important to note that I do not argue theatre is simply a replication or practical manifestation of Levinas's ethics as a whole. Indeed, as Simon Critchley has noted, the welcome increasing use of Levinas has often been accompanied by a fawning reverence, 'much of the work on Levinas tends to confine itself to exegesis, commentary ... and at its worst, homage' (Critchley 2004: 172) Rather, I am drawing specifically upon his notions of ethics as a phenomenological encounter, as an asymmetrical relationship of obligation, as unsystematized, and as based upon a fundamental alterity. Following these notions, I am exploring how certain performances have demonstrated how this ethical encounter can be instigated and, moreover, how in the context of madness its instigation can be a radical act of resistance.

The adoption of the ethical should not necessarily involve an abandonment of the political. The work of Howard Caygill (2002) clearly exposes the rich political backdrop to Levinas's work. That his work emerged between the twin catastrophes of twentieth century anti-Semitism - the Dreyfus Affair and the Shoah - is key to Levinas's critique of Martin Heidegger. In his recourse to communality, there is a clear influence of French republicanism, in his reconceptualization of 'fraternité'. Likewise, his problematic statements concerning Israel, when faced with the plight of the Palestinians, that, 'in alterity we can find an enemy' (Levinas 1989: 294).

Whilst the sundering of the ethical and political may be of great conceptual use, they rely upon one another, one capacitating the other. If the ethical encounter composes a question that must be answered with a decision, then that decision must take place in a political arena. Jacques Derrida has thoughtfully expounded upon this; noting that, the ethical not only requires a decision in the political arena, it capacitates the political. The infinite demand of the ethical encounter means no decision, or answer, can be fully just; as a result, our response becomes undecidable, and thereby a meaningful decision (an 'already decidable decision' is meaningless). The hiatus between the political and ethical capacitates the decision, whereas, 'without silence, without the hiatus ... we could simply unfold knowledge into a programme of or course of action. Nothing could make us more irresponsible; nothing could be more totalitarian' (Derrida 1999: 117). I am not questioning to what extent these performances provide a political 'answer' which the audiences can adopt; but I am noting that any such decision the audience makes will necessarily take form in the political arena.

Beyond this, I want to suggest and explore how the 'face of the Other' can become obscured. Hegemonic structures that construct our understanding of madness have situated the mad person as 'knowable', and thereby undermined the alterity that is the basis of an ethical encounter. Where political and social structures have obstructed the ethical relationship through this knowability, I would suggest that performance can have a crucial role in reinstating the ethical encounter and re-incorporating the alterity of the Other. In contrast to Levinas, who reveals an almost Platonic suspicion of the aesthetic, where art is only obstruction to the natural ethical encounter, I want to follow the possibility of performer as a positive and proactive force to re-imagine and invigorate the ethical encounter.

To what extent do the performances of this chapter capacitate this radical ethical questioning, and position the audience's decision? There is a sentiment that an emphasis upon the immediacy of performance underwrites its ethical potential, Nicholas Ridout notes:

Levinas' account of the encounter with the face offers the appealing prospect of identifying theatre and performance (in which such encounters are presumed to be a central element) as a cultural practice particularly well suited to the exploration of ethics (Ridout 2009: 54).

This suggests that utilising the precarity and responsivity of performance can emphasize the presence of the Other. It relies upon the phenomenological immediacy of the encounter with the actor's body (and face) in performance. This becomes heightened in the context of autobiographical performance, as the body of the performer becomes synonymous with the body of the performed subject. Unlike textual accounts of autobiography, the audience are confronted, in a phenomenological encounter, with both the metaphorical and literal 'face' of the Other. Yet this understanding of ethics as an untroubled phenomenological encounter is problematic. I would argue that this neglects the importance of alterity in the ethical relationship. It is the fundamental 'unknowability' of the Other that informs and capacitates our ethical relationship. If the Other is knowable, it is possible to systematize and satisfactorily 'answer' the ethical question. However, the unknowability of the Other necessitates that ethics is an ongoing process of continually reassessing our relationship to the Other. In this sense, we can understand the ethical relationship as contrary to essentialist narratives which inculcate a relationship of pity.

Sherrill Grace suggests that autobiographical performance has the potential to 'use the facts of a personal story to make us rethink the concept of *self* and the relationship of *self* to other' (Grace 2001: 15, italics in original). Following this, I want to ask how the forthcoming autobiographical performances instigate an ethical response from the audience, not merely by playing upon the precarity and immediacy of performance, but by simultaneously problematizing and complicating our relationship with this precarity. I do not wish to deny that the 'reality' of the phenomenological encounter in theatre elicits particular effects. I want to

question to what extent these performances play upon what Rick Knowles (2006) terms as a 'phenomenological frisson', whereby a tension develops between the compulsion of the phenomenological encounter of performance and its theatrical semiotic framing.

Related to this, many of these pieces play upon a notion or sentiment of the 'authentic'. As discussed earlier, the 'autobiographical pact' involves the sentiment the work however 'real', that in performance the performer and performed are synonymous. This thesis is un-interested in the application or achievability of the authentic. Rather, I am interested in how 'aesthetics of authenticity' are constructed and manipulated by these performances. By problematizing our encounter with the performer, by bringing the politics of representation to a crisis, the audience's relationship and aesthetic interpretation of the performer and performance becomes fundamentally undecidable. It is that which renders our relationship with the performer based upon alterity. Whilst we are called to make a decision, the decision is never finalized and is always in doubt. Indeed, it is the doubt and alterity that render it an ethical 'decision' rather than merely consequential.

The Uncertain Hand in James Leadbitter's *Mental*

James Leadbitter's *Mental* is a work preoccupied with talking and showing; Leadbitter (otherwise known as 'the vacuum cleaner') talks candidly and explicitly about his experiences with sectioning, political activism, modern psychiatry, suicide, and the police. It is a performance that could appear initially as adopting aesthetics with no scepticism of the potential of performance to unambiguously communicate the experience of madness. However, I will suggest that *Mental* radically shifts in its aesthetic, and leads the audience to question the autobiographical theatre and its relationship with mimesis.

Throughout *Mental*, Leadbitter is alert to the structuration of identity, and its political signification. The performance is made possible through the acquisition of his personal records through the *Freedom of Information Act of the United Kingdom 2000*. Leadbitter's account necessarily frames the treatment of his mental health with his history of political activism and encounters with the police. Police reports upon Leadbitter's activism and his medical records are interwoven; the audience are invited to see parallels between these two bodies of social

control. Police frequently appear at the most catastrophic points of Leadbitter's narrative; two policemen discover him following his second suicide attempt. Leadbitter notes how one of the policemen insulted and mocked him upon their discovery. The performance is haunted by the presence of undercover policemen in various environmentalist activist groups and their eventual betrayal. When a psychiatric profiling test labels Leadbitter as 'paranoid', the audience laugh, confronted with the absurdity of a state apparatus that justifies such suspicion and then proceeds to medicalize it.

In the climax of the performance, Leadbitter creates his own Mental Health Act and sections himself under it, a renunciation of the state's oppressive legislation, premised upon the facilitation of art and use of self-expression. The notion of sectioning oneself is an absurdity; yet it represents a reclaiming of personal sovereignty. It is an act of resistance; to prevent being sectioned by the state, he decides to commit himself. In doing so, rather than recourse to a de-politicized or essentialist self, he explicitly creates his own narrative and legalistic framework. That is to say, by appropriating the legalistic terms of 'mental health act' and 'sectioning', rather than attempting to create an 'authentic' or 'unmediated' confession, Leadbitter is acknowledging his resistance is also a narrative and legalistic framework, and thereby constructed. Rather than a recourse to essentialism, Leadbitter incorporates the contingency of his narrative, whilst establishing himself as a legitimate producer of narratives. Additionally, this has the effect of highlighting the contingency of the 'official' narrative created by the state. The reclaiming of the mad person's right to construct his or her own identity is the basis of the performance (the requisition of his documents makes the performance possible) and the performance itself (the performance itself, the 'end' of the narrative, is a public reclaiming of his narrative).

James Leadbitter's background, rather than a traditional theatrical performer, has been as a performance artist and as an activist. His work teases the edges between artist and activist; in a project such as *Madlove*, Leadbitter attempts to reimagine the asylum, working with people deemed mad by society, with lived experience of acute mental health difficulties, to forge their own spaces of care. His own work in *Mental* both emerges and discusses these aesthetic

practices. *Mental* itself emerged out of *Ship of Fools*, an initiative whereby he sectioned himself as resistance to being forcibly admitted to a psychiatric ward.

This section will concern itself with the work by artists who have been sectioned; the rest of this chapter contains autobiographical work by those who, if having a turbulent relationship with mental health services, were never formally sectioned. In addition to Leadbitter, I shall briefly bring *Talk About Something You Like* by Byron Vincent into comparison. Both these figures were sectioned multiple times throughout their 20s, in an environment whereby sectioning was sharply increasing as a mode to control mad bodies (following Labour's authoritarian shifts in the New Labour period, culminating in the 2007 reforms to the *1983 Mental Health Act*), even as mental health services were perennially underfunded and the supposed 'parity of esteem' between physical and mental health services stood as a fog of fantastical rhetoric bathing over an ever-depreciating landscape.

The analysis of this performances stems from watching Leadbitter perform in Bristol in 2014 and Vincent's 2014 production in Exeter in *The Bikeshed*. Leadbitter has toured the show to various locations. Much of this analysis stems from a thick observation of the encounter that occurred between myself, the audience, and Leadbitter. By nature of Leadbitter's use of setting (avoiding traditional theatre venues), the experience of the encounter would vary according to the venue chosen, the means of staging, the size of the audience. As a result, my analysis is tied to the Bristol performance, though informed more widely by commentators who attended the work at other locations.

The Aesthetic of Authenticity

Despite the clear acknowledgment of political construction, *Mental* at first seems to adopt a more essentialist faith in the possibilities of the immediacy of performance. Rather than taking place in a traditional theatrical space, *Mental* is performed in a small house; spectators are given the address a few days prior to the performance. This unconventional build-up to a production is followed by an unusual form of hospitality; upon arrival, they are escorted to small room in which to wait, asked to remove their shoes, and provided with a cup of tea and a slice of carrot cake. All of this suggests an attempt to undercut our traditional understandings

of theatrical artifice. Rather, it attempts to replace this with an aesthetic of authenticity; it appears to more closely follow the conventions of a social gathering, rather than the attendance of a theatrical production.

Eventually, the audience are taken to the room where the performance will take place, a small and stuffy bedroom with little room and space. The majority of the space is taken up by a duvet, from under which James Leadbitter climbs out of to begin his performance. His mode of address to the audience is direct; it is easy to form eye-contact, as the lighting is merely that of a domestic bedroom. He states that he will be talking about suicide, and notes if anyone wants to leave, that is understandable. Later on, he again enquires if the audience is ok, whether anyone is feeling upset. No-one responds, yet he pauses, and appears willing to communicate or respond to the audience. He appears to treat the audience, not as passive spectators, but as emotional individuals with whom he wishes to connect.

This aesthetic of the authentic continues in his use of equipment and props. The technology is mostly analogue: music is intermittently played on a record player, medical records are displayed through an over-head projector. When he shows his medical and police records that he has procured through the *Freedom of Information Act 2000*, he pulls out the piles and piles of physical copies from underneath the duvet; as though the bureaucratic weight and heaviness can be conveyed by their physical presence. Likewise, when discussing the medication given to him and its side effects, large numbers of anti-depressant packaging and pills are piled before the audience. In both these cases, 'heaviness' (whether of bureaucracy or medication) is conveyed by literal bulk and weight, a preference of metonym over metaphor.

The manner in which Leadbitter describes his lived experience of mental distress follows this notion; he denies any obstacle or difficulty in understanding his experiences. Far from suggesting that suicide is an incomprehensible trauma, Leadbitter claims to the audience that understanding suicide is simple. He asks the audience to imagine a physical pain so overwhelming that life becomes unbearable. This comparison again is not metaphorical, but rather a substitution; suicide is not something 'traumatic' and unfathomable, but rather the mental equivalent of physical pain.

Leadbitter frequently draws upon the importance and placing of his body within the performance. At one point of the performance, he reads a police report of his presence at a protest, noting the words 'Our Civilization is Fucked' scarred upon his back. Sardonicly correcting the report, Leadbitter turns his back to the audience and pulls up his top to reveal the words, '*This Civilisation is Fucked,*' a clear shift in its lack of a possessive. The scars themselves, procured in a performance piece with Franko B, alert to the politicization of the body, are a reclaiming of the space of his body, so often confined and claimed by the state through the process of sectioning. But this correction of the police report also takes advantage of the immediacy of performance, to establish Leadbitter as the ultimate authority over his body.

Whilst discussing suicide, he attempts to comfort the audience, by noting that however distressing, the story is fundamentally one of survival. His body is a guarantee of this fact; no matter what form of distressing subject matter, from a chronological standpoint, the end of his story is always the performance which the audience is experiencing. Jill Dolan suggests that performance is an encounter with the mortality of the actor, claiming that, 'sharing the liveness promotes a necessary and moving confrontation with mortality.' (Dolan 2001: 459) However, this is not sufficient, as Stephenson notes, 'death is both promised by autobiography and explicitly excluded from it.' (Stephenson 2013: 131); alongside the promise of the actor's eventual death, we also regard its current procrastination; performance is also a denial of death, a defiant 'not yet'. Following this, I would suggest all autobiographical performance is a testament to the continued survival of the subject.¹⁶ In contrast to Barthes' notion in *Camera Lucida* (1993) of the photograph-as-memorial, continually observant of death, autobiographical performance is lively, vivacious, a paean to life. His survival is necessary for the performance to function. In making this observation, he is evoking the notion of the body as site and archive for previous lived experience. He continually endorses the authentic notion of body as immediate presence and phenomenological encounter.

¹⁶ Even performances playing upon the imminent mortality of the performer, for instance Ken Garnhum's 1994 performance piece *Pants on Fire*, require (by virtue of the necessary continued presence) the continued survival of the performer.

Leadbitter is never naïve or essentialist concerning his identity as mad person; all of these aesthetic strategies frame Leadbitter's identity in a political setting. The narrative is not one of his 'essential' truth, but rather framing his experiences with mental health services. The production is made possible through Leadbitter's requisition of his personal records, a reclaiming of identity, as he attempts to create his own narrative. The body is regarded as a site of struggle that needs to be reclaimed from the state. Yet, it could potentially appear that Leadbitter is indulging in an aesthetic of authenticity: he attempts to undermine the traditional rituals that denote a performance and thereby inculcate artificiality; he addresses the audience directly, asks after their emotional state; the *mise en scène* of the production insists upon the 'physical truth' of the performance; his use of the body engages in its immediate presence, rather than the discourses which construct it. Whilst Leadbitter is suspicious of essentialism of identity, it could appear that he is indulging in another problematic aesthetic: the heralding of performance as unproblematically immediate, and the fundamental comprehensibility of the Other. However, I wish to suggest that rather than purely indulge, the production disrupts this aesthetic.

The Rupture of the Aesthetic of Authenticity

In a later episode of the piece, Leadbitter clearly and unambiguously ruptures the artifice of authenticity that he had produced. He describes his actions prior to his second suicide attempt. He notes how, before the attempt, he goes to a café in order to enjoy two of his favourite things: a slice of carrot cake and a cup of tea. This reframed the carrot cake and tea received on arrival from a kind act of hospitality to an integrated part of the performance. The aesthetics of the performance are ruptured; what was previously a moment framing the performance as 'authentic' and 'un-performative' is reframed as semiotic, structured and re-integrated into the artificial semiotics of performance.

This is not a gesture intended to elicit a response of identification or sympathy, to incorporate the audience into the act of the suicide attempt, but rather to disturb the experience of spectatorship. Leadbitter shatters the illusion of 'authenticity' that he had so carefully developed at the beginning of the performance. Leadbitter had carefully developed an

aesthetic of authenticity, using the variety of methods described beforehand, only to break it apart. He encourages the audience into not interpreting the work as a traditional performance; only to later emphasize how this 'authentic moment' was, in fact, a construct. In the performance that I saw, upon arrival people were readily conversant with strangers, the tea and cake having relaxed their sensibilities; however, upon the end of the production, most were silent, quickly picked up their belongings and left.

In this context, it is possible to approach the conflict between these two aspects of the production: the appeal for authenticity followed by its renunciation. This breach of 'authenticity' is arguably more effective than a continual aesthetic scepticism or nervousness. The audience is aesthetically jilted; cultivated expectations have been deliberately undermined. In the context of his earlier comment that suicide was 'easy' to understand, comparable to a physical pain, the gesture of the carrot cake and cup of tea seems a complete renunciation. Rather than understand or comprehend Leadbitter's experience, the inadequacy of our understanding is illuminated.

This conflict, between authenticity and aesthetic scepticism, finds its culmination in a particular moment of the performance. At one instance in the production I saw, Leadbitter began to stumble on his words, till he fell silent, at the brink of tears. He breathed in deeply, before apologising and saying he normally doesn't find performing the performance as difficult. The spectators find it difficult to know how to respond, and look at one another. There is a long silence. One person reaches out, and almost puts her hand upon Leadbitter's arm.

In some ways, this is a continuation of the stripping back of theatrical artifice, the aesthetic of 'authenticity', whereby the performer can acknowledge emotional difficulty or pain in the midst of the 'performance'. It could emphasize the precarity of performance, and thereby the unmediated encounter with the performer: an emotional outburst or reaction can emerge from within the performance itself, rather than structured or edited subsequently. Yet my reaction to this moment was not an immediate acceptance of this as an emotional outburst; rather I questioned whether the event had been premeditated or if it was spontaneous. Far from feeling a sense of unquestioned 'immediacy' with Leadbitter, I found myself suspicious and

resistant. This is rendered further complicated by a blog-post describing a later production of *Mental*, produced at the Edinburgh Fringe Festival, where Lyn Gardner similarly describes how Leadbitter breaks down and says he is finding it difficult (Gardner 2014: np). Consulting others who had seen the performance, it was clear this outburst had occurred on other occasions. However, it was also clear that Leadbitter did not perform this 'breakdown' in every performance. This further complicates the event's relationship with precarity. However, I would resist the notion that this 'unreliable' or 'improvised' aspect of performance results in an unfettered precarity. Far from rendering the event un-problematically 'live' and immediate, I would claim that it demonstrates how even precarity can be structured. The emotional breakdown becomes a potential 'event'; those who read Gardner's review will wonder if they potentially will have it occur in their production.

The nature of live performance means that spontaneous events can 'intrude' upon the planned structure of performance; the most famous examples being the phenomena of drying and corpsing. On the other hand, it is also possible to fake and use the supposed 'spontaneity' of these phenomena, to exploit the particular effect that the 'accidental' inculcates. There is a series of alternative explanations for how Leadbitter's breakdown occurred: that it is a constructed moment repeated for each performance; that it is a genuine event that has interrupted several times; that he has constructed a particular way to 'perform' when he is genuinely upset in rehearsals for the production; that he felt genuinely upset performing on one occasion, and decided to represent and repeat it in future performances; that it is a manufactured event he occasionally performs. All of these different possibilities offer differing notions and explanations of the relationship between the 'authentic' and 'mimesis'.

Ethical Responses to Mimetic Shimmering

In order to fully understand what Leadbitter is doing in this moment, Patrick Duggan's interpretation of Michael Taussig's work in *Mimesis and Alterity* (1993) is highly pertinent. In my first reaction to Leadbitter's 'breakdown', I was drawn into the confusion as to its status as either 'real' or 'representation'. This binary is a false dichotomy; the concepts are mutually constitutive. Theatre is always simultaneously both real and representational; in Duggan's

words, 'the theatrical or performative event is always already both representational, at the level of its fiction, and real, at the level of it happening in the world' (Duggan 2014: 191). This is further complicated by the relationship of representation to the politics of madness in autobiographical performance.

There are moments and shifts in performance whereby the tensions within the aporia of real/representation are brought to the spectator's attention; in these situations, the status of a moment as either 'real' or 'fiction' becomes fundamentally undecidable. Duggan claims that these moments can be the result of careful planning and procedure. He notes two main ways in which this ambiguity occurs, one of which is 'an irruption of the mimetic into the real which unsettles the viewer; the possibility that what we are watching might after all be imitative' (Duggan 2014: 64). Duggan terms this uncertainty, whereby the status of something is undecidable as either 'real' or 'mimesis', as 'mimetic shimmering'.

In the instance when *Leadbitter* breaks down, there is no 'correct answer' with which to understand or bracket the experience. Rather, the various possible explanations are an attempt to grapple with the aporia being presented. This aporia, between 'authenticity' and 'performance', emerges across the performance. But this moment represents a fulcrum, whereby the aesthetic of the real begins to reach a crisis. It creates a form of Duggan's 'mimetic shimmering', as the mimetic irrupts into the real. This interrogation of the mimetic practice of theatre is intimately connected to the aporia of autobiographical performance.

For Duggan, these moments of mimetic shimmering can result in an experience of trauma itself. Duggan claims that the clash of the aporia of mimesis and reality forms a synecdochal relationship with trauma as a whole. However, I find this argument problematic; in contrast, I would not presume that the breakdown of *Leadbitter* allowed me to approach or experience his psychological viewpoint, nor the trauma of his suicide attempt. Critchley (1999: 185) has suggested that the ethical language of Levinas is premised upon a fundamentally traumatic semiotics. Pushing this, I would suggest the trauma Duggan denotes, is not the trauma of the performer, but rather the traumatic structures of ethical language. I would suggest that the crisis and confusion of representation, in the particular context of autobiographical

performance, leads to an ethical encounter. In other words, our aesthetic interpretation of the performer becomes ethically loaded.

When Lyn Gardner responded to the event, she describes her doubts and confusion in highly ethical terms: 'I feel that maybe we have failed him. That maybe we should have given him a hug at that moment. After all, it's not as if there was any kind of fourth wall. Or would that simply have been patronising?' (Gardner 2014: np). The aesthetic crisis causes us to be unsure how to interpret and understand what is occurring. However, as this is autobiographical performance, wherein the performer is also the performer, the aesthetic crisis also becomes interlinked with how the audience regard the performer as Levinasian Other. In the context of *Mental*, the way I interpret Leadbitter's breakdown becomes connected with how I should be ethically responsible to Leadbitter himself. Is my suspicion of his practice ungenerous or callous? Do I owe it to him to believe? Or rather, as Gardner suggests, is it patronising to rescind my instinctive suspicion?

This moment of decision can only exist in a climate when the audience is unsure as to its status as engaging in mimesis or the real. In negotiating this status, the audience is also confronting the fundamental alterity of Leadbitter as an Other. It is the undecidability, leading to an alterity with the Other, that establishes a connection based upon ethical responsibility. This contrasts to a relationship of pity, which is premised upon the fundamental knowability of the Other, when the performer supposedly 'reveals' him or herself to us through confession.

Alternative Directions of Mimetic Shimmering

In the case of *Mental*, the mimetic shimmering is engineered by a shift from the 'authentic' and 'real' to the 'structured' and 'mimetic'. However, it should be noted that mimetic shimmering can be elicited in both directions. A performance can adopt a fundamentally sceptical aesthetic, before shifting to a gesture towards the 'real'. In order to illustrate this alternative and to offer a comparison to *Mental*, I shall briefly explore *Talk About Something You Like* by Byron Vincent.

Vincent incorporates the impossibility of his imparting 'truth', the problematic aspects of autobiography, into his performance. Moreover, he links the failure to connect with the audience to his mental health. Throughout the performance, he notes the ongoing conflict

between artifice and authenticity, connection and distance, and shows how these issues enmesh with questions of mental health. In one particular moment, through a consolidation and crisis of the various themes and attitudes, the audience is brought to a crisis of representation. At the culmination of the performance, Vincent acknowledges that he cannot fully enable himself to talk about empathy or human connection in the arena of the performance, as it would sound false or platitudinous; in contrast, Vincent describes how his moments of 'mania' allow him to understand and express things he otherwise could not. However, performance excludes the possibility of being in a 'manic state'. Throughout the performance, various video segments are shown of Vincent wearing a Mexican wrestler's mask whilst speaking in an unidentifiable accent. He reveals that these segments were created in his bedroom during a manic phase and were not formed with the production in mind.

As with *Mental*, the use of the precarious, the 'accidental' and the 'unintentional', even in a structured context, are used in order to play upon notions of the 'real'. The 'accidental' incident of *Mental*, in the form of Leadbitter's breakdown, brought an aesthetic of authenticity to a crisis of representation; in contrast, Vincent's display of the 'accidental' is a gesture to authenticity after a show that has carefully attempted to tread around the issue of self-representation. Prior to this moment, the production has continually shown scepticism to notions of authenticity, and the notion of the 'unperformed' autobiography. However, there has been no reconciliation between his wish to 'connect' and the recognition of difference. The performance has continually vacillated between these two desires.

Vincent uses the possibilities of digital recording to impart his spontaneity; there is a suggestion that spontaneity can be 'captured'; however, this spontaneity is edited, displayed and placed in the context of live performance. The difficulty and impossibility of authenticity does not cease at this juncture. As in the context of *Mental*, such moments of authenticity are always possible to scrutinize. He could be lying. He could have intended to use the material amidst his manic episode. Even if it was not intended specifically for the production, it could have been developed in the knowledge it would be potential future material. In this sense, Vincent's announcement that the videos were unintended for performance becomes a form of plea. Vincent has been rigorous in noting the structures and aporias in autobiography and

performance; his shift to a more emotional, seemingly sentimental, approach to representation must be understood in this context. Far from sentimental, Vincent acknowledges the structural problems of 'authenticity'. He is, in this context, asking the audience to put aside the anxieties of representation and believe him.

To return to Duggan's notion of 'mimetic shimmering', after continual reminders of the mimetic processes inherent in representation, Vincent is attempting to incorporate the 'real'. Duggan notes that 'mimetic shimmering' can happen from both the irruption of the real into the mimetic and the mimetic into the real (Duggan 2014: 64). In contrast to *Mental*, *Talk About Something You Like* is incorporating the 'real' into the mimetic. This irruption is not necessarily the video itself, but rather the appeal from the performer. As an audience member, I myself became confused and unsure as to how to respond, confronted with this appeal for a belief in authenticity in the context of a piece that highlighting the artificiality of representation.

Mimetic shimmering does not, within and of itself, possess political content. Whilst *Mental* continually brackets and frames our relationship with Leadbitter in political terms, it should be noted that the ethical response is not a particular choice made, but rather, the process of making a decision in relation to the Other-as-Mad-Person. Different audience members will have had completely different responses to Leadbitter's breakdown; the performer cannot solicit a particular response. However, the performance asks the audience a question, to which each member is compelled to respond. Rather than the particularities of how each audience member chooses to react to the instance of 'mimetic shimmering', the crucial factor that renders the performance as a site of resistance is the ethical confrontation and how the performance compels the audience member to make a decision.

Mental achieves this mimetic shimmering through a clash of 'authenticity' and 'representation'; the performance begins by cultivating an aesthetic of authenticity, only to undercut this aesthetic and reveal its mimetic moorings. In contrast, *Talk About Something You Like* deconstructs the aporia of mimesis and the real from the beginning, but attempts to resolve it by an appeal for belief in authenticity at the very end. Despite, in some senses, acting in opposite paths, these performances are both participating in the same destabilization of

representational politics. Contemporary attitudes of madness have silenced and clouded our ethical relationship to the mad person; modern psychiatry deems the mad person fundamentally knowable. This knowability obscures the face of the Other-as-Mad Person; the danger of autobiographical performance is that a sentimental notion of the ontology of performance providing unmediated access to the performer can re-enforce this knowability. However, through mimetic shimmering, the alterity of the mad person can be reinstated, and our ethical encounter renewed.

Hearing Silence in Dylan Tighe's *RECORD*

RECORD is an exploration of Dylan Tighe's personal experience with depression, medication and the Irish psychiatric system. Conceived as a multi-platform performance project, *RECORD* denotes a variety of artistic responses to Tighe's experiences, including an album, public fora, interviews, and an 'alternative opera', a theatrical performance inspired and structured by songs from the album. This analysis will primarily be concerned with the performance of this 'opera'. A collage of a filmed interview, verbatim recitations of his medical records, fictional scenes imagining an alternative treatment, and songs written by Tighe himself, *RECORD* situates Tighe's personal experience in a political landscape.

Throughout *RECORD*, Tighe barely speaks. He recites documents, lines from *Hamlet*, and intersperses the performance with his songs, but hardly talks in his own words throughout the entire performance. Tighe's production revolves around silence: as an imposition (the silencing of Tighe by modern psychiatry), as a practicality (his silence is, in part, a pragmatic solution to Tighe's struggles with learning lines), and as a means of resistance. The means of this resistance is multifarious. I see Tighe re-perform the act of his 'silencing'. I see him partake in silence-as-withdrawal, as he recedes from 'reality' in a sequence of fictional scenes, imagining an alternative path of treatment. I see him deliberately deprive us of commentary, through physical and verbal language. The question of silence – how it is produced, what it does, how it functions – haunts performance. It is a challenge of interpretation to the audience, a spectacle infinitely readable. Park-Fuller notes how autobiographical narrative particularly benefits from performance's affinity with silence, as performance, 'provides a platform for the unspoken –

the absent – *word* – as well as an aesthetic space in which to evoke an absent *world*' (Park-Fuller 2000: 23, italics in original)

In the context of autobiographical theatre, wherein the performer is the performed, the audience are not only engaging with the body of the performer, but the subject of the performed. The subject of interpretation, the referent and signified of the semiotic structures, is an individual Other. If we follow Phelan (1993), that silence not only excites our interpretative processes, but results in a self-reflexive understanding of our 'reckoning,' then in the context of autobiographical theatre, we are drawn to critique how we interpret the performing and performed subject. The silence acts as a mirror, reflecting ourselves in our spectatorship, to look back at our looking. John Lutterbie (1999) suggests that in the face of silence, even this meta-construction becomes an arbitrary imposition upon the silence. However, in contrast to Lutterbie, I suggest that in the context of autobiographical performance, in our reconsideration of 'looking', ceasing to search for a stable meaning, there results in an embrace and confrontation with the alterity of the Other. This alerts how interpretation can act as engagement, yet can also be intrusive, act as violence upon the Other. This raises awareness of the ethical implications of spectatorship.

The potential of autobiographical performance's ability to resist depends upon the means by which it frames and controls the audience-performer relationship. I wish to suggest that through *RECORD*'s use of silence (as palpable in its immediacy and as withdrawing from authenticity), the audience becomes confronted, the relationship between the performer and audience fundamentally challenged. The silence forces an acknowledgement of the performer, whilst restricting any information that could elucidate or explain him. Indeed, the silence is presented as necessary and essential for approaching the performer, as the means by which Tighe can express his lived experience. I shall now explore the different forms of Tighe's silence, as re-performance, as withdrawal, as refusal, and how these modes affect the audience.

In contrast to *Leadbitter*, Dylan Tighe is a professional actor, of both theatre and television. Throughout the piece, he plays with this background. In noting the various connections of the companies and practitioners across this thesis, Tighe has recently worked with *Dead Centre* on

Chekhov's First Play. *RECORD* represents his first professional foray into professional music. *RECORD* played at the Half Moon Theatre at the Cork Theatre Festival in 2012, my analysis is drawn from a recording of the production during the festival, from Tighe's own commentary concerning his work, and an assortment of accounts of the performance by those who saw it live.

Tighe's background and experiences have been within the Irish mental health system. Whilst there are marked similarities between the British and Irish systems and legislation and Tighe focuses upon the rise of medication as a treatment tool that is certainly common to both, the particular background of Ireland offers particular challenges. To invoke silence, to invoke the speaking over of a voice, offers a different significance in the context of Ireland. The significance of erasure of language, of silence and the voice, takes on particular purchase where an indigenous language has been attempted to be removed by a colonial force. This analysis attempts to take into account the particularity, even as it draws connections between the wider context of autobiographical performance.

Silence Made Palpable For the Audience

The work of the composer John Cage would suggest that there is no true silence in performance, that there is always noise, if only the pumping of our heart and the electronic signals of our nervous system. But this is to ignore the endemic structural silences of the world, silences notable by the absence of what we expected to hear. John Lutterbie suggests that the silence of the performer is made noticeable by means of the 'ambient noise', for Lutterbie, 'it is the oscillation between the ambient and the still presence of the live performer that gives her silence its rhetorical effect. "Why are you doing this? Tell me what you mean!"' (Lutterbie 1999: 14) Going further than Lutterbie, I would suggest silence is made possible and palpable by its framing, by the context and structure that surrounds it. In autobiographical performance, the audience encounter the body of the performer, knowing the body is the archive and site of the performed subject's experience; the audience expect the body to speak.

In the beginning of *RECORD*, Tighe reads out his medical documentation, requisitioned through the *Freedom of Information Act of Ireland 1997*. Tighe's condition is catalogued and listed as

various symptoms of disease, rather than the emotional turmoil and subjective experience of Tighe. In effect, the medical records 'translate' Tighe's emotional experience and mental distress into 'objective' information (in other words, identifiable symptoms) relevant to the biomedical paradigm. This information is then collated in order to make an eventual diagnosis of, 'a depressive episode on a bipolar basis'. This diagnosis is, in effect, a depersonalization and categorization of Tighe. It has translated his subjective experience, into an objective, identifiable, categorical malady. By doing this, it has externalized and alienated his experience into something separate from himself. The diagnosis is followed by recommended treatment, predominantly the prescription of medication. Having translated his experience into diagnosis, his treatment is similarly objective and physiological. Consistent with the biomedical model, rather than respond to the subjective experience, it treats a physical malady with the physiological effects of medication.

In performing this, is Tighe repeating an act of oppression, or is it rather an act of resistance? Tighe suggests he cannot even speak in his own performance. Is the demonstration of the silencing of the mad, and its insidious extent, merely a reiteration of his oppression? Would a determination to speak 'against' silence, rather than 'through it', be a greater act of resistance? This depends on our understanding of silence: what constitutes it and what it can be made to express.

Foucault (1988) and his notion of silence haunts all contemporary understandings of madness; silence is an infliction and imposition. The 'silencing' of the mad renders the mad person speechless, the individual dispossessed of the means to articulate their experience. In this sense, it presents us with silence as a negation or deprivation: as something lacking, or as something ignored rather than something observed. Silence is a failure, a lacuna, a vacuum within which speech has been deprived.

However, the notion of silence as necessarily oppressive seems reductive; there are a myriad of alternative forms and notions of silence. There are a variety of different modes and forms of silence in theatre. In his paper on dramaturgy and silence, Geoffrey Proehl (2003) delineates a variety of different forms and purposes of silence: silence as frustration, as an imposition, as

invisibility, as power, as pleasure, as safety and humility. Moreover, silence within a language regime is not equivalent with a silence upon a stage. The phenomenological experience of theatre, temporally and spatially situated, renders silence palpable, something that is performed, something intentional. To express it another way: through theatre, silence can become noisy. I will suggest that, in the context of autobiographical theatre, silence can also be deployed as a strategy and mode of resistance.

Tighe is using silence. This is not merely a silence endemic to all theatre or autobiography, but an 'act' of silence. Far from another iteration of Tighe's 'silencing', this act represents a reclaiming of silence. Tighe has not simply re-enacted the 'silencing' inherent in the practice of modern psychiatry, but has appropriated it. A purely textual understanding ignores the importance in performance of the presence of the speaker. The context of performance reframes the documents. Whilst the language of the documents objectifies and alienates Tighe, by using his own voice – the voice of the subject – he is instead reframing their meaning. By interpolating these documents into the performance, whereby the voice of the subject can speak them, he is re-interpreting and translating these back into the voice of the subject. This is emphasized by the physical presence of Tighe on stage, having re-embodied the experience that was previously separated from him as an external disease. He is, through speaking out the medical records, reclaiming experience. He is reversing the act of silencing, by being silent. Tighe re-embodies and reclaims his personal experience from the process of disassociation. By 'performing' the act of silencing, Tighe transmogrifies the silence of the mad person from an enforced muteness to an intentional resistance.

The audience is presented with the spectacle and body of Tighe, talking about a personal experience, but without a personal account. In his recitation of medical documents written 'about' him, the audience hears the aural 'voice' of Tighe, but not the words or subjective 'voice' of Tighe. It is the staging of this dissonance that allows Tighe to use silence to re-enact his silencing. It is the dissonance between the staged subject, and its failure to speak, that renders the silence palpable for the audience, and allows it to be heard. In this sense, the audience is spectator to both a performative and political act. Throughout the reading, Tighe makes no personal commentary, no testimony as to his lived experience. There is, rather, a

display and performance of his silencing. Both his silence, and the political circumstances of his silencing, is made palpable.

Silence as Withdrawal, Fiction as the Autobiographical

This notion of 'reclaiming' silence is a viable means of articulating voices subdued and ignored in modern society. This is not necessarily the re-performance of silencing, in order to make silence palpable. Whilst analyzing the work of Deb Margolin, Gwendoyne Alker describes how, 'Margolin's reclamation of silence comes by way of an obsession with dialogic creativity and a deferred obsession with messianic hope. Her performances shift standard definitions of *logos* and offer a feminist alternative to the sedimentation of patriarchy that surrounds this term.' (Alker 2008: 120, italics in original) Performance, and its silence, can offer alternatives to the logocentric paradigms of 'representation'. Likewise, Tighe uses silence to challenge the existing narratives and representational politics. Tighe describes how he, 'began to engage with withdrawal as both a strategy and starting point for a larger creative project.' (Tighe 2014: 113)

Throughout the production, fictional scenes written by Tighe are shown, imagining an alternative course of treatment. Tighe has previously performed his own silencing by modern psychiatry; the 'reality' determined by modern psychiatry has no space for his own account; the only possible recourse to create his own narrative is fiction. The reimagining of his treatment is only made possible through a prior silence: the silence and withdrawal from psychiatry. Tighe claims that, 'non-compliance became a line in the sand, a starting point from where the future, and past, could be reimagined.' (Tighe 2014: 113) In this withdrawal, silence as non-compliance becomes an engine for the fictional narrative and a capacitor for change.

From this starting point of silence, it is through the use of fiction that Tighe is able to imagine the possibility of change. In an interview with Pat Bracken played in the performance, Tighe suggests that part of the difficulty of change is our incapability to imagine alternative possibilities. Tighe, on the one hand, uses his real-world lived experience of mental health and its social context as a starting point; yet, he also uses fictional scenes as a method to reimagine and examine other means of treatment. It is the interplay between the socio-political

circumstances of Tighe's actual treatment and the utopic alternative course of treatment, two sides of the *RECORD*, which capacitates this as a work that can imagine change.

The title *RECORD* itself is the conflation of two differing aspects of Tighe's performance. On the one hand, *RECORD* as the medical 'records' that Tighe appropriates. On the other hand, *RECORD* as the musical record that he has composed, and sings from at various points of the performance. The use of song over spoken language is telling; a suspicion of the logos, and its ability to express without denotation upon the individual. The lyrics are evocative rather than descriptive; rather than attempt to explain the emotional experience of Tighe, it relies upon pathos. Music is presented as an alternative and liberating mode; Tighe (2014), following Nicholas Bourriaud, suggests that music is something that extends beyond language. These two concepts of 'recording' are brought into conflict, one as bureaucratic denotation and the other as artistic expression; Tighe is promoting the later as a preferable means of relating to mental health. It is a preference of the aesthetic over the psychiatric, in Tighe's own words: 'I set out to examine my experiences as an artistic question and to apply my theatre-making methodologies to (my) mental health. I set out to view myself as an artistic subject rather than as a subject of external examination.' (Tighe 2014: 113) For Tighe, the wish to set the 'record' straight involves the shift from the psychiatric to the artistic, that shifts his position from the passive object (the subject *of* examination) to the agent of meaning (the subject *as* producer). In other words, he retakes control over his narrative from the psychiatric bureaucracy, and uses art as a means to explore that narrative.

Yet these scenes are not only made possible by means of silence, but, again, show Tighe participating in silence. Far from vocal or expressive in these scenes, Tighe refuses to speak to either the doctor or the nurse. Initially, the doctor insists this silence is a symptom of an illness, rather than any form of protest. However, the nurse argues that the silence could be the result of a decision, a defence mechanism that is evidence of mental strength rather than cognitive illness. As the performance continues, the nurse and psychiatrist are altered by Tighe's silence. They become more sympathetic, the doctor offers his summerhouse as a place for rest and recuperation. These scenes work as both the use of silence, and a commentary upon silence. His relationship with the nurse acts as a commentary upon the effects of silence, and how

silence can be an active force. Taking inspiration from Ingmar Bergman's *Persona* (2003), the nurse is changed by Tighe's silence, her personality challenged and overwhelmed by it. She remarks how she has never been listened to, and how the listening changes her. But this relationship is not destructive, rather, silence acts as a positive force; she ceases her role as a nurse within an authoritarian system.

In an autobiographical context, the use of fiction can trouble the relationship of the audience to the performer. In a sense, these scenes are merely more explicit in their use of fiction; as Stephenson suggests, autobiography, 'is always a fictional construction, featuring an inescapable gap between the real-world referent and its fictional twin' (Stephenson 2013: 3). Yet, in their explicit fiction, these scenes are a disturbance of what Lejeune terms as the 'autobiographical pact', the understanding that, despite its status as 'art', autobiography must necessarily engage with what is 'real' and 'true'. Tighe, however, suggests that the 'real' is inadequate for the expression and exploration of his mental distress. The myth of the 'authentic' conflation of performer and performed dissolves.

Silence as Refusal to Represent

Tighe's silence is not only restricted to a re-performing and appropriation of his silencing. It is (even in his fantastical alternative treatment) his refusal to represent, explicate, or provide any signifiers with which the audience can interpret him. The new narratives of Tighe are not merely creating an alternative system of representation, but troubling the need for representation in the first place. Tighe claims that 'I did not merely want to represent distress but to move beyond representation' (Tighe 2014: 114).

The silence of Tighe's voice, the absence of personal commentary, is a frustration of audience expectations. The conventions of the autobiographical lead to an expectation of some form of personal commentary. Yet Tighe provides no help or assistance for the audience to 'understand' his experience. He deprives the audience of any 'self-revelation' that often typifies the autobiographical genre. He rejects the exploration of personal life for the extrapolation of 'meaning'. In the short moments when I see him speak in his own words (rather than the recite the words of another), it is obliquely, at a slant; I see his face in the interview with Pat Bracken,

articulately discussing the question of mental health treatment against a wider social structure. Yet the recording of a speaking and eloquent Tighe renders the silence of the performance immediately in front of us pronounced and deliberate. He avoids the interpreting gaze of the audience, denies them any satisfactory 'revelation'.

The silence also applies to his physical performance and the use of his body. The audience is denied traditional signifiers of depression, such as the head clutched in the hands, shouting exclamations, twitching. This difference, between the societal 'expectations' of drama and of madness is highlighted in one scene wherein the nurse, in an attempt to help Dylan, persuades him to act out Act I Scene ii from *Hamlet*, a play similarly concerned with madness and the politics of 'seeming'. However, his performance of Hamlet frustrates the nurse, she attempts to direct him to be more animate and more 'dramatic'. He fails to satisfy her notion of depression as a 'dramatic' disease, of inner turmoil expressed by extreme, external performance. In this refutation, Tighe suggests that 'depression' is not readable, nor something that can be extrapolated or divorced from experience. In the performance, the show-reel of Tighe's acting career is played; the performances contained within the reel become gradually more animate, involving increasing portrayals of mad persons and extreme acts. Again, the juxtaposition between the recorded and animated Tighe against the immediate and phlegmatic Tighe in *RECORD* forces us to acknowledge the silence of Tighe's performance as a choice and strategy.

Tighe is rendering it impossible for the audience to 'read' both his voice and his body. He even refuses to be held to account by 'reality'. The notion that madness is written upon the body - extrapolating subjective experience from external and physical phenomena - is a core part of the bio-medical model. By his silence of voice and minimalist acting, Tighe renders it impossible to read for signs and signifiers of a mental 'illness'. Rather, the audience are confronted with an individual who refuses to represent himself or his experience.

It is notable that in both these cases, Tighe emphasizes the 'recorded' as vocal, as active, as animated. In contrast, the performing Tighe, with whom the audience have an immediate and phenomenological encounter, is silent. Immediacy has not granted us more information or knowledge of Tighe, *RECORD* resists the notion that autobiographical performance, by dint of

the presence of the body, provides us with another layer of understanding. Rather, Tighe seems to frame performance as a place where silence is preferable. *RECORD* suggests that immediacy, and the direct encounter with the performer, are both defined by an implacable refusal to disclose. In doing so, Tighe resists the notion of performance as a confessional space and the inculcation of pity from the audience.

The Confusion of Aesthetics Resulting in an Ethical Response

Deb Margolin suggests that silence as a dramatic force can compress the interaction between the audience and performer. But what manner is this interaction? Margolin suggests it renders the performance synecdochal, with the performer positioned as an Everyman (Alker 2008), an invitation to explore communality. However, Tighe's performance in *RECORD* does not invite self-identification, but rather is a refusal to be identified. Far from relying upon the 'closeness' of performance, *RECORD* suggests that immediacy is defined by a refusal to disclose, and authenticity by a recourse to fiction. How does this compress, rather than increase the distance between performer and audience?

Tighe provides us with three different forms of silence: a silence that re-performs his silencing by modern psychiatry, and thereby makes his silencing palpable to the audience; a silence that withdraws from modern psychiatry, and situates fiction and art as the only means to resist and express; finally, a silence that, even in this fictional 'world' refuses to communicate, to signify or represent the 'self' of Tighe. Through the combination and clash of these different silences, a cultivation and elicitation of a particular performer-audience relationship emerges. Tighe forces us to acknowledge and regard his silencing, to acknowledge him. Yet, even his alternative 'Record', his recourse to fiction in order to capacitate expression, results in a refusal to represent. He capacitates expression, only to intentionally withdraw from it. *RECORD* compels us to regard Tighe, only to refuse explanation or explication. There is no 'confession' or self-revelation. There is only the audience's encounter with the silence of Tighe.

Through these complicated intersections and inter-relations between differing forms of silence, I would suggest that the audience encounter the alterity of Tighe. The audience are forced to regard him (through making silence palpable), Tighe reclaims his ability to speak (through

silence as withdrawal), but he deprives us of any information with which to interpret or read him. In this sense, throughout Tighe's use of silence, the audience are compelled towards an ethical encounter. The audience are forced to consider our own notion of spectatorship; the refusal to communicate reflects back upon ourselves. As Phelan remarks, catching herself in the process:

While all this addition and subtraction is going on in my accountant eyes, I begin to realize this too is superficial. The performance resides somewhere else – somewhere in the reckoning itself and not at all in the sums and differences of our difficult relationship to it (Phelan 1993: 162).

In other words, rather than incessantly placing words upon the silence, silence forces us to self-reflect, to consider what we are doing in our construction of meaning and narratives. It compels us to assess the implications of our spectatorship; silence becomes a reassessment of our ethical relationship. Rather than able to interpret, our interpretation is thrown back upon us.

Silence renders interpretation fundamentally undecidable. We can examine the political structures that delineate and surround a silence, but not to the silence in and of itself; rather, the audience have to acknowledge the silence and decide how they will respond. Yet, in the context of autobiographical theatre, the silence relates to a person, to an Other, to the performer/performed. In this manner, aesthetic interpretation becomes ethically loaded. The means by which the audience choose to deal and function with this silence becomes how they choose to respond to Tighe as Other and his alterity to them. Whilst the use of silence offers a different strategy to the mimetic shimmering of *Mental*, both productions are engaged in a double motion between pulling the audience towards an acknowledgement of the performer and the push to disturb the notion that performance provides an authentic or privileged knowledge of the performer. It is in the interval and the interaction between these two movements that alterity is regarded, and an ethical encounter is made possible.

The Obscured Face of the Volunteer in Bryony Kimmings' and Tim Grayburn's *Fake It 'Til You Make It*

The performances so far have engaged with various crises of representation - through mimetic shimmering, through the multiplicity of silence – but their positioning of the performer/performed is from a consistently professional angle. Backgrounds vary – Leadbitter an activist and performance artist, Vincent a performance poet, Tighe an actor and musician – but all possess some experience of working a stage and an audience. All performances demonstrate, enact and even use the difficulties of performance as mode of autobiography: Leadbitter's unbearable intensity of the encounter, Vincent's inability to perform through a period of mania, Tighe's anxiety at learning lines. But these are the obstructions of professionals, with years of experience in the field. What does it mean for those without professional experience, who have never dubbed themselves 'performer' before in a professional capacity, to perform their narrative? What does it mean for the distinctions between performer and performed, if the performer is unsure of their status as performer?

In *Fake It 'Til You Make It*, professional performer seems to act as facilitator for the autobiographical narrative of the non-performer. In the performance, Bryony Kimmings, an accomplished performance artist, performs alongside her partner Tim Grayburn, a man previously employed in the finance industry. Kimmings has previous experience in performing alongside non-professional actors; in *Credible Likeable Superstar Role Model*, Kimmings shares the stage with her 10-year old niece in a piece eviscerating the sexual commodification of young girls. *Fake It 'Til You Make It* is the story of Kimmings' and Grayburn's relationship and Grayburn's own experience of depression. Whilst other performances in this chapter have more particularly critiqued the psychiatric industry, Kimmings and Grayburn are more concerned with structures of masculinity, of stigma, and of the silence of men in the face of depression. For Grayburn, his resistance of becoming 'performer', his anxiety and shyness, becomes indicative of the silence concerning depression.

Across the performance, the status of Grayburn, as rejecting and embracing his role as performer, is interrogated. The title itself denotes the concerns of the production, between the

fake and the actual, between the unconfident amateur and the assured professional, and the conflation of these two states. The popular phrase, to fake it until you make it, assumes a slippage between the performance of a thing and the thing itself. The performance repeatedly returns to this structure, of Grayburn 'faking' a skill, until he eventually authentically acquires it. This orientates around the three initial 'rules' that Grayburn establishes as the requirements for his participation. Firstly, in order not to suffer from anxiety, that he would not have to look at the audience. Secondly, that having no tangible stage skill, that he would learn one. Thirdly, that the production would make him look like a 'real' man. Each of these lines follows a different relation to Grayburn's status as volunteer-performer: as the manifestation of stage fright and anxiety and avoidance of the gaze, against a compulsion to display virtuosity in a theatrical setting, culminating in a masculine desire to project strength and no vulnerability. As the performance evolves, each of these lines is developed and critiqued, leading to a rich tapestry and representational crisis of what it constitutes to be performer.

In contrast to previous performances discussed in this chapter, *Fake It 'Til You Make It* is less concerned with a critique of the psychiatric system, than with generalized stigma and poisonous construction of masculinity. At points, this can potentially dampen its political radicalism, and espouse simplistic attitudes to medication and treatment. Yet, despite this, I want to suggest *Fake It 'Til You Make It* uses the construction of Grayburn, the various lines following his varying states as performer, to ethically load aesthetic interpretation.

Fake It 'Til You Make It emerged at a time of crisis for male depression, more specifically male suicide. Male suicide now stands as the leading cause of death for men aged under 50. Similar to how Leadbitter's *Mental* emerged from wider political activism (and continues through the *Madlove* project) and Tighe conceived *RECORD* as a multimedia project that combined to a more generalized project of activism, Kimmings and Grayburn were drawn to the wider possibilities of their performance. At the end of the performance I saw at the Southbank Centre in 2015, a panel talk was organized with two workers in psychiatry and a representative from the Campaign Against Living Miserably (CALM), a charity that focuses upon male suicide. The project of Kimmings and Grayburn extended into a multimedia mode of activism, including a videogame named *An Interview*, a series of abstract expressions of depression with recorded

audio segments by Kimmings and Grayburn. If I am analysing the particularities of the performance, it should also be noted that the project burst free of the individual production.

Kimmings and the Possibility of the Non-Professional Performer

Before extrapolating upon the multi-leveled construction of Grayburn as a performer, it is necessary to consider the presence of Kimmings in the production. The work notably, is a joint autobiographical effort; it is firmly concerned with Grayburn's experience of depression through their relationship, less concerned with depressive episodes that have occurred previously. Even the aesthetic disturbance, between authenticity and narrative, is framed in terms of the couple at the beginning of the performance. In describing their relationship, Kimmings alternates between an affirmation of the authentic, that, 'Tim and I are a real life human being couple' (Kimmings and Grayburn 2015a: 31) with an acknowledgement of the artistry of narrative, that, 'as with all love stories, in the movies, in books ... or onstage, we had to leave quite a lot of stuff out' (Kimmings and Grayburn 2015a: 31). With this focus on their relationship, with multiple performers occupying the stage, our considerations of the ethical terrain are complicated. If this chapter is concerned with an ethical encounter between performer and audience, then this is complicated in *Fake It 'Til You Make It* by another ethical horizon: the obligations and responsibility of the performers themselves.

Work on the ethics of the praxis, of the obligations of the autobiographical performer, often draw upon the inter-relationality of identity as a launchpad for understanding the demand to the Other. In this configuration, self is, 'not only a historical and cultural construct but imbued with, and indeed is inseparable from, others' (Heddon 2008: 124). Following this inter-connectivity, we can ask whether the performer has any ethical obligation to those necessarily entangled in their own narrative. In the performances of this chapter, stories involve the mothers and fathers, partners, fellow patients, and political allies of the performer. To what extent does a performer have a right to disclose the stories of others, and what potential violence can occur? In terms of madness, where the mad person is frequently invoked or use within other narratives, to what extent do we license and legitimize violence? Oliver Sacks would frequently use the narratives of patients to facilitate his work; G. Thomas Couser

concluding that, 'if his patients have consented to having their stories told, there is no violation of their autonomy and no appropriation of their stories' (Couser 2004: 77). But to what extent can ethical obligation be contained in liberal understandings of consent? Hilde Lindemann sardonically notes that this argument presumes, 'the doctor-patient relationship were one in which the parties bargain from positions of equality' (Lindemann 2004: 373).

In placing Kimmings and Grayburn together on stage, these questions take a more concrete form throughout the performance. Far from embedded ethical quandaries, whereby the inter-relationship is implied, the ethical wrangling is set in front of the audience. Responses to the production have frequently expanded into an ethical interrogation of Kimmings' handling of Grayburn, both in terms of structure of the piece and behaviour on stage. For Catherine Love, it's the 'very visible care that Bryony and Tim take of one another on stage throughout the show, there in little looks and fleeting touches' (Love 2015: np). Alternative takes regard the danger or risk of Kimmings speaking over or 'for' Grayburn, that her professional vocabulary overrides his non-professional autobiographical declarations. Leadbitter, in his foreword for the playtext, expresses his anxiety, 'I'm halfway through watching *Fake It 'Til You Make It* and one question is bothering me. Where is Tim's voice?' (Leadbitter 2015: 1, italics in original). Likewise, a review by Andrzej Lukowski has worries that Grayburn, 'largely serves as the chatty Kimmings's laconic foil and backup dancer' (Lukowski 2016: np).

These questions risk ungenerosity, and even more problematically, a diminution of Grayburn's own artistic input. If a simplistic notion of the 'consent' of Grayburn does not solve these ethical dilemmas, neither does a patronizing accord that depreciates the agency of Grayburn. Yet, the performance itself plays upon the possibility of artistic exploitation and the hierarchies of professionalism between Kimmings and Grayburn. As Kimmings and Grayburn relate their response to his 'outing' as a depressive, Kimmings notes that, 'I secretly had the idea for this show' (Kimmings and Grayburn 2015a: 48). She is projected as creative force. Meanwhile, Grayburn positions himself not as pro-active artistic force, but as volunteer, and maintains a certain passive distance to performance: 'I agreed to do this show in case it helped people like me ... As simple as that sounds, that is why I am here, in this fucking outfit, dancing around on a stage with my mental girlfriend' (Kimmings and Grayburn 2015a: 61).

Does this entail a compromise on the autobiographical project? Is it that Kimmings has deployed a series of theatrical devices to speak over Grayburn? Does Kimmings' own performative expertise preclude the possibility of Grayburn's speech? Far from any of these absolute terms, I suggest the presence of Kimmings is precisely what capacitates our apprehension of Grayburn as the performer without expertise, as the performer with anxiety about performance itself. If the presence of Kimmings alongside Grayburn issues a series of ethical quandaries about collaboration and praxis, then these concerns not only lead to a crisis of representation with regards to Grayburn, but the ethical dilemma bleeds into the audience's own encounter with Grayburn. Kimmings is what capacitates our fraught apprehension of Grayburn himself. Far from obscuring his face, Kimmings troubles it, resulting in an ethical encounter emerging from alterity.

The Obscured Face of the Volunteer

Grayburn is an unseasoned performer. In order to facilitate this, the first rule he establishes, as Kimmings informs the audience, 'he didn't want to have to look any of you lot in the eye' (Kimmings and Grayburn 2015a: 34). In order to circumvent this difficulty, for the majority of the performance, Grayburn wears various different forms of head-gear to obscure his sight. He puts a basket on his head, has binoculars stuck to his eyes, has puffy clouds surrounding his face, wears blackout glasses, a paper bag, and the 'head of a giant beast with horns' (Kimmings and Grayburn 2015a: 54). All of these various head-gears stands as a form of metaphor for Grayburn's own depressive experiences, at different extremities; the light clouds when upon medication, the giant beast goat-head when enduring a particularly severe episode. More than a clever use of Grayburn's confessed limitations as a performer, it situates Grayburn's reluctance to perform as function of his depression, as indicative of his attempt to hide and conceal his depression, to 'pass'.

It would be simplistic and problematic to simply suggest these masks obscure the possibility of performance. Masks have a long tradition in performance, and require adept skill of the performer, in performing the object. The mask, for John Emigh, relishes the complicated epistemologies of performer and performed, masks in performance, 'play with perception and

experience, converting epistemological dis-ease into a field for humour and paradox' (Emigh 1996: xviii). The mask, far from hiding the performer, is a particular form of contract into which the performer enters. The use of the mask is the challenge to the actor, on how to perform the Other, 'the otherness of the mask becomes both the obstacle and the goal. He or she must redefine the sense of self in order to wear the other's face and be true to it in spirit, thought, and action' (Emigh 1996: xviii).

Complicating this, however, is the nature of the autobiographical theatre, whereby performer and performed are meant to be conflated. Yet, the use of the mask disturbs this possibility, creates an epistemological break. Grayburn is not confronting how to perform the Other, he is confronting how to perform himself. Thus, the mask itself stands for himself, Grayburn as performer hides behind the mask of Grayburn as performed. In this way, ironically, Grayburn is adopting a highly performative expression of his anxieties about performativity, of his incapability of holding to a performative autobiographical pact. He can only play himself by playing himself as someone else.

Rather than the masks themselves, it is the declaration of anxiety that disturbs a traditional viewing of Grayburn. We can understand masks as mode of performance, but Grayburn specifically frames them as mode of escape, of avoidance. Ridout (2006: 39) has noted how the possibility of stage fright has, in some forms of modern acting training, an almost foundational basis. The terror of stage fright becomes what capacitates the actor. But, the declaration of stage fright, of anxiety, fails to yield such productive possibilities. To invoke stage fright, to stage it, is to spread anxiety from the personal to the aesthetic. If the performer is uncertain about their status as performer, then the audience are disturbed in turn about what they are watching. If autobiographical performance often appeals to a concept of the authentic, however desiccated, then the various head-gear garlanding Grayburn's head implodes these series of presumptions. Stage fright exposes the gap between the performed and the performer, a gap that the autobiographical pact seeks to ignore. If suddenly the performance of the self becomes a burden or an imposition, if the performer becomes anxious about the performance of the self, then the autobiographical pact is ripped apart.

It would be a simplistic argument to suggest the mask obscures the literal face, and thereby the ethical face, of Grayburn. But, the mask itself is not an obscuration at all, merely a theatricalizing of a dilemma with the uncertain performer. He avoids the gaze of the audience, not simply by hiding behind these various masks, but by disturbing the epistemological assumptions of autobiographical performance. He avoids the gaze, that is, which presumes performer and performed have become conflated, that he is deemed knowable. Ironically, in announcing his wish to not look at us, he immediately troubles our ability to look at him.

The Revelation of the Face, Naïve Structures of the Authentic

Kimmins and Grayburn use the obscuration of the face to play upon the status of the performer, and the audience's mode of engagement. To simply read these various coverings of the face, however, is to ignore the broader arc of the performance. The face of Grayburn is not obscured throughout the entirety of the performance. If Grayburn confuses typical understandings of the 'authentic' with the litany of props adorning and covering his head, the finale is a recourse to the sentimental real. Eventually, Grayburn removes his mask, obscuring his face, and addresses the audience directly, from the microphone. The image evokes Kimmins' own monologue at the start of the production. The monologue is naturalistic, somewhat awkward, and yet is the demonstration of capable performer.

Across this shift, from the obscuration of the face, to its revelation, follows a chartered narrative. From the obscured face of the non-performer, to being tentatively capable of engagement of the final sections, reveals a metaphor for his development in dealing with depression. Namely, the process by which he ceases to hide his depression from the public arena, into a public declaration. Alongside this is a shift from the problematization of the authentic to an aesthetic of the authentic, a naturalism that attempts to conflate performer and performed as indistinguishable to the audience. Grayburn, at the end of the performance, is finally capable of performing himself. The status of the performer becomes expressive of the piece's need for the depressive to disclose, to not remain hidden. In part, this results in the piece's indulgence for a naïve strand of authenticity.

At first, this could suggest the final moments of the performance recourse to an aesthetic of essentialism, that could engender 'pity', autobiography as confession. However, this aesthetic of the true, authentic performer, hardly stands to scrutiny. Grayburn's journey, from stage-fright to confidence, is hardly one he performs in each show, but rather will have occurred over a longer stretch. But, this chartered narrative ignores the repetition of the performance, the performance as performed again and again. Kimmings and Grayburn seem to sell us the mythology of the individual performance, as performed for the first time every time. Yet the wider project, of performing multiple performances, results in a different narrative. Grayburn himself relates:

It was the scariest moment of my life doing that first show. Once upon a time I struggled talking in front of four or five people. Now I'm in my underwear in front of 100 people, talking about my depression. I'm not nervous at all any more. We've done the show 60 times. It's given me confidence I never had. (Kimmings and Grayburn 2015b: np)

Indeed, the irony is that this 'revelation' is precisely the moment whereby the construction comes to the fore. If Grayburn had maintained his masks throughout the performance, we could conceive of it as an 'authentic' mode by which to contain his stage-fright and inexperience. As it is, the final moments of the production reveal he is more than capable of public speaking, as a performer. As such, the 'authentic' premise behind the masks beforehand is disrupted, shattered. It is unsure as to what constitutes the real or the fake.

This shift (from the problematization of representation to an aesthetic of authenticity) is not limited to the use of masks and obscuration of the face. After the avoidance of eye contact, Grayburn's second 'rule' of participation was to gain a stage skill, namely to, 'learn how to play the guitar' (Kimmings and Grayburn 2015a: 34). This offers a different aspect of the performer, the notion that they have to display some particular form of virtuosity, to appear interesting to the audience. Grayburn, reveals that he has wished since a child to be able to play the guitar; this wish becomes a locus for the performance, as the needs of the performance have compelled him to take lessons, to begin to learn it. As he expresses this original information, and he confidently expresses his growing improvement, Kimmings shakes her head to the

audience, comically undercutting Grayburn's claims of success. Kimmings again, is set as confident performer to the neophyte of Grayburn.

Again, as with the masks, the application of this rule troubles our understanding of the performer. In a later sequence, still covering his head, Grayburn mimes with a guitar, as adroit guitar music is played in the background. An ironic juxtaposition is made concerning his inability to perform, lacking the skill to do so, requiring a theatrical device of miming, that emphasizes the disjuncture between the performed song and the performer. Yet, is the playing of the guitar any more a 'stage skill' than miming to the music in the background? The absurdity of the sequence, the joy Grayburn has in his mimicry, sheds light on the utter absurdity of deeming a performer by the possession of particular skills.

As with the first rule, the final twist is a seeming recourse to an aesthetic of the authentic. However, in the final sections of the performance, he tentatively and cautiously plays a song to Kimmings. He has written the song himself, the song is simple, the playing not virtuosic, a series of basic chords. It is clear he has learnt, to a certain degree, the ability to play the guitar. Again, there is a return to the aesthetic of the authentic, a preference over the simple and stumbling over the overtly theatrical. Yet, as with the masks, if he was capable of playing the guitar, why indulge in 'fakery'? Again, our notions of authenticity, and the source of the 'fake' are brought into relief.

What is behind this vacillation between the real and the fake, between the authentic and the mimetic? Referring back at the first two rules of Grayburn's participation, we see a common thread, of an evisceration of what the 'real' autobiographical performer is meant to do. In both of these, a rule is established, troubled through 'fakery' (the mask or the mimicry of the guitar), and finally resolved in a gesture to authenticity, that nevertheless breaks apart under scrutiny.

In the final rule for participation, *Fake It 'Til You Make It* eviscerates and politicizes this appeal to the authentic. Grayburn's third rule for participation states that Grayburn, 'wanted to always appear like a real man' (Kimmings and Grayburn 2015a: 34). Yet, in his revelatory monologue, as he finally appears face-to-face with the audience, he expresses that, 'a real man understands that there is no such thing as a real man' (Kimmings and Grayburn 2015a: 61). This phrase

adopts a paradoxical quality; the only real thing is to repudiate the notion of realness itself. At this point, negotiating with the third rule, the notion of an authentic masculinity is deemed poisonous, as the cause for Grayburn's own difficulties. In this third rule of participation, the aesthetic of the authentic is repudiated, even as it is invoked.

The suspicion of the 'real man' infects and inveigles itself into the rest of the work. Our understanding of the 'real man' becomes as unproductive as the 'true performer'. This returns to the title of the performance, the disturbances of different levels of performance in the imperative to *Fake It 'Til You Make It*. Performance, by its nature, disturbs lines between mimicry and the authentic. To 'fake' performance is no different from 'making' performance. To perform oneself as a mask, or to perform oneself through one's own face, both involve the talent of the performer; to imitate the pre-recorded music or to play the guitar, both are forms of performance. To 'pass' as a performer is to be a performer.

The Ethical Consequences of the Non-Performer

If we understand Kimmings' role as both ethically fraught and that which capacitates Grayburn's complications of what it means to be a performer, what is the audience's own relationship to their ethical relationship to Grayburn? Are the audience simply involved in a tentative judgement of their relationship, or are the audience engaged in a wider process, in an ethical encounter themselves? Throughout this chapter, I have argued a re-establishment of the ethical encounter with the mad person can only be forged through a radical alterity. To what extent does the ethical questioning spiral out into the audience?

The ethical silence, the diminution, in *Fake It 'Til You Make It* is subtly different from the other performances. For *Mental*, it was the process of sectioning, for *RECORD* the broader process of the psychiatric services, but in this production, it is the broader intersection of masculinity and depression. Namely, the social condition by which society refuses to acknowledge or explicate difficulties of mental health. Rather than a silencing that occurs through treatment specifically, this is a silence that refuses to engage the possibility of the mad person, and installs the necessity of passing.

This, from the establishment of the ethical encounter, poses a dilemma. On the one hand, resistance to this silencing could seem to necessitate a form of expression, to cease to try to 'pass', to perform one's depression. And yet, as argued, these forms of narrative, constructed as confessionals, risk inculcating pity, rather than a substantial relationship with the audience. In an attempt to make oneself known as depressive, one instead condemns oneself to be framed as knowable, as a difficulty which the audience can solve.

If we follow that the ethical decision must necessarily be undecidable, then such a solution is unbearable. If the Other is fundamentally knowable, there is no decision at all; as Derrida observes it is the hiatus that capacitates the decision, 'where decisions must be made and responsibility, as we say, taken, without the assurance of an ontological foundation?' (Derrida 1999: 21). So, how is it possible to resist the act of silencing, to cease to pass as depressive, without curtailing the uncertainty of the ethical response? In *Fake It 'Til You Make It*, it occurs through a crisis of the performer themselves, through a disclosure that, nevertheless, fundamentally disturbs the process of disclosure. what it means to perform, or to pass.

As a result, through the performance, the notion of passing segues between passing as 'normal' and passing as 'performer'. Grayburn is relating his own difficulties (attempting to cease to pass) to the expectations of the performer. In doing so, the structures of spectatorship are fundamentally complicated. Notions of authenticity of the performer are directly linked to the construct of passing as a 'real man'; essentialism and sentimentality for the authentic is irrevocably linked to patriarchal structures. The dangers of one dangerous authentic mode becomes supplanted by another.

Grayburn resists displacing one mythos of authenticity (the real man) for another (the true performer). He uses the construct of the performer as a means to reduce and rip-apart the structures of the authentic. Grayburn notes the autobiographical performer (following his three rules of participation) has to be seen, has to perform, has to project himself as real. But then, he disturbs each of these possibilities, not simply through a rejection of them, but a disturbance. The mask does not hide the performer, but merely emphasizes the hiatus between performer and performed. The skill of 'actually' performing a guitar is no more performative

than that of mimicry. The projection of the 'real', as the 'real man', demonstrated in a paradoxical statement that 'a real man understands that there is no such thing as a real man' (Kimmings and Grayburn 2015a: 61), ironically can only occur with the dispersion of the real altogether. The status of the performer is rendered undecidable. It fluctuates between aesthetics of the authentic and the mimetic. To fake it and to make it are indistinguishable.

But likewise, these conceptions of the performer are not simply internal progressions, a narrative for the audience to relish. To pass is not simply a solo act in the mirror; to pass involves a sublimation into the gaze, to act in accordance with what the spectator expects. To pass is to make yourself discernible, to relieve the burden of alterity. Passing always exceeds the individual, into the process of spectatorship itself. In Grayburn's disturbance of the act of performing, and thereby of 'passing', the audience are not simply passive spectators to an internal development. The audience are fundamentally implicated in these proceedings of care. In other words, the process of spectatorship is disturbed, and in each case, the naïve structures of the authentic are problematized. Grayburn-as-performer becomes fundamentally undecidable. Far from simply an expression of Grayburn's own internal anxieties, the disturbance becomes an interrogation of our expectations of the performers themselves.

It is by this means through which Kimmings and Grayburn manage to split the Gordian Knot, of how to ethically re-engage with one who passes. By problematizing the performer and the process of performance, by shifting between imitation the real and revealing the redundancy of their separation, Grayburn forces the audience's interpretative modes into doubt. Attempts to deem Grayburn's performance as 'real' or 'fake' quickly face an obstacle. Our interpretation is undecidable. The audience, even as the 'passing' narrative is structured, is fundamentally frustrated. Grayburn is elusive, he fluctuates, refuses easy expression. Not only are attempts to define frustrated, but the process of spectatorship itself is implicated in the political structures of passing. Alterity is compelled, even as the Other is regarded. An ethical encounter with Grayburn is re-established.

Conclusion

The possibilities of autobiographical performance, as a form of resistance, seem evident. Particularly for madness, those who have so frequently been deprived of a voice, can finally seize control of their own narrative. And yet, the possibility of resistance is complicated, by a series of factors. Firstly, often the language in which they can speak is a language which dispossesses or trivializes them. Likewise, whilst tempting, the trumpeting of the real, of the authentic body, quickly leads to more regressive politics. It adheres to a confessional performance, whereby the mad person displays themselves before the audience, to be tasted, to be pitied.

The implications of what is possible, and how we can avoid these narratives, can be articulated through Levinas's conception of the ethical. Levinas's notion of the ethical revolves around the alterity of the Other, of the infinite demand of the Other, of the inability to define or reduce the Other. Levinas's ethics provide a confusion to us, rupturing normal standardisations of ethical behaviour, whether appeal to virtues, to particular rules, or the pursuit of desirable consequences. These, whilst perhaps legitimate formulations, are nevertheless potential decisions, are answers to the ethical question, rather than the ethical question itself. Whereas, as Derrida notes, Levinasian ethics, 'is an Ethics without law and without concept ... is an Ethics of Ethics' (Derrida 2001: 138). It is a form, it is a compulsion, but it has no inherent content.

In this sense, we could ask what form of resistance can Levinas's conceptualisation of the ethical provide madness? If these ethics preclude moral content, can there be a resistance that is, itself, a thing deprived of content? But by extending and, in a sense, correcting Levinas, we can imagine two powerful articulations of how the political and ethical can interact, and note how resistance takes place across these two horizons. Firstly, that the ethical question must be answered within a political horizon, that indeed, the ethical question is what makes the political decision possible. And secondly, that the face of the Other-As-Mad can be obscured, can be blocked, we don't see our ethical relationship to them. In this regard, we can conceive that resistance can involve a re-establishment of the ethical encounter.

As I have covered these various performances, I have attempted to demarcate how they approach and re-institute such an encounter. Throughout all of them, however, is a resistance to the notion that simply the immediate face-to-face encounter, within itself, can institute such an ethical encounter. The re-establishment of the ethical encounter does not occur through recourse to the immediate presence of the Other, or through some plea to authenticity. The alterity that marks the relation of the self to the Other can only be possible in a crisis of representation. In *Mental*, the mimetic shimmering of Leadbitter, leads to an uncertainty between aesthetics of mimesis and authenticity, our consideration of a breakdown renders our aesthetic interpretation ethically loaded. In Tighe's *RECORD*, silence becomes multifarious, as invitation and rejection; he capacitates his ability to speak, only to refuse to disclose. For Grayburn, in *Fake It 'Til You Make It*, the authentic performer is paired with the authentic man, and in both their demonstrability becomes profoundly troubled.

This encounter with alterity becomes a form of aesthetic wavering. The wavering is crucial, in that, alterity cannot simply be codified, and resolved as exoticized, orientalized Other rather than ethical Other. I want to touch, I want to understand; but this touch and understanding must be premised upon the impossibility of both. The hand, that reached out for Leadbitter, only to flinch back, becomes a synecdoche for the ethical encounter. In *RECORD*, the silence is both invitation for interpretation, and its rejection. I am compelled to look, to engage, but also deprived of the ability to resolve, to contain the Other.

This is not to suggest that the response to the ethical encounter in these performances is necessarily a productive one. One response can be to fail to listen, to return to a codification, or to nestle back into sentimentality. I am not making a claim for the nature of the answer that is provided by the audience. Rather, I am suggesting that these performances, in various ways and to varying levels of success, pose a question to the audience: how will you respond to me? And that our interpretation, whether to the 'realness' of Leadbitter, the silence of Tighe, the 'performance' of Grayburn, all become loaded ethically.

Our response, nevertheless, is located in the political realm which these performers construct. Whether Leadbitter's fear of the police and sectioning, Tighe's negative response to treatment,

or the dangers of Grayburn's attempts to pass as 'normal', our response (even if a rejection of these concerns) must be placed within these political matrices. This chapter has not been about the triangulation of the decision made, but the compulsion of the decision itself. For those who have been obscured ethically, who have been regarded as objects, easily discernible and controllable, the positing of the question itself becomes a radicalism. The audience can finally ethically engage with the mad person and their testimony. Their faces are seen anew.

CONCLUSION

Across this thesis, I have sought to form new conceptual modes of thinking through resistance and madness. This has involved asking throughout three key interlinking questions. In what way can theatre provide a site of resistance to hegemonic structures of madness? In what way does the question of resistance relate to the representation of madness? And how do these modes take advantage of the particular opportunities of the theatrical and the performative? Through an interrogation of theatre in Britain and Ireland across the past twenty-five years, I have set out to think through the possibilities (and occasionally limitations) of resistance by a close engagement with selected plays and performance, using textual and performative analysis.

My first chapter imagined the possibilities of a theatrical 'practical critique', drawing upon the later work of Michel Foucault, and his myriad conceptions of resistance. I interrogated what the concept of the practical critique means in a context of the representations of the contemporary asylum's de-centralized series of power networks. I examined plays that reflected upon the legislative, instructional and cultural structures of the asylum contemporaneous to the original production of the play. The plays selected - Sarah Daniels's *Head-Rot Holiday* (1994b), Joe Penhall's *Blue/Orange* (2000), and Lucy Prebble's *The Effect* (2014) - demonstrated a variety of different contexts and institutional structures of madness. Likewise, they are almost entirely set within psychiatric institutions; the gaze is perennially upon and within the institution itself. I examined how resistance could be formulated and imagined from 'within' hegemonic structures, and was concerned with how realist plays could articulate a response to the contemporary asylum without re-inscribing its power structures. If realism is the prevalent aesthetic ideology of the asylum, how can it represent without becoming a re-iteration of its violence?

Looking at plays covering the history of psychiatric and legislative background of the past twenty-five years, I suggested that it is the aesthetic nervousness of representation, of the pluralistic (rather than monolithic) operations of power that allow us to reimagine from within. To veer between different possibilities, to shift between different lenses, to embrace the

polyvocal possibilities of theatre, allows us not only to apprehend the pluralistic power operations of the contemporary asylum (frequently at odds, frequently operating through conflict and aporia), but to reveal the contingency of these power structures. Likewise, these plays surround and touch upon the mad body, and perform how these competing and various power structures fight over this body, rendering it silent. Even as what the mad body constitutes varies (from the female body, to the black body, to the dispersed), the alternating and competing power structures compete across it. Emerging from this is a concept of resistance that refuses the possibility of a roadmap to resistance, yet does not simply remain within a passive observation of psychiatric violence. Rather, it provides a critique from within, that exposes the contingencies of power and arbitrary inflictions upon the mad body, revealing the possibility of change.

In my second chapter, I shifted to a consideration of spatial politics, and how thinking through space can help us re-imagine madness. I considered the spatial logics of hallucination, how cultural idioms surround it and control the manner in which we spatially conceive of madness. The spatial logic of hallucination not only divorces and sunders madness from our construction of 'reality', it also allows us to present and represent mad experience. Hallucination exoticizes madness, and through doing so, frames it as knowable; it is a spatial logic through which we control and contain madness. Through an engagement of the spatial theory of Henri Lefebvre, I was drawn towards an apprehension of space as multitudinous, and considered the particular opportunities theatre lent in a radical re-imagination of space. This, far from trying to represent or create a 'space' for madness, involved puncturing such a problematic, isolated bubble.

In doing so, I discovered the potential for theatre to puncture and trouble the traditional existing spatial logics of hallucination, and gesture towards a new spatiality of madness. I was drawn to plays that, in some sense, troubled the easy inner-outer logic of hallucination. All three plays, John Haynes' and David Wood's's *The Eradication of Schizophrenia in Western Lapland* (2014), Caryl Churchill's *The Skriker* (1998b), and debbie tucker green's *nut* (2013), all disturb the traditional spatial logics of hallucination. If these plays never fully step away from hallucination, they use various means to disturb its spatial logics. In part, this occurs through manipulation of material space; in part through a troubling of visibility, invisibility, and

experience. These plays use the internal spatial logics of genre to supplement their own innovative spatial logics of hallucination. What this capacitates is a radical re-politicization of our representation of hallucination. Hallucination cannot be divorced from political concerns such as family, globalization, and race. This occurs in both directions. Madness become informed and framed through other political perspectives. But likewise, consideration of these other political concerns becomes radicalized through our consideration of madness. Without a romanticized suggestion that theatre could completely sunder itself from the spatial structures of hallucination, I suggested that through a multifaceted, playful approach to space, theatre could begin to point to new directions. In this way, it offered resistance by giving us new ways in which to imagine and see madness.

Moving to my third chapter, I was interested in the possibility of witnessing, and what witnessing meant within a theatrical context. More specifically, I looked at how witnessing allowed us to relate and respond to suicide. I wanted to see how witnessing allows us to regard suicide, without attempting to imprint ourselves upon its occurrence. Drawing upon the theories of Jacques Derrida, François Lyotard, Shoshana Felman and Dori Laub, I noted that the history of witnessing seemed to primarily revolve around the Shoah and the semiotic. I suggested that suicide and theatre offered a different set of challenges. However, I drew upon some of the divisions of witnessing between testimony, witnessing and meta-witnessing, and noting how these concerns between the speaker, the listener, and self-reflection were always co-dependant.

Across Sarah Kane's *4.48 Psychosis* (2001), David Greig's *Fragile* (2011), and Bush Moukarzel's and Mark O'Halloran's *Lippy* (2014), I observed the complexities of what it means to witness, to look back upon our looking. Alongside this, I interrogated the audience's own place within the theatrical processes; yet, far from simply a transformation of the audience, from passive spectator to active witness, I suggested that witnessing was a process in which the theatrical productions interrogated themselves, which encapsulated the audience into their circles and processes of self-reflexion, against the ability to speak and the ability to listen. All three plays were drawn towards a world outside the theatre. Beyond written language, I observed it was possible to witness through an interrogation and elicitation of sight, voice and response. I noted

that, whilst premised upon aporia, these works understood witnessing as a never completed act. Far from simply failure, I suggested this contributed to an understanding of witnessing as process, as something ongoing, that could never cease. In doing so, I conceptualized theatrical witnessing as another mode of resistance, which allowed us to look back upon our own looking, to reflect upon the possible violence of representation, to deconstruct the violence of our gaze as against the necessity to look.

In the final chapter, I shifted to the notion of the ethical encounter itself. I looked specifically at autobiographical theatre, and the recent rise in using this genre to explore questions of madness. I was cautious about the suggestion that autobiographical performance, by putting forward the mad person's voice, was de facto a radical act. Rather, I explored the dangers of the confessional narrative, how this frequently creates a narrative of overcoming de-politicized personal struggle, and how this leads to the unproductive inculcation of pity. Instead, I used certain aspects of the theory of Emmanuel Levinas, to suggest the ethical response emerges from an immediate, phenomenological encounter premised upon alterity. Far from following the easy ethical-political divide, I noted that there are intense political concerns to Levinas's conception of the ethical. Building upon this, I was interested in how autobiographical performance could instil the audience's regard whilst rejecting easy comprehension. I asked how did the selected performances – James Leadbitter's *Mental*, Dylan Tighe's *RECORD*, and Bryony Kimmings and Tim Grayburn's *Fake It 'Til You Make It*, reinstate the alterity of the mad person?

These performances all usher in a crisis of representation in order to elicit an ethical encounter. This can revolve around a disturbance of the structures of 'authenticity' surrounding the performance or the performer, an implosion of the confluence of performer and performed, or through playfulness with the multiplicity of silence; in each case, the representation of madness is always accompanied by a troubling of various theatrical tools underlying the representation. It was through this aesthetic wavering or shimmering that an ethical question was posed to the audience.

Each one of these chapters has tangled with the complexity of madness and the possibilities of theatre to create new conceptualizations of resistance. This is not simply the implementation of philosophical schemas onto a theatrical canvas. Rather, using various thinkers as a launchpad, I have interrogated their ideas, then explored the various performances and plays, to forge new conceptualizations of what resistance can mean. In doing so, I have identified four different modes by which contemporary British and Irish theatre can offer resistance to structures of madness. I have contributed to new modes and ways of thinking through resistance in theatre with regards to madness, responding to the current dearth of literature in this arena.

Across these chapters, we can see a shift from a concern with institutional structures to the lived experience of the individual, from structural concerns to individual voices. If the contemporary asylum represents the most concrete example of the institution of madness, then the mad person's testimony refocuses upon individual lived experience. Yet, rising throughout the thesis, is their intertwining nature, their necessary concurrence. In the contemporary asylum, institutional logics take place and occur through and upon mad bodies. The spatial logics of hallucination are an attempt to install psychiatric power and containment around mad experience. The deeply personal act of suicide is used as an excuse to control mad bodies, utterly implied in the construction of madness; likewise, our comprehension behind it veers between the social apprehension of suicidology and the individual ethical apprehensions, it is both a social and individual phenomenon. Even in the testimony of the mad person and their attempts to resist the act of silencing, they talk within the institution; the language provided, the cultural idioms through which they can speak, all emerge from institutional apparatus.

This thesis has attempted, throughout, to position and triangulate between the political structures of madness, the lived experience of the mad person, and the aesthetic representation of both. Looking back across these various conceptualizations, I note that the question of representation has become bound up with non-representation, the politics of what is shown tied with what is not. Each of these conceptualizations of resistance seems bound up with a refusal or caution in the representation of mad experience. In the practical critique, we observe the power structures around the mad body, but mad experience itself is not

represented. The investigation of new spatialities of hallucination attempts to disturb and move away from easy inner-outer logics whereby internal mad experience is visualized on stage. In witnessing suicide, we acknowledge the incommensurability of understanding, to witness is to confront the poverty of understanding, and the violence behind the assumption that we can. Meanwhile, ethical responsibility is not brought forth through an explanation or untroubled representation of mad experience, but rather through the establishment of alterity, of the refusal to represent.

This offers the obvious question: if non-representation can be radical, why represent whatsoever? But, this is to imply that non-representation is homogenous, simply absence. Each of these chapters has attempted to carefully delineate structures of power, the political and ethical compulsions, and the narratological modes, by which we trace around this gap. If these plays avoid forming architectures of mad experience, then they do so by charting out the ways in which political structures of madness seeks to inform and control the mad person.

In these various negotiations and triangulations, I hope to have demonstrated that the resistance of theatre is not a utopic plane, but rather the push against existing power structures in order to discover new possibilities. Often these plays have, on some level, encountered difficulties, or to some level reinscribe the formulations they seek to resist. The realist plays of the contemporary asylum still silence the mad body. Plays concerning hallucination, even as they trouble its spatial structure, still find themselves collapsing into hallucinatory tropes. The process of witnessing suicide is never complete. If autobiographical performance can re-establish the ethical encounter, re-pose the question, it cannot structure or determine the audience. Despite this incompleteness, this is not failure, but rather pushing against the language and idioms through which we conceive the mad. This thesis has not been about complete conceptual emancipation, but rather the first steps towards more progressive lines of thought.

Potential Future Developments of Research

In terms of future developments of this work, I hope that this thesis can point towards new directions in a multitude of ways. The sheer extent of what madness covers and constitutes, coupled with the comparative lack of research in this area, offers a wide range of future

opportunities. In this work, I have covered four different modes of resistance and analyzed four separate logics of madness. However, this research is in no way an exhaustive overview of madness in theatre. As stated in the introduction, it would be possible to set many of the conceptualizations of resistance against different logics of madness; to perform, for example, a practical critique of suicide, or an interrogation of the spatial logic of the asylum. Likewise, analyses of other plays could potentially bring to bear additional considerations: different modes of resistance or alternative logics of madness. The framework and mode of conceptual work I have performed is an open process.

I have chosen to look at British and Irish theatre for this thesis; this thesis is firmly embedded within this context. An extension or shift of this work, however, could look at theatre cultures outside of this particular context, in comparative studies across different communities. There are different genealogies and varying constructions of what madness constitutes according to context; Foucault's understanding of madness, for example, would be less appropriate in a non-Western context. Given this, one possible way of extending this research would be to identify the differences and other means by which resistance is forged in other contexts of madness.

Moreover, a consideration of the particularities of conceptualizing resistance with regards to madness could be further developed and used in other concerns of identity and the political. Throughout this thesis, I have attempted to be intersectional in my analysis, and to forge conceptualizations of resistance to madness open to the multiplicities and complexities of identity. However, using the modes of resistance that I've suggested, it would be possible to integrate and interrogate other politically dominant modes of resistance. Following this, it would be possible to look at plays under-represented in considerations of intersectionality. For instance, a sustained investigation purely concerned with how diasporic communities and non-white demographics work alongside madness in theatrical representations would be beneficial to existing scholarship. In setting the theoretical constructs of this thesis alongside conceptual frameworks emerging from an interrogation of other political structures, as well as their intellectual legacies of resistance, we could inform back and deepen our appreciation of madness, representation and resistance.

Finally, this work has been focused upon a textual and performance analysis of various works. However, it would also be informative to study the different responses and positions of the audience with regards to performances that engage with madness. In particular, many plays assume or revolve around the assumption of a 'sane' audience, who are then exposed or confronted with madness and mad experience. Yet, many of these audiences contain several members who have experience of psychiatric services, are on medication, or have received a psychiatric diagnosis. Troubling many of the assumptions about the makeup of the audience, I would be interested in a study investigating these more diverse experiences; for example, how does a voice hearer experience a work that attempts to simulate voice-hearing?

The possibilities of building upon this thesis are wide and various. The development and reach of this thesis was inspired by the lacuna present in performance studies, of the necessity to create a foothold in the studies of madness and performance. Unsurprisingly, the lack of literature provides a wide terrain of opportunities, across theoretical and practical possibilities. If this thesis represents the initial steps towards a way of thinking through madness and performance, then emerging from this is less a singular direction than a sprawl of new concerns. Madness offers not simply a singular line of inquiry, but a wide field of discourse and study. This thesis has not attempted (and would not have been able) to cover such a wide area. Rather, it has sought to think through madness and performance, conceptualizing what it means to resist, and how it is represented in British and Irish theatre. I hope that, in future years, our relative neglect becomes corrected, with an eye towards aesthetic representation, with a consideration of the political structures of madness, and most of all, with an ethical engagement with those subjected to the diagnostic gaze, contained within these multiple logics, and deemed mad.

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