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“ANTIC DISPOSITIONS?”

**THE REPRESENTATION OF MADNESS IN MODERN
BRITISH THEATRE**

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A thesis submitted in fulfillment of the
requirements for the degree of Doctor of Philosophy

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Abstract

This thesis examines how mental illness has been represented in British theatre from c. 1960 to the present day. It is particularly concerned with the roles played by space and embodiment in these representations, and what emerges as bodies interact in space. It adopts a mixed methodology, drawing on theoretical models from both continental philosophy and contemporary cognitive and neuroscientific research, in order to address these questions from the broadest possible range of perspectives.

The first part of the thesis draws on the work of Michel Foucault and Henri Lefebvre to explore the role of institutional space, and in particular its gendered implications, in staging madness. The second part introduces approaches to the body drawn from the cognitive turn in theatre and performance studies. These are connected to the approaches of the first section through phenomenology's concern with lived experience. Dan Zahavi and Shaun Gallagher's work on 'the phenomenological mind' provides important context here. In addition, Emmanuel Levinas's critique of ontology offers a solid basis from which to think about how to act ethically as both a producer of, and an audience member for, representations of mental illness.

Through these explorations, this thesis suggests a model of madness, not as something to be bracketed as 'other' and belonging to a deviant individual, but as emerging *between* bodies *in* space – there is no madness outside of social, spatial and embodied contexts. This in turn suggests a new approach to understanding the role theatre can play in addressing the lived experience of mental illness.

While many productions currently attempt, unilaterally, to reduce the 'stigma' of mental illness, this thesis suggests that that, in fact, discrimination against people experiencing mental illness is more likely to be reduced through the interaction between an ethically minded production and an ethical spectator. Such a model does not claim to be able to reduce the experience of madness to a totalising concept which can be communicated through theatre, but rather insists that it is only through an embodied, empathic interaction that a true concern for the ('mad' or 'sane') Other can emerge.

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A note on terminology

The question of what language to use when discussing disability, and especially mental health, is complex and contested. There is still debate, for example, over whether it is more appropriate to refer to ‘disabled people,’ emphasising the solidarity of a socially oppressed group, or ‘persons with disabilities,’ emphasising the unique identity of the individual separate from any medical impairment.

Similarly, different scholars and activists have different views over the language of ‘mental health.’ While ‘mental health service users’ or just ‘service users’ are the preferred terms within social work, the limited availability of services in many areas, the long waiting lists, and the projected number of individuals experiencing psychic distress who have not sought medical treatment means that such terms exclude a large number of people for no other reason than their lack of contact with medical or social institutions.

The term ‘mental health system survivor,’ or simply ‘survivor’ is used more commonly among activists critical of psychiatry, and especially psychopharmacological treatments. However, not all who experience psychic distress share the hostility towards mental health institutions implied by this terms. Indeed, there is even controversy over the terms ‘mental health’ and ‘mental illness,’ both from people who support a more thoroughgoing biomedical approach, and who therefore use the term ‘brain disease’ to suggest a specific physical aetiology for distress, and from those who are more critical of the medical model, and who argue that ‘mental illness’ closes the still open question of causation.

As a result, any choices of terminology will be open to challenge. Due to the range of perspectives discussed, and the different historical contexts engaged with, I will use the term ‘madness’ throughout to refer to both the concept of ‘unreason’ and the specific, subjective experiences of individuals (where other terminology is not suggested by the context). This principle will be tempered by the use of the term ‘mental illness’ where the context is specifically biomedical

Introduction: methods and contexts

I perchance hereafter shall think meet

To put an antic disposition on – Hamlet, 1.5, 171-2

Hamlet's 'madness' can be seen as emblematic of the tensions present in stage madness more generally. Shakespeare has the prince state, unambiguously, that he intends to 'put an antic disposition on,' to act mad. This simulated madness convinces Polonius and (possibly) Claudius, and the 'method' (2.2, 205) in his madness contrasts with Ophelia's being 'divided from herself and her fair judgement' (4.5, 85). However, the play's broader concern with the interplay between appearance and reality ensures that even the apparently studied nature of Hamlet's own 'acting' is called into question.

Beyond Hamlet, the history of theatre is full of plays which call for actors to 'put an antic disposition on.' From the divinely ordained madness of Greek Tragedy (traced by Ruth Padel in *Whom Gods Destroy* [1995]), through the violent stage madness of the Jacobean and Renaissance theatre, extreme psychological states have been key to dramatic structure and characterisation. Each era approaches madness through its own cultural lens, so that the theatre of a particular period both reflects and consolidates contemporary constructions and aetiologies. A result of this is that the theatre can be used as a ground for 'diagnosing' cultural approaches to madness, as well as for 'teaching about' it.

These approaches are suggested by two recent book-length studies of madness in the theatre, both written by psychiatrists. The first, *Scenes of Madness: A Psychiatrist at the Theatre* by Derek Russell Davis (2002), focuses on the pedagogical potential of the theatre. Russell Davis presents dramatic characters as psychiatric case studies in order to argue that 'the playgoer may learn as much about madness at the theatre as from any book about psychiatry. But what is learned is different' (1). The specific difference lies in the fact that the theatre allows an audience member to see madness developing as a result of interpersonal processes, and thereby to place mad behaviour in context (2). The second, *Madness at the Theatre* by Femi Oyeboade (2012), is a shorter and more straightforwardly historical book. Oyeboade isolates specific moments in theatre history, and uses these examples to demonstrate that 'over historical time there is a clearly delineated trajectory of the methods of denoting madness in Western and Western-influenced theatre' (viii).

These approaches have tremendous value, and make a compelling case for the importance of exploring the dialogues between popular conceptions of madness and their representation in the

theatre. It is striking, therefore, that the disciplines of theatre and performance studies have not yet produced a thoroughgoing study which foregrounds approaches and methodologies specifically suited to the medium. However, there is a steadily increasing body of work in this area. Journal articles by Bartleet (2003, on Sarah Daniels), Fensham (1998, on devising work about madness), Fenwick (2000, on the role of theatre in representing madness), Harpin (2013, on the representation of the asylum), and Kaplan (2005, on language and the use of objects in staging madness) speak to the continuing relevance of madness as a topic of interest. A 2012 symposium at the University of Cambridge entitled *Confined Spaces: Considering Performance, Madness and Psychiatry* brought together scholars exploring ‘how far performance might be a useful methodology for understanding and articulating alternative mental experiences’ (Harpin and Foster 2012). Many of the speakers at this conference have also contributed to a recent book, *Performance, Madness and Psychiatry: Isolated Acts* (Harpin and Foster 2014).¹

The present study contributes to this developing field. Building on the insights of Russell Davis and Oyebode about the significance of the theatre as both a cultural response to, and source for, images of madness, it offers a detailed look at contemporary British theatre and performance. By contrast to approaches based in psychiatry, however, I will explore the representation of madness from the point of view of theatre and performance itself. In particular, I focus on two key elements which connect the histories of theatre and madness: space, and the body.² The first section of the thesis explores the connections between the spaces culturally inhabited by madness and those in which it is staged, and offers a taxonomy of space which bridges the two. The second section focuses on embodiment, both of performers and audience. It draws on an encounter between continental philosophy and the cognitive turn in theatre and performance studies, in order to give an account of how performers and audiences interact, and to offer an ethical approach to staging madness.

This structure foregrounds the major contributions made by the thesis, which are as follows: a historical overview of representations of madness in recent British theatre, highlighting the mutually reinforcing structures which drive both cultural conceptions and theatrical approaches; a more solid philosophical foundation for discussing the ethics of performance more generally;

¹ Harpin and Foster’s edited collection has been published so recently that I have been unable to engage with the material it contains in this thesis.

² These terms are defined later in this introduction, and more thoroughly in the introductions to the respective sections of the thesis. In general, though, I consider both ‘spaces’ and ‘bodies’ in the fullness of their interactions with each other. Henri Lefebvre’s work on space as ‘produced’ informs my approach to the former, while Emmanuel Levinas’s conception of ethics, in dialogue with models of embodied cognition, help me think about the latter.

and a framework for discussing madness which sees it as a phenomenon emerging between bodies in space, rather than as a forensic entity to be isolated.

By their nature, theatrical productions are conditioned by, and condition, the stage space within which, and the bodies in and between which, they occur. As a result, an examination of the interactions between stage spaces and embodiment, and their intersections with broader social conceptions of madness, offer important insights into the functioning of both stage representations and social attitudes. In particular, exploring madness as something not located in an individual's identity but emerging between bodies in space can help us move towards an ethical understanding of performances of madness, and theatrical ethics more broadly.

The remainder of this introduction will be given over to an account of the methods and contexts which structure and inform this thesis. After giving a brief overview of the project's development, I will discuss the reasons behind my choice of case studies and methodologies. This will be followed by an account of the diverse approaches to mental illness which have emerged or been influential during the period under discussion, emphasising the instability of identity common to many of them. Finally, I trace a similar instability in how British theatre has conceptualised itself during this period.

Argument and rationale

As noted above in the 'note on terminology', the language we use for discussing madness or mental illness is contested. In his study of representations of madness in culture generally, Simon Cross argues that 'madness' appears as something which can be recognised by all members of a culture (not just experts), and which is not commensurate with developing clinical concepts of mental illness. For Cross, 'the meaning of madness is mediated in and through cultural forms that construct its appearance such that we know that this is what madness "looks like"' (2010, 2). Especially important for him is the political suggestion that the lived experiences of those identified as 'mad' cannot be improved simply by identifying madness with illness and then 'removing the stigma' of that illness.

Building on this insight, this thesis argues that the theatre provides a specific location for examining both the contextual and phenomenological elements of the 'lay' understandings Cross sees as fundamental to the representation of madness. In particular, the thesis traces the development of specifically *theatrical* representations, alongside the developing interplay between 'lay' (public) and 'expert' (clinical) constructions and images of what it means to be mad.

In order to trace these interplays, these theatrical interactions between the popular and the clinical, the first task was to identify a period broad enough to yield insights about continuity and change in approaches to staging madness, yet narrow enough to be feasibly covered within the confines of a PhD thesis. The history of British theatre³ itself provides a natural ‘cut-off’ point in this regard. In the late 1950s and early 1960s, a number of events marked out a situation described by theatre critic Michael Billington as ‘the ground shift[ing]’ (2007, 123) in the British theatrical landscape – the impact of John Osborne’s *Look Back in Anger* (1956), the establishment of the Royal Shakespeare Company (RSC) (1961), the foundation of the National Theatre (1963), and the abolition of the Lord Chamberlain’s power to censor plays (1968). This shifting landscape was also the ground for a production which has become in many ways a canonical representation of mental illness – Peter Weiss’s *Marat/Sade*, directed for the RSC by Peter Brook in 1964. Combined with contemporary changes in the legal position of people diagnosed with mental illnesses (in the Mental Health Act 1959), this suggested the first production of *Marat/Sade* as a reasonable point from which to begin my investigation.

Beginning with *Marat/Sade* also brings into focus the theoretical frame within which this thesis is situated, a frame which is also reflected in Cross’s understanding of the ‘deformed group identity’ (2010, 8) which accounts for many of the images which spring to mind when we think of ‘madness’. For Cross, mad character as ‘the epitome of *human matter out of place*’ (8) – in other words, the idea that madness belongs ‘elsewhere’ (in the asylum, for example) interacts in a mutually reinforcing way with the stigmatising ‘mad, bad, and dangerous’ image of madness in horror films and the (largely) tabloid press. In order to examine this representational nexus in the context of the theatre, I employ both spatial theory and notions of embodiment. In order to facilitate these discussions, the case studies I have chosen are those with a particular focus on these questions. This is not to suggest that other plays could not have yielded similar results, or that the different emphases in other approaches would not be interesting in themselves.

Space

One of the most influential texts in studies of madness in the second half of the twentieth century, Michel Foucault’s *History of Madness* (2006a), is also deeply concerned with the role of space. Foucault posits a ‘Great Confinement,’ a historical moment which meant that ‘madness

³ Although most of the case studies are specifically English rather than British, they take place in a wider British cultural ecosystem. Anthony Neilson, whose production of *Marat/Sade* provides example of stage madness, has also written *The Wonderful World of Dissocia* (2006) for the Scottish context of the Edinburgh International Festival (see Dingwall-Jones 2013 for discussion of this production). Similarly, my own engagement with Theatre Témoin’s *The Fantastist* (2012), discussed in chapter five, took place at the Edinburgh Fringe Festival, again moving beyond a straightforwardly English context.

had been linked to this place of confinement, and to the gesture that designated it as its natural place' (47). Although there is some dispute about the historical merit of Foucault's work (see Scull 2006), his focus on the *place* of madness has set the agenda for a great deal of the sociological and historical research into madness. Erving Goffman's *Asylums* (1961) offers a different approach to the relation between space and madness, as he explores the social roles played by patients and staff in 'total institutions.' The key distinction between these groups is that, while staff can pass between the asylum and the outside world, patients are compelled to remain within the closed space of the asylum. This constant space produces a self-regulation of behaviour recognisable as 'institutionalisation.'

Goffman's book is a classic text of sociology, and still regularly appears on undergraduate reading lists.⁴ This alone attests to the importance of space in twentieth-century approaches to madness, and the connection continues in more historically focussed work. Andrew Scull, one of the most prolific historical writers on madness (along with Roy Porter, whose focus on patients influenced the second area of investigation in this thesis, embodiment), also placed space front and centre of his work, as can be seen even from the titles of his books, which include *Decarceration* (1977), *Museums of Madness* (1979), *Masters of Bedlam* (1996) and *The Insanity of Place/The Place of Insanity* (2006). Other historians who have taken a 'spatial' approach to this history of madness include Barry Edginton, who explores the importance of asylum architecture, and Chris Philo (1989), who brings histories of asylum space into dialogue with their literary representation. A special edition of the journal *Health and Place* on 'Space, Place and the Asylum' (Park and Radford, 1997), brings together a number of writers concerned with the interaction between space and madness, and demonstrates the continuing relevance of this approach.

Just as space and place have been shown to have an enduring relevance to the history and sociology of madness in the second half of the twentieth century, scholars have drawn attention to the importance of spatial organisation in theatre and performance, especially in relation to structuralist, semiotic and phenomenological approaches to theatre. Michael Issacharoff (1981) and Hanna Scolnicov (1994) have both offered taxonomies of theatre space, the latter drawing attention in particular to how changing theatre spaces relate to changing attitudes to women. Marvin Carlson (1989) has explored the effect the architecture of theatres and performance

⁴ It has also been reasonably criticised for the limitations of its methodology – Goffman's primary research was conducted while working as a janitor in a mental institution, a position which cannot fully offer an insight into the experiences either of patients or staff. For an overview of these critiques, see Weinstein (1982).

spaces (including exterior design and non-stage areas) can have on audience expectation and reception. Francis Reid (2006) approaches the question of theatre architecture from a more historical point of view, discussing the shifts in assumptions about what a theatre should look in the 1950s, 60s and 70s 'when theatre architecture was rediscovering its past in a search to establish its future' (10). These concerns were cemented in the so-called 'spatial turn' which appeared across arts and humanities disciplines. In theatre and performance studies, the spatial turn brought the existing work on space into dialogue with critical approaches by theorists including Henri Lefebvre (1991), Edward Soja (1989, 1996) and Robert Shields (2013).

The first section of this thesis brings spatial theory to bear especially, in addition to three productions of *Marat/Sade*, on Sarah Daniels' *Beside Herself* and *Head-Rot Holiday*, and Sarah Kane's *4:48 Psychosis*. Together, these plays traverse the changing understandings of the 'spaces' of mental illness, from the specific asylum locus of *Marat/Sade*, via the post-deinstitutionalisation landscape of half-way houses and 'special hospitals' addressed by Daniels, to the oddly 'out of place' approach to dramatic spatiality found in Kane's work.

These plays have been chosen because they allow specific focus on key questions about representational shifts over time. The three productions of *Marat/Sade* I will discuss span a fifty-year period, and engage strongly with the shifting conceptual spatialities which accompanied the historical process we call 'deinstitutionalisation'. As asylums ceased, slowly, to be the default location of madness, the spatiality of madness has become more contested (Cross 2010, 11), a process which I trace through these different manifestations of 'The Asylum at Charenton'. This chapter engages with Henri Lefebvre's (1991) idea that space is 'produced' in the interaction between space as it is perceived, conceived and lived, providing the historical perspective to demonstrate the interplay between shifting conceptions and lived experiences, as well as perceptions of 'mad' spaces which change at a much slower pace.

While the productions of *Marat/Sade* offer a 'bird's eye' view of the shifting spaces of madness, *Beside Herself* and *Head-Rot Holiday* offer a more 'located' view of the impact of spatial change on individuals. Focusing on the (lack of) infrastructure for mental illness in the wake of the Community Care Act 1990, Daniels explores both the community surrounding a 'half way house' called 'St Dymphna's' (*Beside Herself*) and a 'Special Hospital' (*Head-Rot Holiday*). Building on the theoretical frameworks employed in the first chapter, Daniels's work provides the foundation for a discussion of the specifically gendered questions of how madness might be experienced represented post-Care in the Community, via Doreen Massey's (1994, 2) notion of the spatial as 'social relations, "stretched out"'.

Lefebvre's concern with the twin illusions of transparency and opacity, in which space is conceptualised as at once 'innocent' and 'natural' (1991, 27-30) is brought back into focus towards the end of chapter 2, as Sarah Kane's use of space is examined as both a continuation of and response to Daniels's concerns. While *Marat/Sade*'s historical setting offers a broad overview, and Daniels's plays focus on a specific historical-spatial moment, Kane's approach to the spaces of madness both challenges and expands on these approaches. By setting up recognizable spaces and then subverting them, or by refusing a defined space, Kane forces the audience to face the proximity of madness.

The encounter between these specific theatrical examples and the spatial theories referred to above allows me to focus on a number of key areas. In particular, this first section of the thesis pays close attention to the physical context of representations, and the interplay between representations and space. This ensures that 'representation' is not taken to be a straightforwardly 'bodily' or discursive signifying practice, but one which both makes use of and is shaped by its immediate location. This in turn suggests the possibility that space can be seen as a representation of madness itself. Although the bodies to be 'read' as mad are important, they are neither the only, nor necessarily the primary material of representation.

Embodiment

Having foregrounded the importance of space in both theoretical discussions and theatrical representations of madness, this thesis moves on to discuss the role of bodies on stage. Cross (2010, 134-135) argues that the conventional portrait of madness is largely inherited from images of madness in the seventeenth century – the last time that madness as an embodied difference was regularly visible in the public square. Following the logic of the above discussions of space, I want to start from a different point, from the intercorporeal encounter with 'madness', rather than with its iconographic significance.

Since we experience space through the senses, it is clear that embodied experience is key to any interaction with space, and hence to any representation of madness in theatre. Both implicitly and explicitly, the body has been another key point of analysis in historical and sociological work. The recognition that space can only be experienced by and through bodies means that the body is central to discussions of space. If Goffman's (1961) inmates are encouraged to engage in a 'mortification of the self' through their immersion in a 'total institution' and their separation from the outside world, it is primarily through their *embodied* separation from the outside that this mortification takes place. Similarly, Foucault's *History of Madness* (2006a) can be re-read through his later concern with institutional effects on the body (especially in *Discipline and*

Punish [1977]) to offer an account of how the structures of thought he sees as characteristic of the 'Great Confinement' also have an embodied impact.

The body has also been important in more orthodox historical approaches to madness.⁵ The role of the body can be seen in the titles of books by the other great historian of madness, Roy Porter, which include *Mind Forged Manacles* (1987) and *Flesh in the Age of Reason* (2004), as well as the edited collection *Reassessing Foucault: Power, Medicine and the Body* (Jones and Porter 1994). As works of history, however, and with the limitations created by history's necessary reliance on text-based documents, these works tend to focus on the body as an intellectual and discursive concept, rather than on the specific bodies of individuals. It is only recently that more attention has been paid to the embodied experience of mental illness, notably in Matthew Ratcliffe's medical phenomenologies *Feelings of Being* (2008) and *Experiences of Depression* (2015).

By contrast, there has been a sharper focus on embodiment in theatre and performance studies. Until recently, the key approach to the role of the body in theatre and performance was drawn from phenomenology. Bert States offered perhaps the most influential account of the phenomenology of theatre in his *Great Reckonings in Little Rooms* (1985), which proposed semiotics and phenomenology as a 'binocular vision' through which to approach theatre. Stanton Garner has expanded on this approach in *Bodied Spaces* (1994), drawing more attention to the body itself and exploring the interaction between spectator and performer. The body has also been important for theorists of actor training, featuring in Stanislavsky's 'method of physical actions' (see Moore 1965) as well as the approaches termed 'physical theatre,' especially Jacques Lecoq's *The Moving Body* (2000), and Rudolf Laban's extensive writings on dance and choreography.

More recently, the 'cognitive turn' in theatre and performance studies has provided a wide range of new approaches to the role of the body in performance. Cognitive scientists including Antonio Damasio (2006), George Lakoff and Mark Johnson (1999), and Gilles Fauconnier and Mark Turner (2002) have begun to reveal the intimate connections between cognition and the body, asserting that embodied experience is central to our understanding of the world. These insights have been taken up by theatre and performance scholars including Rhonda Blair (2008),

⁵ That this focus is more implicit than explicit may be a result of the Cartesian division of body and mind which is seen by writers as disparate as Foucault (2006) and the cognitive neuroscientist Antonio Damasio (2006) as greatly impeding our understanding of madness. The impact of Descartes' thought, and its relationship to the theatre, is taken up in the introduction to section 2 of this thesis, and in more detail in chapter three.

Amy Cook (2010), Bruce McConachie (2007, 2008), and Nicola Shaughnessy (2013a, 2013b), to extend earlier insights about the performing body and the performer/audience relationship by reference to contemporary brain science. These paradigms are particularly fruitful in approaching contemporary stagings of madness, since they draw attention to the intimate connection between affect and cognition (see Damasio 2006), as well as the embodied nature of empathy.

This section of the thesis begins by returning to *Marat/Sade*, a 'staged return' and remembering, literally replacing the physical bodies which were necessarily placed to one side in the previous discussion of space. By returning to the same productions already discussed, I draw attention to the fact that the separation between space and embodiment is, at heart, an artificial and analytical one. This is supported by an analysis of the (often overlooked) centrality of the body in Lefebvre's own theories of space. This analysis of embodiment in *Marat/Sade* takes place alongside a reading of Anna Furse's *Augustine (Big Hysteria)*. Furse's play is chosen because it engages with psychiatric history as the material for a dramatic interrogation of that history with a more explicit political concern – that of the particular consequences of iconographies of madness for women. This is important for the discussion of ethics which comes to the fore (via Levinas's philosophy) in the second section of the thesis: through their engagement both with psychiatric history and the embodiment of madness, both *Marat/Sade* and *Augustine* offer the possibility of challenging representations which assume totalising knowledge of the experience of an Other.

The final chapter further explores issues of embodied ethics in relation to two apparently very different recent performances of madness – *The Fantastist* (2012) by Theatre Témoin and *Head Hand Head* (2013) by Laura Jane Dean. Again, these performances were chosen for their particularly strong illustrative value of broader trends – while *The Fantastist* draws on physical theatre and puppetry, *Head Hand Head* bases its representational strategy on the more overtly politicized form of solo autobiographical performance. In both these forms the interactions between bodies in space are highlighted and interrogated. *The Fantastist*, alongside other contemporary representations of madness which rely on a more 'theatrical' aesthetic, works in part by creating a shared imaginative space between performers and audiences, an effect I discuss in relation to contemporary cognitive science. *Head Hand Head* makes much of its own claims to authenticity, and as such seems very different to *The Fantastist*. However, as I will demonstrate, the contemporary performance aesthetics of which these productions partake both involve an interrogation of representation and authenticity. By viewing these performances in dialogue with theories of space, ethics, and embodiment, we can begin to gain a more holistic

understanding of representations of madness which both rely on and subvert the 'lay understandings' of which Cross (2010) speaks.

Clearly, the performances discussed in this second section of the thesis are more recent overall than those addressed in the first section, and this is a result of the shifting trends in performance aesthetics identified by Hans-Thies Lehmann (2006) among others. Performances such as *Head Hand Head* and *Augustine* directly interrogate questions of performance and embodiment, and therefore provide ideal ground for addressing different approaches to embodied madness. This does not mean that such questions are absent in earlier plays. In Caryl Churchill's *Mouthful of Birds* (1986), the interaction between dance and theatre gestures towards a physical language of madness, while her earlier radio play *Schreber's Nervous Illness* (1972) both insists on and disguises the role of the body in madness. However, the more 'postdramatic' performances chosen here make the questions of ethics and embodiment particularly clear. In particular, *Augustine* is valuable as it simultaneously enacts and critiques the psychiatric tendency to locate madness *in* the body.

By discussing the role of the body in these particular performances, and in the light of the discussions of space in the first section of the thesis, I am able not simply to discuss the roles of the body and space separately as elements of representation, but rather to explore how they function in combination. All theatre (and all 'face-to-face' human interaction) involves the interplay between bodies in space. As a result, the theoretical approach developed here in dialogue with this specific range of theatrical examples, suggest important ethical considerations in the representation of madness.

Mixed methods?

In order to explore these interactions between space, the body, and representations of madness, I will draw both on the continental tradition in philosophy, and insights from the cognitive turn in theatre and performance studies. The cognitive turn itself has brought questions of the 'rationality' of earlier approaches to theatre and performance to the fore. One of the foremost proponents of the 'cognitive turn,' Bruce McConachie, argues that 'to proceed without linking our scholarship to falsifiability undercuts the credibility of our discipline and disables the political possibilities of our scholarship' (2008b, 556). For McConachie, and for F. Elizabeth Hart (2008), the insights of continental philosophy (or, to use McConachie's new pejorative coinage, 'our master theorists' [2008b, 554]) are hopelessly undermined because of their reliance on either discredited or non-falsifiable concepts drawn from psychoanalysis and Saussurian

linguistics. In addition, 'these master theorists tried to place their ideas beyond the protocols of falsifiability' (573).

McConachie and Hart are here entering a longer-running debate about the status of continental philosophy as an academic discipline. The term 'continental philosophy,' like its counterpart 'analytic philosophy,' is incredibly unsatisfactory, and Simon Critchley's staunchly accurate definition is a necessary caveat to any discussion of it: "Continental philosophy is a professional self-description that overlays a prior and more pernicious cultural opposition between the "British" or "Anglo-American" and the "Continental," and which has been pragmatically refined over the years" (1999, 4). In other words, both analytic and continental philosophy are defined as *de facto* opposites by writers and teachers with a professional interest in separating themselves from 'Others' doing work which otherwise might look similar.

As Critchley goes on to observe, the major distinctions between the two schools of philosophy are largely based on appeal to stereotype. What interests us here, therefore, is not so much what the distinction might actually be, but how these stereotypes relate to questions of madness and theatricality. Critchley draws attention to the entries for 'analytic' and 'continental' philosophy in the *Oxford Companion to Philosophy* (Honderich 2005). In the latest edition of this volume, analytic philosophy is described by Anthony Quinton as 'respectful of science, both as a paradigm of reasonable belief and in conformity with its argumentative rigour, its clarity, and its determination to be objective' (31), while, for Stephen Priest, continental philosophy 'rel[ies] on dramatic, even melodramatic, utterance rather than sustained rational argument' (170). Both drama and continental philosophy are here associated with irrationality: for Priest, there is a touch of madness about drama, and a touch of both madness and drama about continental philosophy. This madness, for Quinton, can be excised through the application of (Anglo-American) rationality, and the scientific method.

Bringing ideas from continental philosophy, concerned with discontinuity and the difficulty of making final pronouncements about the meaning and status of cultural artefacts, into dialogue with the theatre and performance, forms which themselves sit awkwardly in the borderlands between categories such as 'high' and 'low' culture, 'literature' and 'performance art,' can help to identify and explore the tensions which emerge in this encounter. Foucault and Derrida help interrogate the social implications of 'madness,' and what we do when we confidently identify something as 'mad.' Lefebvre emphasises the coexistence of multiple ways of seeing the same body or space, and insists that all these ways of seeing are crucial in producing a space or other cultural artefact. Levinas offers a fundamental challenge to the foundations of Western thought which posit the individual Self as the basis of philosophical activity.

Without fully embracing McConachie's relegation of continental approaches to 'at best serve[ing] to amplify and extend what we can already know through scientifically valid approaches' (576), it is also important to bear their critique in mind. Hart and McConachie's comments about psychoanalysis and Saussurian linguistics are on point, and it is important that ideas are assessed for their strengths and weaknesses rather than merely being cited as 'gospel.' However, as noted above, assessing the role of madness in theatre does not merely require the kind of performance analysis to which falsifiable cognitive approaches are appropriate. Rather, it involves assessing the interaction between those elements which *can* be approached through the cognitive and neurosciences, and the cultural and historical phenomena which have been the preserve of continental philosophy.

Particularly when tracing the line between reason and unreason, it is crucial to engage with modes of thought which are culturally coded as both 'rational' and 'irrational,' precisely in order to demonstrate (in an insight from continental thought) that the dividing line between reason and unreason is not one which can (at least at present) be drawn with the ruler of falsifiable science, but one which must be traced through a history of thought. This history both includes and has been carried out by continental philosophers, not least Michel Foucault, whose analyses of social structures cannot (*pace* Hart) be straightforwardly countered by undermining Saussure's linguistics, since they do not straightforwardly rely on them. As a result, the performances discussed in this study will be analysed using approaches drawn both from continental philosophy and from the cognitive turn in theatre and performance studies. As suggested by Melissa Tringham (2013), and as will be demonstrated more fully in the second section of this thesis, the shared heritage of phenomenology and other 'first person' approaches to philosophy offer some perhaps surprising common ground between the approaches. This search for common ground can help to move beyond a simplistic oppositional model in which analytic philosophy is either the Way to Truth or a victim of naive scientism, while continental philosophy is either a comprehensive critique of all hitherto existing thought, or a hopelessly irrational discourse bordering on madness.

Ethics and politics

While my discussion of the representation of madness in this thesis builds towards a conclusion based on the ethics of performance, it is undeniable that a key valence of these discussions is political – both because they relate directly to legislation, and because they concern the embodied self-determination of individuals within a regulatory context. In order to locate my ethical discussion within this broader political framework, this introduction will offer an

overview of some of the more explicit political positions which have been taken towards 'madness.'

Stigma

Perhaps the most widespread political approach to madness involves the notion of 'stigma'. The question of labeling, of naming, is central both to the practice of psychiatry and to critiques of it – how are we to identify a condition which strikes at the heart of identity without thereby dehumanising the individual experiencing it? Scheff and others have raised concerns about the 'indelibility' of psychiatric diagnosis and treatment and the impact it may have on identity. However, the labeling of individuals by medical practitioners is not universally seen as problematic (Gove 1975),⁶ and not all labeling which occurs is a result of statements by medical practitioners. Judith Butler draws attention to some of the tensions between diagnosis and identity in her discussion of 'gender dysphoria.' She notes that the existence of gender dysphoria as a medical diagnosis assumes that it:

[I]s a psychological disorder simply because someone of a given gender manifests attributes of another gender or a desire to live as another gender. This imposes a model of coherent gendered life that demeans the complex ways in which gendered lives are crafted and lived. The diagnosis, however, is crucial for many individuals who seek insurance support for sex reassignment surgery or treatment [...] As a result, the diagnostic means by which transsexuality is attributed implies a pathologization, but undergoing that pathologizing process constitutes one of the important ways in which the desire to change one's sex might be satisfied (Butler 2004, 5).

This instability, between having one's experience (and therefore identity) validated, and the potential damage caused by the pathologisation of identity, is not only present in transsexuality, although it is clearest there. Butler's assessment of the tensions surrounding diagnoses of gender dysphoria raises issues salient to many of the diagnoses currently included within the standard diagnostic models applied to mental illness – the American *Diagnostic and Statistical Manual* (DSM) and the World Health Organization's *International Classification of Diseases* (ICD). In this model, the 'indelible' effects of diagnosis discussed by Scheff conflict with the expected

⁶ Gove takes issue with some of the evidence laid out during the development of Scheff's theories, but even he agrees that 'it does not follow that we should ignore the processes discussed by the labeling theorists [...they] are both real and debilitating' (1975, 248).

position the individual in society. Erving Goffman, one of the pioneers of the theory of 'stigma' used in campaigning, defines it as 'a special discrepancy between virtual and actual social identity' (1986, 3). In this model, the 'indelible' effects of diagnosis discussed by Scheff conflict with the position the individual is expected to hold in society. As a result, the pathologisation of an individual's psychic experiences can have a negative impact on their social experiences, and their 'performance' in social life.

Although the concept of stigma has been the dominant approach for charity campaigning, this understanding of the issues has been challenged. A. K. Thachuk, although she maintains the concept of 'stigma' as an analytical concept, argues that '[biomedical] models fail to effectively address the real issue of embodied difference, for emphasis remains on the body marked as other, and not the relationships that make that marking possible and dangerous' (Thachuk 2011, 144). Liz Sayce takes this further, and argues for a rejection of the term 'stigma,' altogether:

If we only tackle 'stigma,' in the sense of negative attitudes about mental illness, we can have no confidence that we shall change behaviour, as manifest in nimby campaigns or rejections by employers. If, moreover, we understand stigma mainly in terms of users' own attitudes towards their disability – without contextualising those beliefs in relation to the material discrimination that users face – we are effectively expecting users to change whilst letting the rest of society off the hook (1998, 341).

Instead of 'stigma,' Sayce argues for the term 'discrimination,' which may act as 'a rallying point for collective strategies to improve access or challenge prejudice' (331). This aims to move the argument away from a focus on 'symptoms' as a feature of identity, to one where they are accepted as an element of identity. This move would allow individuals who have experienced psychic distress to 'reconcile and appropriate' their experiences to themselves, and use those experiences to forge relationships with others.

In this account, symptoms cease to be the 'marks of shame' implied by the stigma paradigm, and become 'significant articulations of [the individual and the collective]'s relationship to the present world' (Biehl and Moran-Thomas 2009, 271). Michael Smith (2013, 50) similarly draws attention to the 'dynamic, relational process[es]' which have until now been conceptualised through the paradigm of 'stigma'. In focusing on the relationships between bodies in space, this thesis offers both a direct engagement with, and an analytical toolkit through which to approach, these emerging political questions.

Performed identity and disability activisms

Another approach to this growing recognition of madness emerging in social structures and relationships is the 'Mad Pride' movement, which aimed to reclaim the term 'Madness' (always with a capital 'M') as a political concept, 'celebrated 'mad culture,' through publications and music gigs' and 'did not bother with involvement, but preferred a more anarchical [sic] approach with campaigning and organizing punk gigs for disaffected people' (Stickley 2006, 571). In addition to organising musical performances to celebrate 'mad culture,' events such as 'bed pushes,' two minute screams and medication strikes represent a specifically theatrical approach to the performance of collective identity.

However some commentators, including Alison Jost, see the 'Mad Pride' approach as problematic. Jost distinguishes between mental illness and other disabilities, and argues that:

They are not simply different ways of processing information or emotion; they are disorders in the capacities for processing information or emotion. It's one thing, then, to say that mental illnesses should be respected for how they shape and sometimes enrich the lives and personalities of the people who suffer them, and quite another to say that mental illnesses should be embraced by those who suffer them and by the community at large (Jost 2009).

Jost's concerns about Mad Pride notwithstanding, disability movements do have important contributions to make to an understanding of mental illness. One user-led approach to in general disability is the 'social model of disability,' a model which aims to provide 'the words to describe the way society is constructed so that we become disabled' (Finkelstein 2002, 4). The social model distinguishes between 'impairment' (a physical or mental condition) and 'disability' (the social structures which prevent people with impairments from fully participating in social activities). According to this account, stigma itself is a disabling feature of madness. Rather than simply campaigning to end stigma or discrimination, Finkelstein's model entails 'searching for openings in the structures of society where we might effectively contribute with others in the restructuring of society so that it is neither competitive nor disabling for all people' (5).

Internet based activism has also yielded approaches which nuance the ideas of the social model. One such approach is 'Spoon Theory,' set out in a 2003 blog post by Christine Miserandino on the website 'But You Don't Look Sick.' Miserandino uses spoons as a figure for the physical cost of each action to a disabled person (in her case, a person with Lupus): each apparently trivial action costs one of a finite number of 'spoons' to perform. In her words 'the difference in being

sick and being healthy is having to make choices or to consciously think about things when the rest of the world doesn't have to' (2003). While the social model focuses on external factors, spoon theory draws attention to the compromises entailed by the bio-psychological differences between disabled and non-disabled people. While for Finkelstein these compromises are due to a society structured by and for 'people with capabilities,' Spoon Theory draws attention to the physical cost of activity, and the fact that some symptoms (such as pain) are difficult if not impossible to make adjustments for.

The differences here come from different experiences of disability: Finkelstein became a wheelchair user after breaking his neck in an accident, while Miserandino has a fluctuating autoimmune disease. Both models are relevant to the experience of madness: stigma and discrimination can cause access issues, as can neurodiverse responses to crowds, noise or darkness; in addition, some conditions and treatments cause symptoms such as lethargy which can physically limit the ability to engage in social activity. What is telling both about the social model, and about spoon theory, is that they both encourage the adoption of an 'identity label' – either 'disabled' or (more informally) 'spoonie.' Even those models of madness specifically designed to draw attention to the harm done by socially prevalent approaches are aware of how central identity and its instabilities are to madness itself.

Cross's work, introduced above, engages directly with these questions of performance and identity, and directly challenges the politics of 'reducing stigma'. For Cross, simply to address stigmatizing representations of madness fails to engage with the crucial questions of *why* these representations persist. In an insight which has much in common with my own spatial and embodied concerns, Cross considers this 'more fundamental issue' to be 'where we imagine is the place that schizophrenics and others with a psychiatric history properly belong' (33).

This political concern, which forms part of the justification for my own initial decentring of the 'body on stage' as a discrete category, is in many ways prior to some of the more complex and potentially controversial approaches to the politics of madness. Building on some ways on the work of Thomas Szasz, a libertarian anti-psychiatrist who attributed 'madness' to 'problems in living' (1960, 114) and famously saw the idea of mental illness as a 'myth,' David Pilgrim and Floris Tomasini (2012) directly address the implications of different kinds of 'unreasonableness' in society. Noting that 'mental health law' entails certain logical contradictions (it is at once 'too punitive' and 'too ready to excuse' [644]), they call for mental disorder to be '*held to account successfully*' (643, italics original). Their arguments are forceful, and raise questions about the extent to which assuming that mental illness is 'special' in fact perpetuate discriminatory practices. However, they also take place in a different discursive field to the current thesis,

which shares with Cross's work a desire to probe more carefully precisely how madness is or can be thought, rather than specifically how it should (or should not) be 'dealt with'. The key political concerns of my study, then, are approximated by the questions 'by what processes to representations of madness emerge?' and 'how might "bodies in space" provide resistance to or critique of these processes?'

Histories psychiatric and theatrical

While firmly grounded in questions of politics, philosophy and ethics, much of the research process for this thesis involved the techniques of theatre historiography: locating specific material relating to individual productions, including play scripts, reviews, published interviews, production photography, and prompt scripts. In addition, both primary and secondary source material was collected relating to the history of mental illness, and various approaches to actor training (see chapter 3). Information relating to individual productions was largely accessed through theatre archives, especially the archives of the National Theatre and the Royal Shakespeare Company, and the Theatre and Performance Archive of the Victoria and Albert Museum. In the case of some productions, personal interviews were also carried out with performers. Material relating to actor training, and to the history of mental illness, was largely collected through library research.

Drawing on archival material raises questions about how 'recoverable' live performance is through archive research. Matthew Reason (2003) offers an overview of different approaches to the archive, and gives a compelling argument for rejecting the supposed 'objectivity' or 'completeness' of archival documentations of performance. As we will discover over the course of this thesis, notions of 'objectivity' and 'wholeness' are also central to the project of defining 'sanity' and 'reason' to the exclusion of their opposites, 'madness' and 'unreason.' The archive itself is partial, and its meaning is generated in dialogue between the 'mad fragmentations' (Steedman 1998, 67) which have been selected and preserved by collectors and individuals, and the assumptions brought to bear by the researcher. As a result, the interpretations which emerge over the course of this thesis are not an authoritative history of madness in British theatre, but rather a partial and partisan history, a history which deliberately sets aside attempts to tell the 'whole story.'

Nevertheless, it is important to carefully situate the performance examples to be explored within the parallel and often overlapping histories of theatre and of madness, suggesting the articulations of influence and response within and from which particular performances emerge. In common with the political questions identified above, many aspects of these articulations

emerge from developing (and conflicting) understandings of identity. In *An Essay Concerning Human Understanding* (1689), John Locke argues that identity is founded on consciousness, to the extent that 'whatever past actions it cannot reconcile or appropriate to that present self by consciousness, it can be no more concerned in than if they had never been done' (Locke 1975, 346). By placing the continuity of consciousness at the heart of identity, Locke implicitly ties madness, not to medicine, but to ontology. In this approach, any disruption in consciousness which constitutes a break with former experiences of self may actually erase that former self. Indeed, Locke's argument that 'person' is a 'forensic term [...] belong[ing] only to intelligent agents, capable of a law, and happiness, and misery' (346) begins to suggest that symptoms of madness, if they cause an individual to be, for example, incapable of standing trial, are actually capable of removing that individual's personhood.

Locke's influential contribution to Enlightenment conceptions of madness and identity continues to have an impact on contemporary approaches to madness.⁷ Discussing twentieth century psychiatric literature, Vicky Long draws attention to a division between acute patients, who were the focus of the majority of resources, and the 'chronic psychotic,' 'an empty, apathetic shell, no longer actively psychotic but not fully human either' (2013, 20). This division, and the sense of the 'chronic psychotic' as necessarily inhuman, has a clear genealogical connection to Locke's 'forensic' notion of identity. These 'chronic psychotics' were often given the diagnosis 'schizophrenia,' even without exhibiting any actual symptoms and, as Thomas J. Scheff argues, such diagnoses (or 'labels') 'may lead to a career of deviance' (1984, 189), since 'there may be something indelible about psychiatric treatment' (191). Long draws attention to this social attitude of indelibility, and cites a comment by an employer of former patients about the 'great pleasure [he received] from seeing ex-patients blossom into real people again' (quoted in Wansbrough and Cooper 1980, 157).

There are two main approaches which can be used to connect Enlightenment notions of madness to those Long identifies in the present day.⁸ The first is exemplified by Robert-Fleury's painting *Pinel Freeing the Insane* (1876), and the second by Michel Foucault's narrative of the 'great confinement.' The first narrative is essentially liberal-humanist in character, suggesting that an increasing understanding of madness led to a more humane treatment of mad individuals. The following gloss on Robert-Fleury's painting gives a sense of this narrative:

⁷ A good account of the varying philosophical approaches to the question of personal identity can be found in Olson (2010).

⁸ A more detailed and nuanced sense of the development of madness as a concept between the Enlightenment and the birth of psychoanalysis can be found in the titles by Porter and Scull cited above.

Lay asylum superintendents and early medical “alienists” (psychiatrists) in Italy, England, France and the United States contributed to humanizing the treatment of the insane by making confinement less brutal and treatment more gentle and interactive. Pinel in particular spent a great deal of time with his patients, listening attentively as he recovered their life histories. His was a newly sympathetic attitude toward the insane: he tried to make contact with their remaining vestiges of reason, rationally reconstruct their mental world, and – after a momentary act of identification – lead them back to sanity. (Fee and Brown 2006, 1743)

This narrative maintains the Enlightenment model of identity as founded in a coherent ‘life history,’ a ‘mental world’ obeying the rules of rationality. The mad patient remains less than human, but the new, liberal-humanist medical approach offers the possibility that humanity (identity) can be restored to them.

The Foucaultian narrative places a different gloss on the same events, placing them in the context of the French Revolution, and the knowledge that there were some among the ‘inmates’ who were in fact ‘acting mad’: ‘aristocrats dressed as paupers who had taken refuge there, and scheming agents from abroad who merely simulated insanity’ (Foucault 2006a, 469). As a result, the question of identity becomes more vexed:

What madness gained in precision through its scientific outline, it lost in the vigour of concrete perception; the asylum, where it was to rejoin its truth, was not a place from which [sic] it could be distinguished from that which was not its truth. The more objective it became, the less certain it was. The gesture that set it free in order to investigate it was also the operation that disseminated it (471).

In other words, for Foucault and those he has influenced, the ‘freeing’ of the insane marked the end of one structure of confinement and the beginning of another, based not on chains but on classification. However, the move towards classification itself complicated broader notions of identity, because it proved difficult in practice to distinguish those patients who were ‘really’ mad from those who were ‘acting mad.’

Regardless of whether we view these changing notions of madness through the lens of Enlightenment rationalism, or through the critical lens of Foucault’s project, it is clear that there was a dual movement: towards seeing mad individuals both as potentially curable, and towards a

more precise, positivistic, definition of what ‘madness’ itself might be. However, both these movements relied on a concept of madness which found it hard to distinguish from simulation on the one hand and inhumanity on the other. Edward Shorter (1997) describes the initial (nineteenth century) shift approaches to madness as ‘the first biological psychiatry,’ a movement located in asylums and concentrating on what was (physically) happening in the brain. For Shorter, Sigmund Freud’s psychoanalysis (among other things) heralded the end of the ‘first biological psychiatry,’ and can be dismissed as ‘a pause in the evolution of biological approaches to brain and mind’ (145). Regardless of the truth of Shorter’s assessment, Freud’s work has continued to fascinate theatre practitioners: he appears, for example, in Furse’s *Augustine* (1994), and Terry Johnson’s *Hysteria* (1993). This, perhaps, is a result of the theatricality of psychoanalysis itself.

Freud was greatly influenced by the legend of Pinel’s ‘freeing the insane,’ and subscribed to the traditional liberal-humanist approach, stating that Pinel’s actions meant that ‘the Salpêtrière, which had witnessed so many horrors during the Revolution, had also been the scene of this most humane of all revolutions’ (1893, 17-18). He initially described his method of treatment (developed together with Joseph Breuer) as consisting of ‘catharsis’ (Freud and Breuer 2004, 11) in which a ‘jammed’ affect was treated by ‘opening up the way to consciousness and normal discharge of the affect’ (Freud 2006, 107). This has obvious connections to Aristotle’s use of the term ‘catharsis’ to describe the function of tragedy.

Freud soon replaced this approach to treatment with the more familiar ‘psychoanalysis,’ with its focus on the unconscious rather than the symptom-process. However, he maintained his interest in catharsis, describing its function in tragedy in a remarkably similar way to his early formulation of the treatment of neuroses through hypnosis:

[T]he question is one of opening up sources of pleasure and enjoyment from within the sphere of life, just as wit and the comic do from within the sphere of the intellect, through the action of which many such sources had been made inaccessible (Freud 1960, 144).

Alan Read (2001) explores the connection between Freud’s therapeutic practice and the theatre in his discussion of the connections between Charcot’s lectures on hysteria and the hypnotism shows of popular entertainment. Read traces the development of Freud’s thought from ‘catharsis’ to ‘psychoanalysis’ in part through the furniture of Freud’s own consulting room. Noting that Freud kept a lithograph of Charcot hypnotising one of his patients hanging over the famous couch, Read notes that a sense of performance remains even when Freud’s practice has

apparently becomes more 'scientific.' For Read, the replacement of the term 'catharsis' by 'psychoanalysis' represents the point at which 'the psycho-analysis that is performance has to become the psychoanalysis that might have relations with performance' (160). In my discussion, the continuing importance of performance to psychoanalysis will be explored in more detail in chapter four.

If we continue to follow Shorter's periodisation of psychiatry, the 'psychoanalytic hiatus' is broken by what he calls 'the second biological psychiatry.' This shift occurs over a similar period to the developments in theatre and psychiatric law which, as traced above, delimit the earliest point in this thesis, beginning in the 1950s and developing through the subsequent decades. This 'second biological psychiatry' was heralded, in part, by the developments in psychiatric medicine which saw the introduction of antipsychotic (chlorpromazine, 1952), antianxiety (benzodiazepines, 1960 onwards), and antidepressant (imipramine, 1957) drugs. With the development of effective medication, the desire to identify physical, rather than psychological, causes for mental illness returned. It is into this atmosphere of increasing biological treatment of and reflection about madness that Peter Brook's production of *Marat/Sade* intervenes, juxtaposing Coulmier's faith in Enlightenment scientific values with the reality of life for those 'benefiting' from these treatments.

Alongside these developments in psychopharmacology, there was a renewed interest in the classification of psychiatric disorders in what has been called the 'neo-Kraepelinian' approach to psychiatry. 'Neo-Kraepelinian' refers to the recovery of early twentieth-century psychiatrist Emil Kraepelin's desire to identify specific psychiatric disease-entities (see Compton and Guze 1995). The novelty of this approach lay in its introduction of the 'idea of a disease entity [into] psychiatry and the conceptual map of the psychiatric disorders' (Jablensky 2007, 383) in opposition to the longer term, more discursive practices of psychoanalysis. This idea of madness as something which can be accurately described, and which is the result of a discrete disease entity, adds another layer to the interactions between madness and identity. The neo-Kraepelinian approach implies a model in which the identity of the disease (for example schizophrenia) can be defined from the remembered and observed action (identity) of the patient.

However, this apparently more 'objective' approach does not preclude a concern with 'performance.' In his critique of the neo-Kraepelinian model, John Gach asks: 'did it ever occur to Kraepelin that inventing new syndromes both encourages psychiatrists to find patients who exemplify the new categories and provides the conflicted and disturbed with a new model and vocabulary through which to express their suffering and discontent?' (2008, 690). In other

words, while biological psychiatry is based on the accurate description and isolation of a ‘disease entity,’ these descriptions themselves may be used and adapted by individuals desiring treatment, and the knowledge of a ‘classic description’ of a condition may in fact lead to new symptoms manifesting in a patient or group of patients with a certain diagnosis (as suggested in Scheff’s ‘labeling theory’).

In addition, Gach’s observation of the ‘new vocabulary’ available to those experiencing madness chimes with contemporary media debates surrounding the aetiology of so-called ‘somatoform disorders,’ such as ME (once known as ‘yuppie flu’). Peter D. White argues in the *British Journal of Psychiatry* that ‘telling patients that they have a psychosomatic disorder is usually the first step in a deteriorating doctor-patient relationship. To most lay people, psychosomatic means malingering or “all in the mind”’ (Wessley and White 2004, 96). The idea of ‘pretending,’ or ‘malingering,’ has strong connections with the theatre, implying an either deliberate or self-deceptive performance of illness for the purposes of convincing either specific medical practitioners or society at large.

It is unsurprising, then, that this renewed shift towards the classification of mental illness, and its associated questions of performance, should be reflected in theatrical representations of madness. The key discursive shift in psychiatry is broadly identified as occurring over the course of the 1970s, culminating in 1980 with the publication of the third edition of the *Diagnostic and Statistical Manual* of the American Psychiatric Association (DSM-III) (Shorter 2005, 8; Mays and Horwitz 2005). Marking a break from previous editions, in which ‘diagnosis’ was less important than addressing the specific underlying factors, DSM-III made diagnosis the front and centre issue. The extent of this shift, whose effects rapidly spread to worldwide as the new paradigms of DSM-III were adopted in the World Health Organisation’s International Classification of Diseases, 10th edition (ICD-10, published 1992) is hard to overemphasise. For Mays and Horwitz (2005, 250), with the publication of DSM-III ‘psychiatry shed one intellectual paradigm and adopted an entirely new system of classification.’

The impact of this shift on theatrical representations of madness is, at least in part, the story traced throughout this thesis. With the increased reliance on supposedly objective medical terminology, madness has come to be more closely associated with specific diagnostic terms. The conditions ‘schizophrenia’ and ‘manic depression’ are referred to particularly commonly in the early years following this shift, possibly preserving the earlier (psychoanalytic) distinction between ‘neurosis’ and ‘psychosis’ which had been superseded by DSM-III’s broad range of

conditions.⁹ If this is the case, the association gestures forward to the fierce debates around community care, and the associations between madness and violence which provide much of the immediate British context for many of the performance examples to be discussed below, especially Sarah Daniels' work.

The twin shifts towards psychopharmacology and an increased interest in diagnosis were attended by a continuing conflict over the value of these shifts, and how to accommodate them within medical and legal systems which were themselves fruits of the Enlightenment. During the 1960s, and partly in response to the increasing use of medication in psychiatric treatment, a disparate group of thinkers began to raise questions about the implications of an uncritical medicalisation of madness. The key authors in this critical tradition include R. D. Laing (1990a), Thomas Szasz (1960) and Michel Foucault (2001), whose writings have often been viewed as forming an 'anti-psychiatry' movement. However, the term itself is possibly misleading, since only Szasz takes a strictly 'anti-psychiatric' line in his writing. Laing and Foucault both have more complex views of the profession, as I will explain shortly, and even Szasz continued to practice as a private therapist despite his own criticism of the idea that mental illness is a clinical entity.

Szasz (1960) draws attention to the socially constructed nature of the 'norm,' and denies the intervention of any clinically significant pathology into those states known as 'mental illness':

In actual contemporary social usage, the finding of a mental illness is made by establishing a deviance in behaviour from certain psychosocial, ethical, or legal norms [...] Since medical action is designed to correct only medical deviations, it seems logically absurd to expect that it will help solve problems whose very existence had been defined and established on nonmedical grounds (115).

He sees this appeal to 'norms' as an attempt to effect social control through the medicalisation of non-medical personal or social issues. The solution, for him, is to sever any connection between mental health care and the State, allowing individuals who experience 'problems of living' (his preferred term for those phenomena discussed in this thesis as 'madness') to enter freely into therapeutic relations with private therapists without compulsion.

⁹ Following the arguments of both Cross (2010) and Harper (2005, 478) that straightforward appeals to psychiatric 'truth' should be resisted, we should not be too quick to correct the latter diagnosis to 'bipolar affective disorder'. Rather, it is important to pay attention to the actual life of such languages, and to explore how they interact both with earlier icons of madness, with the languages of biomedical psychiatry and, in the context of this thesis, with the conventions and preoccupations of the theatre.

Laing's argument is similar, as he sees schizophrenia in particular as a socially rather than biologically determined entity. However, his criticism of the medical approach comes not from a belief in the inherent coerciveness of psychiatric treatment, but from the dehumanising nature of the (psychoanalytically derived) theories of mind which dominated the field at the time he wrote *The Divided Self*. Referring to the language of ego, superego, and id, Laing argued 'how can one demonstrate the general human relevance and significance of the patient's condition if the words one has to use are specifically designed to isolate and circumscribe the meaning of the patient's life to a particular clinical entity?' (1990a, 18).

Foucault's approach to the history of psychiatry has already been introduced in this chapter. Broadly, Foucault sees psychiatry as a tool of social control, and a way for society to avoid the more troubling questions raised by the existence of madness. He argues that 'we must try to return, in history, to that zero point in the course of madness at which madness is an undifferentiated experience, a not yet divided experience of division itself' (2001, xi). He presents himself as redressing an imbalance which 'thrusts into oblivion all those stammered, imperfect words without fixed syntax in which the exchange between madness and reason was made' (xii). As a result, it is perhaps not surprising that his project displays the flaws in historical rigour which Scull (2006, 31) and others have identified – an 'archaeology of [...] silence' (xiii) must be performed using tools quite different to those of the history of the language and practice of psychiatry, which after all is the discourse which silenced madness in the first place. As a result, *The History of Madness*, when read with an awareness of the criticisms of Scull and others, and in the light of Foucault's later elaborations of institutional power, can provide important insights into the intersections between the asylum, the prison, socio-political power, and the cultural and individual experiences of madness.

Although the antipsychiatry movement was less influential in the psychiatric discourses of the 1980s than it had been in earlier years, it helped to shape the first tranche of attempts to adapt medical practice to the new realities of psychopharmacology and classification, especially the international movement towards 'deinstitutionalisation.' While the details of this movement will be given in more detail in chapter one below, it consisted in essence of a belief that the continued use of long-term confinement in the 'treatment' of madness was difficult to sustain ethically. This understanding can be seen to develop from the narrative of Pinel's freeing of 'the insane,' and Foucault's (2006a) suggestion that this 'freedom' was limited, in that while the use of restraint became less routine, the discourses which silenced the voice of madness became more insidious. In the British context, the movement towards a programme of 'Care in the Community' was presented as a humane process towards greater integration of 'mad' and 'sane'

experience, and culminated in the publication of the National Health Service and Community Care Act 1990.

However, this rather utopian assessment of community care has failed to emerge, for a number of reasons. Lewis and Glennerster (1996, 8), in assessing the content and impact of the reforms, argue that the changes were in the end motivated by a crisis of funding, and failed to take into account the actual experiences of those using services. Additionally, a tabloid media panic about the ‘dangerous schizophrenic’ coalesced around the murder of Jonathan Zito in 1992, and fed increasing public fear about the risks of ‘visible’ madness. It is at this point of crisis that a number of the case studies examined in this thesis take place – *Beside Herself*, *Head Rot Holiday*, and *Augustine (Big Hysteria)* all emerge from, and in certain ways interrogate, this association between madness and danger. Cross (2010, 134) argues that ‘[t]he tabloid image of the dangerous schizophrenic [...] corresponds closely with the popular image of the criminal lunatic codified in the Criminal Lunatics Act of 1800.’ In part, he suggests, this is because the seventeenth century was the last time madness was clearly and publicly visible, an observation which must be taken into account when assessing these apparently more nuanced recent representations of madness.

In addition to debates over community care, culminating in the 2007 Mental Health Act which allowed certain patients to be compelled to take psychiatric medication, the 1990s and 2000s saw the introduction of a new class of antidepressants – Selective Serotonin Reuptake Inhibitors (SSRIs). These rapidly became some of the most widely prescribed psychiatric drugs and, as Shorter (2005, 281) suggests, Prozac (fluoxetine, introduced in 1987), the most well known SSRI ‘virtually gave its name to an era.’ SSRIs represented an improvement over earlier classes of antidepressant medication, as they had fewer side effects than these earlier classes, allowing patients to function more fully in society, a factor which supported the community care agenda. However, it has never been successfully proved that a lack of serotonin is the cause of depression, and the ease with which SSRIs are prescribed is often cited with alarm in the popular media. Indeed, Robert Whitaker (2005, 33) among others suggests that ‘it is our drug-based paradigm of care’ that is fuelling the increase in symptoms and diagnoses of mental illness.

The current state of debates around the causes of, and treatments for, mental illness, reflects these debates, and suggests a possible end to the failure of psychiatry as a whole to build on its past noted by Shorter (2005, 10). To be sure, there remain factions – but there is a growing awareness, especially in Britain, of the need for dialogue between people with mental illnesses, biomedical psychiatrists, critical psychiatrists, neuroscientists and others (see for example

Bracken et al, 2012). Indeed, Henrik Walter (2013, 1) has suggested that the ‘third wave of biological psychiatry’ is one which ‘conceptualizes mental disorders as brain disorders of a special kind that requires a multilevel approach ranging from genes to psychosocial mechanisms.’ This multilevel approach is still beginning to emerge, and has less impact on the kinds of representations being discussed in this thesis than the earlier understandings of asylums, lunatics, medication and diagnostic labeling. However, it provides an important lens for thinking about how such representations, which often combine elements from very different ages and understandings of madness, might contribute to the ongoing project of allowing madness to speak.

A brief history of theatre’s unstable identity

While discourses of madness are connected with unstable identities, whether in terms of imposed labels or the assumption that to be mad is to be somehow subhuman, discussions of British theatre in the second half of the twentieth century have tended towards the language of stability and crisis, of vitality and death. This concern with the ‘health’ of the theatre points towards a more deep-seated uncertainty about the medium’s identity. In this section, I will discuss some possible links between the languages of contingent identity in relation to madness and in relation to theatre, suggesting that madness fits into a larger discourse of health which reflects an ontological concern about theatre itself. The associations between madness and simulation traced above provide one basis for this discussion, as does the long tradition of antitheatricity in Western thought (Barish 1981), dating back at least as far as Plato’s expulsion of the theatre from his ideal city. At the same time, the contrary impulse, Aristotle’s notion of theatre as medicine, as ‘catharsis,’ can also be detected in discussions of theatre’s power. Especially in the depiction of madness on stage, what is at stake is the rationality, and social value, of the theatre itself.

The identity of the theatre was central to debates about the so-called ‘New Wave’ of dramatists centred on the Royal Court in the late 1950s, the group who took as their emblem John Osborne’s *Look Back in Anger* (1956). These debates existed alongside, and were influenced by, a number of issues and power struggles in post-War Britain, including: debates between ‘left-’ and ‘right-wing’ politics; between theatre and cinema as popular media; about whether popular media was primarily for entertainment, art, or pedagogy; over the power of the Lord Chamberlain as censor; and, crucially, over the question of whether the State should subsidise a ‘National Theatre.’ The impact of new media on theatre, and the ontological uncertainty it provoked, can be summed up in a statement made by George Colours in the symposium ‘Cause

Without a Rebel,' held at the Royal Court in November 1956, and published in *Encore* (a theatre magazine advocating for the 'New Wave') in June the following year:

It's no use saying the English people don't want to pay money to go to the theatre; it's not true at all. You talk to movie technicians, they wouldn't be seen dead in a theatre. They've got money enough to go to the theatre. They're not interested because the theatre is dead (quoted in Marowitz et al. 1965, 41).

These concerns are ubiquitous throughout the early days of *Encore* - after it adopted 'the voice of vital theatre' as its subtitle in 1956, the categories of 'vital' and 'dead' thread themselves through the language of its contributors, as they assess the identities of theatre in the mid twentieth century.

Dan Rebellato (1999) connects the discourse of 'vitality' in discussions about the political value of theatre with broader theoretical developments in the British Left, and especially Raymond Williams's appropriation of F. R. Leavis's work for Marxism. Rebellato's characterisation of Leavis's thought is illuminating here, as it draws attention directly to the question of *identity* which is at issue: 'Underlying the Leavisite notion of life, then, is the physical, sensuous, thinking presence of the individual in the text' (25). In other words, the 'vital theatre' founded the theatre's identity in its ability to place a living body on stage, and hence to found a community which did not rely on the 'mechanical quality of mass culture.'¹⁰

The relevance of Leavis's notion of life in relation to the representation of madness is that it takes as its basis the idea that there is something psychologically 'wrong' with society. In Osborne's *The Entertainer* (1957, 72), Archie Rice expresses this 'sickness' by exclaiming 'look at my eyes. I'm dead behind these eyes.' By appealing to Leavis's notion of 'life,' the 'New Wave' aimed to cure the psychological ills of British social and theatrical culture by the recovery of the body. Rebellato identifies the political project of the 'New Wave' in similar terms, as 'a blazing determination to bring human emotion back into the centre of cultural life' (1999, 32).

It is also this gesture which, in Rebellato's view, accounts for the curious lack of political potency in the theatre of this period (which includes Shelagh Delany's *A Taste of Honey* [1958], and Arnold Wesker's *Chicken Soup with Barley* [1956], in addition to other plays by Osborne).

¹⁰ This issue remains a live one in contemporary theatre studies, especially in the debate about 'liveness' and the possibility of unmediated presence given the ubiquity of reproduction (television, cinema) in culture more generally (see Phelan 1993, Auslander 1999). This question will be addressed in specific relation to madness in part 2 of this thesis.

Although conventionally seen as a successful theatrical revolution (Fowler 2005, Russell Taylor 1963), more recent studies (Billington 2007, Shellard 2008) have suggested a more complex and measured process of growing tensions rather than outright upheaval. What remains important, though, is the widespread conception of theatre as a kind of cultural psycho-therapy, a conception which would be taken up and extended by director Peter Brook, in dialogue with the work of perhaps the most famous theatrical madman of the twentieth century, Antonin Artaud.

Peter Brook – theatre and unreason

While commentators and playwrights of the New Wave saw theatre as a means of ‘curing’ the deeper psychological sicknesses of culture, Artaud envisioned a theatre ‘like the plague’ (Artaud 1958, 30) – a deadly, incomprehensible spread. It is possible to see an appeal to Artaud as just as problematic as Williams’s use of Leavis - Susan Sontag sees the metaphor of plague as associated with ‘rant, with antiliberal attitudes’ (Sontag 1991, 143). However, the general thrust of Artaud’s argument, for all that its metaphorical polarity is reversed, is essentially a further-reaching version of those of the New Wave. Artaud argues that ‘the plague is a superior disease because it is a total crisis after which nothing remains except death or an extreme purification. Similarly the theater [sic] is a disease because it is the supreme equilibrium which cannot be achieved without destruction’ (Artaud 1958, 31).

The similarities between Artaud’s ‘plague’ and the metaphor of ‘vitality’ become clearer when we compare Artaud’s approach to comments by John Osborne. This time, the metaphors move in a similar direction: Osborne claimed ‘I want to make people feel, to give them lessons in feeling’ (quoted in Rebellato 1999, 32), while, for Artaud, ‘the essential theatre’ (the theatre that is like the plague) ‘invites the mind to share a delirium which exalts its energies [...] causes the mask to fall, reveals the lie, the slackness, baseness, and hypocrisy of our world’ (Artaud 1958, 31). In both these conceptions, part of the theatre’s identity lies in its ability to manipulate the audience’s mental state. Indeed, the language used by both Osborne and Artaud carries a suggestion of madness, of a disturbance in the processes of thinking and feeling which has somehow prevented culture from being fully alive. Theatre, by instituting ‘feeling’ or ‘delirium’ can restore humanity to a community which has lost its identity.

These ideas are extended in Peter Brook’s contribution to the debate. While Brook shares the ‘vital theatre’s’ concern with the death of theatre as a medium, stating that ‘the time-honoured forms [of theatre] have shriveled and died in front of us’ (Brook 1965, 245), he is far from satisfied with the New Wave response. Rather, he capitalises on the discourses of unreason as he predicts ‘a supernaturalistic theatre ahead of us in which *pure behaviour* can exist in its own

right' (250). Initially, this use of 'supernaturalistic' carries a sense of passing through naturalism, and coming out the other side. When combined with references to 'mediumistic' (250) characterisation and 'transcending appearances' (251), Brook's argument begins to suggest a more traditional sense of the 'supernatural' which chimes with Artaud's 'superior notion of the theater [sic] [...] all of the natural and magic equivalent of the dogmas in which we no longer believe' (Artaud 1958, 32). Both these conceptions suggest taking the structures of reason to their absurd conclusion, to a form of unreason accessible by passing *through* reason.

It is no coincidence, then, that it was during the period when he was experimenting with Artaud's ideas that Brook, as part of the RSC's 'Theatre of Cruelty' season, put on an English version of Peter Weiss's *Marat/Sade* (1964), a play (and a production) which could be seen in some ways as the canonical expression of madness on the twentieth century British stage. In *Marat/Sade*, a number of the central features related to madness and theatre coincide: the interplay between space and bodies; political questions about labeling and identity; the questions of vitality and unreason which animated the *Encore* debate; and the interaction between the commercial and subsidised theatre sectors. Brook's production stages the questions he later raised in an article for *Encore*: 'are we sure that in relation to twentieth-century living, the great abstractions – speed, strain, space, frenzy, energy, brutality – aren't more concrete, more immediately likely to affect our lives than the so-called concrete issues?' (Brook 1965, 251).

Politics and despair: the 1970s

Despite the cathartic claims of Brook and of the New Wave, however, a new period of muscular physicality and psycho-spiritual liberation cannot be said straightforwardly to have emerged by the turn of the 1960s into the 1970s. Indeed, even Brook's strident manifesto *The Empty Space*, for all its optimism of overcoming the 'Deadly theatre' ('when we say deadly, we never mean dead: we mean [...] capable of change' [1972, 45]) ends on a curiously uncertain note:

When the actor goes in front of an audience, he finds that the magic transformation does not work by magic. The spectators may just stare at the spectacle, expecting the actor to do all the work and before a passive gaze he may find that all he can offer is a repetition of rehearsals. *This may disturb him deeply*, he may put all his goodwill, integrity, ardour into working up *liveness* and yet *he senses all the time a lack* [...] Occasionally, on what he calls a 'good night,' he encounters an audience that by chance brings an *active interest and life* to its watching role – this audience assists (1972, 56. Emphasis added).

This sense of a lack, only mitigated occasionally by the efforts of the audience, begins to suggest that the theatre's power is in part derived from adversity, from its own ontological uncertainty – that there is indeed something *unreasonable* about expecting the theatre to reach the heights of the Holy and the Immediate.¹¹

The political crises of the 1970s only added to the 'disappointment, disillusion and [...] pervasive sense of despair' (Billington 2007, 210) – the shock Conservative election victory in 1970, the events of Bloody Sunday in 1972, and the escalating cycles of industrial action during Callaghan's Labour premiership culminating in the Winter of Discontent (a pleasingly theatrical term in itself). David Edgar (whose plays in this period included a depiction of R. D. Laing's work in *Mary Barnes* [1979]) notes that the political and artistic Left in the 1970s underwent a shift from the desire to 'present a socialist analysis in an entertaining and accessible way,' to a 'more complex and indeed more sombre [task] not only to analyse the world outside, but to reassess, internally, our whole strategy of change' (1983, 44).

The plays of this period, including *Occupations* (1970), *The Party* (1973) and *Comedians* (1975) by Trevor Griffiths, *The Cheviot, the Stag, and the Black, Black Oil* (1973) by John McGrath, *Light Shining In Buckinghamshire* (1976) by Caryl Churchill, and *Dusa, Fish, Stas and Vi* (1976) by Pam Gems, tended towards political analysis and confrontation of crisis. As part of their political thrust, both *Comedians* and *Dusa* explicitly engaged with questions of reason/unreason. Gethin Price in *Comedians* eschews cheap laughs gained by exploiting prejudice in favour of a deeply disturbing routine which, in refusing the conventions of comedy, appears very close to madness. In Gems's play, Vi's anorexia and Fish's suicide bring home the limitations of the contemporary Women's Liberation movement, and the consequences for those women who fall into the gap between traditional aspirations and liberation politics.

Even the most positive political work of the 1970s engaged with the language of reason/unreason. Edward Bond, in the introduction to the second published collection of his plays (including *Lear* [1971] and *The Sea* [1973]) argues for a 'rational theatre,' and suggests that art involves an oscillation between 'rational objectivity [...that is] a justice that isn't fulfilled in the existing social order' and 'the views of the ruling class' (1978, xiii) which are

¹¹ In this vein, it is telling that Brook sees 'a psychodrama session in a asylum' as 'a true image of necessary theatre going' (1972, 133) – the kind of theatre which is not just a pretty addition to a life which would be not much different without it, in which 'there is only a practical difference between actor and audience, not a fundamental one' (134). Is there a suggestion here that audiences must allow unreason in, if only a little, so that they can be 'plunged together' (134) and truly engage both with each other and the production itself?

fundamentally *irrational*. Theatre, then, for Bond, 'demonstrates order in chaos, the ideal in the ordinary, history in the present, the rational in the seemingly irrational' (xiv). Although he sees this as a vindication of socialist ideas (dismissed as irrational) as fundamentally rational, his logic echoes the idea that rationality is an ideal, and that the theatre somehow needs to be saved from its irrationality in order to have a proper political function.

This continued engagement with the discourses of 'vitality,' and the increasing presence of madness, suggests that a straightforward belief in a Leavisite 'organic community' was being gradually replaced by a pervasive sense that change was to be a lot harder and less reasonable than might have been supposed. Nevertheless, the decade also saw an explosion of small theatre companies in receipt of Arts Council subsidy, including John McGrath's 7:84, the feminist theatre company Monstrous Regiment, and David Hare and Max Stafford-Clark's Joint Stock, creating a theatrical ecosystem far wider than can be covered in this overview.

What is theatre for? Funding in the 1980s

This flowering of small companies in the subsidised theatre sector, and the largely Brechtian aesthetics of left-wing theatre groups, was to prove short lived. The election of Margaret Thatcher in 1979, in the wake of dwindling support for industrial action following the Winter of Discontent, created a more acute, more material crisis for British subsidised theatre, shifting the emphasis back towards the more commercial West End which, in Billington's view, had been 'like a once-great empire living off memories of its former glories' (2007, 208) during the previous decade.

Central to this material crisis was a changed understanding of the theatre's relationship with society at large. The principle of the subsidised theatre sector had, since the Arts Council of Great Britain was granted Royal Charter in 1947, rested (and continued to rest in the 2011 Charter) on the assumption that it was possible 'for the public benefit, to develop and improve the knowledge, understanding and practice of the arts' (2). However, this principle, being broadly social-democratic in basis, stood at odds with the Thatcherite assumption that privately run organisations were inherently more efficient and of higher quality than their taxpayer-funded equivalents. Billington (2013) captures this shift in emphasis in this explicitly partisan vignette for *The Guardian*:

[Margaret Thatcher's] tenure began with a 4.8% cut to Arts Council grants and ended with one of 2.9%. In 1987 her arts minister, Richard Luce, announced that "the only test of our ability to succeed is whether we can attract enough customers."

And, on one of the many occasions when she took Peter Hall to task for complaining, as director of the National Theatre, about arts underfunding, she pointed to the popularity of British theatre the world over. "Look," she said with menacing, jabbing finger, "at Andrew Lloyd Webber."

In shifting the assumptions underlying theatre making in Britain, Conservative policy in the 1980s also profoundly shaped the identity of theatre itself. While the West End was newly ascendant, with Lloyd Webber's musicals proving a valuable theatrical export, many of the small companies founded in the 1970s suffered 100% cuts to their funding.¹²

Some of the political theatre which was made in the 1980s engaged with this state of crisis by appealing to history in more or less complex ways. Harold Brenton's *The Romans in Britain* (1980) offered a commentary on contemporary politics through the lens of the Roman invasion of Britain, examining the dynamics of Empire and the use of violence in the service of politics. Caryl Churchill addressed the assumption that corporate success and feminism were interchangeable by staging a dialogue between powerful women from history in *Top Girls* (1982). Other plays, however, especially later in the decade, offered a more direct approach to the politics of the period. Churchill examined the dynamics of police power, in *Softcops* (1984), and of stock market speculation, in *Serious Money* (1987). Brenton, for his part, worked with David Hare to write *Pravda* (1985), a play about journalistic corruption in which the South African media baron bears more than a passing resemblance to Rupert Murdoch.

Despite these oppositional plays, however, and the controversy which accompanied Brenton's contributions especially, theatre cannot be said to have had a particularly important role in the political discussions of the decade. Indeed, Keith Peacock's (1999) book-length study of the period's theatre concludes in uncompromisingly bleak terms. Peacock identifies some of the theatre's failure with changing funding structures, and suggests that the logic of the 'vital theatre' finally died at this point, as 'the government relocated theatre at a distance from topical concerns to be judged primarily on the basis of its theatrical values rather than on its contribution to the democratic structure and cultural health of British society' (216). Might it be that the flaws Rebellato identified in basing a left-wing theatrical culture on the reactionary past utopia

¹² There is a parallel between the situation of the 1980s and the theatrical climate in which this introduction was written. In the latest round of funding announcements, Red Ladder theatre, an agit-prop group which emerged from the protests of 1968 and has maintained a presence in London and Leeds ever since, lost 100% of its subsidy, amounting to £162,000 (Hemley 2014).

proposed by Leavis finally cracked when put under the pressure of having to oppose a real political project?

Whether or not this speculation is valid, Peacock is adamant that not all the theatre's failures can be attributed to the political manipulation of its identity – some of the blame must fall on its inability to assert its own identity, its willingness to engage in 'cultural rather than political opposition' (216). The result of this shift returns us to the situation prior to 1956: 'the subsidised theatre is [...] a commodity that can be purchased by those seeking entertainment [...]. For the rest, the British theatre is, once again, an irrelevant luxury' (217).

In yer face? The postmodern and the postdramatic

Peacock's assessment of the theatre of the 1980s as a failure is not isolated. In a discussion of Brenton's work, Richard Boon (1993) lays a similar charge against the theatre of the 1980s – 'there remains a sense of an initiative lost, of the hard-won high ground having again been surrendered' (325). The irony of this, for Boon, is that the avowedly left-wing theatre culture which had been ascendant in the 1970s had failed to mount as effective a challenge to a right-wing, unashamedly capitalist government as they had to Callaghan's Labour government of the late 1970s. It is certainly the case that the political theatre emerging from the subsidised sector was clearly eclipsed by the West End musicals more in line with the Thatcher government's conceptions of what the theatre should be.

However, despite the problems of the 1980s, and the profound shift in the identity of the subsidised theatre sector, the story of the connections between an unstable theatrical identity and a concern with unreason did not end with the shift away from 'state of the nation' drama. Rather, the shifting cultural landscape ushered in a new political use for the dramatic concern with unreason, complicating Peacock's assertion that engagement in cultural critique is necessarily an abnegation of the theatre's political responsibility. Since this period will be explored throughout this thesis, particularly in chapters 2 and 5, I will for now simply sketch how understandings of the theatre of the 1990s have developed, especially with regard to their political content and its influence on theatrical explorations of madness.

Aleks Sierz (2001) proposed what has become the standard approach to the theatrical sensibilities of the subsidised theatre in the 1990s: that much of the drama of the 1990s could be considered 'In-Yer-Face.' This, for Sierz, is a theatre which 'takes us on an emotional journey, getting under our skin' (4), but which is simultaneously focused on the stories of the individual, partly as a result of the suspicion of grand narratives which characterises a postmodern political

logic: 'the personal was political [...] small stories could resonate as widely as grand narratives' (241). Theatre's identity crisis in the 1990s, then, was the question of whether the local stories of drug addicts and rent boys (Mark Ravenhill's *Shopping and Fucking* [1996]) could have a broader political resonance, whether postmodern cultural theory could really effect social change (Ravenhill's *Faust is Dead* [1997]). A subsidiary question, raised by Sarah Kane's *Blasted* (1995), was whether the British critical establishment would accept that political questions could be raised through an avowedly non-naturalistic dramaturgy.

The period is still under reassessment, but there is an emerging sense that the theatre of the 1990s cannot be straightforwardly understood as 'In-Yer-Face,' and that the term 'experiential' is too broad to capture the dramatic effects under discussion, ignoring as it does the fact that any play, indeed any object, is 'experiential' in some sense. What is clear is that a deeper understanding of the interaction between stage and audience is needed to develop a more nuanced understanding of the theatre of the period than simply 'shock tactics' – the concern with altered psychic states, whether due to drugs (Jez Butterworth's *Mojo* [1995]), trauma (Anthony Neilson's *Penetrator* [1993]), mental illness more generally (in Sarah Kane's work), or the simple fact of existing in a world where not just theatre but culture itself is experiencing a profound destabilisation of identity.

Section 1

Putting madness in its places: The role of space in the staging of mental illness

I can take any empty space and call it a bare stage. A man walks across this empty space whilst someone else is watching him, and this is all that is needed (Brook 1972, 11)

Madness possesses a double spatiality. In the body, madness is located in the mind, and thus in the head. Conceptually, it is located in medical spaces, whether the asylums of the eighteenth and nineteenth centuries, or the psychiatric hospitals of the twentieth and twenty-first. The exploration and representation of madness on stage aims at materialising the inner experiences of madness, but attention must be paid to the theatrical spaces within which this materialisation takes place, and how they relate to positive and negative cultural assumptions about madness. Space is thus a key consideration when assessing the representation of madness on stage. This introduction will provide some background to spatial theories, in addition to the brief overview given above. Looking at approaches both to theatrical space and social space more generally, it will suggest a taxonomy of space specifically in reference to representations of madness on stage.

Spatial turns

Much of the more recent work done on spatiality in the theatre draws on the broader 'spatial turn' within the humanities, proliferating throughout the 1990s and 2000s and occasioned in part by the 'rediscovery' of a deep-seated concern with space in the works of many continental philosophers, with Henri Lefebvre's *The Production of Space* (1991) and Michel de Certeau's *The Practice of Everyday Life* (1988) emerging as key texts. In addition to these explicitly spatially orientated texts, however, there was also an interest in the question of space in the works of more 'canonical' figures – particularly Michel Foucault (1986) as well as Martin Heidegger (1993) (of whom more will be said in the introduction to the next section, on embodiment). This spatial turn was popularised initially (and unsurprisingly) within human geography and in relation to postmodernism (Soja 1989), marginality (Shields 2013), Marxism (Harvey 2001) and gender (Massey, 1994) among many others.

The tripartite division of space proposed by Lefebvre in *The Production of Space* has formed the basis for a number of studies, including a discussion of the process of making a piece of theatre (Watkins 2005). Critical of what he sees as an ideological tendency to see space as a neutral, empty space waiting to be filled (analogous to Brook's (1972) recognition that, although an empty space is all that's *needed* for theatre, it is impossible to maintain this emptiness in any meaningful way), Lefebvre explores the ways in which space is *produced* through the interaction

between spatial practice, representations of space, and representational space. This triad is roughly analogous to space as it is perceived, conceived, and lived. Spatial practice 'secretly [a] society's space; it propounds and presupposes it, in a dialectical interaction; it produces it slowly and surely as it masters and appropriates it' (Lefebvre 1991, 38); representations of space are identified with 'relations of production and [...] the 'order' which those relations impose' (33); representational spaces are concerned with the 'clandestine or underground side of social life' (33), which is 'passively experienced' and which 'the imagination seeks to change and appropriate' (39).

Theatre studies and the 'spatial turn'

The arrival of the spatial turn in theatre studies was confirmed by a 2003 issue of *Modern Drama* devoted to questions of space. While Joanne Tompkins's introduction opens with the assertion that space is 'perhaps the most consistently overlooked' (537) element of theatre, her opening comments closely echo those of Issacharoff (1981, 211) (whose approach will be discussed below) twenty years earlier. It is perhaps better to say that, although space has been regularly recognised as central to the theatre, what has been lacking is a period during which space emerged as the subject of concerted and detailed discussion. This concerted discussion has become possible through (or at least has been precipitated by) the spatial turn's transformation of discourses of space.

This transformation consists, in part, of the conviction, under the influence of Lefebvre among others, that space cannot be seen as an empty container for action, but that which is produced through the intersections of what Michal Kobialka calls 'layered spatiality' (2003, 558).

Kobialka approaches the historiography of theatre and space by suggesting a parallel between the reconfiguration of space occasioned by the Fourth Lateran Council and evidenced in Corpus Christi processions in the Middle Ages, and that occasioned by the Holocaust and evidenced in the theatre experiments of Tadeusz Kantor.

This comparison raises the question: 'If every conception of theatre is invariably accompanied by a certain experience of space, should not the material historical conditions contribute to the shifts and transformations in the conception of theatre?' (575). It is in order to explore a narrow set of possibilities contained within this question, namely the connection between conceptions of mental illness (itself a part of the 'material historical conditions' of a given time) and the conception of psychiatric space in theatre, that I give an overview of approaches to theatrical space.

Taxonomies of theatrical space

As noted above, attempts to produce a taxonomy of space in the theatre predate the broader spatial turn. Michael Issacharoff (1981) makes some useful distinctions between the *kinds* of spaces which exist within theatre. The first distinction is between 'mimetic' and 'diegetic' space, in other words, between the space shown to the audience and the space implied by the fiction of the play. Both mimetic and diegetic spaces are constituted through three related spaces:

- 1) Theater space (i.e., architectural design)
- 2) Stage space (i.e., the stage and set design)
- 3) Dramatic space (space as used by an individual dramatist) (213)

Similar distinctions have been noted by others, and divided in more or less similar ways. The taxonomy proposed by Hanna Scolnicov (1994) collapses the distinction between stage space and dramatic space proposed by Issacharoff. Instead of a tripartite scheme, Scolnicov makes a binary distinction between 'theatre space' (which corresponds to the same term in Issacharoff's scheme) and 'theatrical space,' a term which encompasses a broader set of concepts than Issacharoff's second and third spaces. For Scolnicov, theatrical space is 'created anew by each production' (2). It is 'a composite creation of the play, *mise-en-scène*, acting, choreography, scenery, lighting, etc., as well as the given theatre space' (3).

Other approaches to the issue of space in theatre include the semiotic analysis employed by Marvin Carlson, which aims to discover 'how places of performance generate social and cultural meanings of their own, which in turn help to structure the meaning of the entire theatre experience' (1989, 2). Carlson, drawing on semiotic theories, explores how the trappings of the individual theatre space (both those directly related to the performance and, perhaps more importantly for Carlson, those which are not) contribute to the meanings of the performances which take place within them. This first kind of space has also been treated more recently by Gay McAuley (2000), who takes a semiotic-phenomenological approach to the importance of theatrical architecture, drawn from ethnographic studies of rehearsal rooms, as well as more traditional analyses of performances. The assumptions inherent in being able to talk about 'theatre space' in general are unpacked by Ngũgĩ wa Thiong'o (1997), who argues that the space in which performance takes place is constantly contested, a site of conflict between the artist and the state.

Spatial theory and psychiatric space

This latter concern draws attention to the interactions between external discourses (of the state, or of a particular conceptual framework such as psychiatry) and the discourses which shape theatrical space. Before moving on to assess specifically psychiatric spaces on stage, it is important to take a spatial approach to the history of psychiatry. A seminal attempt to offer a comprehensive overview of the characteristics of mental institutions can be found in Erving Goffman's 1961 study *Asylums* (1991). Despite his sociological focus on the habits of 'groups of persons,' Goffman's definition of a 'total institution' (a term which can include schools, prisons and hospitals, as well as asylums) draws attention to the central importance of space itself to the phenomena he describes:

A total institution may be defined as a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life (11).

Within this brief account, Goffman highlights the importance of the 'place,' its 'cut off' nature, and the extent to which it 'encloses' individuals and thereby defines them as a group *spatially*. Indeed, this spatial definition, already appearing to be a more important linking factor than any previous conduct or experiences for inmates, is extended when we consider that it is the level of social integration with the 'outside world' that separates 'staff' from 'inmate' (18-20) – the small body of 'staff' can move freely through the 'barrier[s] to social intercourse' (15-16) that are formed by the walls and locked doors of the institution, while the inmates are prevented from this otherwise basic spatial division between work, rest and play.

The importance of Goffman's focus on how space is 'used in the here and now, in the episodic ventures of social interaction' is highlighted by Lindsay Prior (1988, 89). However, Prior also critiques Goffman's reliance on an 'all consuming humanism in which spatial arrangements are given life only in and through the projects of interacting agents' (89) – in other words, for only seeing space as relevant to analysis inasmuch as it is given meaning by the interpersonal relationships which occur within it. Drawing on studies by Durkheim, Foucault and Lefebvre, Prior argues instead that 'the architecture of hospitals is [...] inextricably bound up with the forms of medical theorising and medical practice which were operant at the hour of their construction and, what is more, all subsequent modifications to hospital design can be seen as a product of alterations in medical discourse' (110).

This view is shared by medical historian Barry Edginton (1994, 1995, 1997) who provides concrete evidence that nineteenth century asylums, those which provide much of the impetus for Foucault's account of the 'Great Confinement,' were built with a view of spatiality closer to that of Prior than of Goffman. Edginton's contention is that the potential of the asylum 'cannot be seen in its use (function) but in the builders' vision of sanity (its conceptual development)' (1994, 376). He expresses this through the theatrical metaphor of 'the stage upon which clinical surveillance is played' (376), an image which demonstrates the importance of space in determining the meaning of the actions performed therein. This contrasts with Goffman's view of space as attaining meaning only through these actions. For Edginton, the design of asylums was treatment *in itself*, as opposed to Goffman's inert and rarefied space *for* treatment.

It is true that Edginton and Goffman are discussing different periods in the development of the asylum, but Edginton's argument that 'the building [...] becomes an architectural artifact signifying the specific discourse on the treatment of insanity' (1994, 378) is in fact relevant to the broader changes and developments of the asylum beyond the historical scope of his article. Indeed, it continues to apply beyond deinstitutionalisation, at a time when the buildings in which treatment takes place have become less central. If the interactions between inmates and staff were, in part, defined by the asylum's space in the nineteenth century, changing spaces throughout the twentieth will also have had an impact on these relationships.

This is not to imply that there is a straightforward and necessary dichotomy between Goffman's view and that of the nineteenth century asylum architects. Prior argues that any hospital space will both reflect *and* constitute the theories of medicine within which it came into being – 'architectural features have no existence outside and beyond the forms of thought and practice which produced them' (1988, 110-111). This double action, of reflection and constitution, provides what could usefully be thought of as a 'dialectic of space': the interactions between architectural approaches and institutional practices which make up human practice within any given institution. Prior's ideas can be usefully extended with reference to Lefebvre, whose limited appearance in Prior's argument is a consequence of the long gap between the 1974 publication of the French version of *The Production of Space* and its eventual appearance in English in 1991. Lefebvre's spatial triad provides a framework through which to approach the interactions between architecture (space as it is perceived), forms of thought (space as it is conceived), and forms of practice (space as it is lived).

Towards a taxonomy of spaces of stage madness

Lefebvre's approach to space, alive to the complexities of different kinds of spaces, offers one way of navigating the interactions between the spaces of madness, theatrical spaces, and the cultural assumptions which shape both, without resorting to binary oppositions. Although Lefebvre's spatial triad has been influential in some considerations of space in theatre, his specific discussions of theatre in *The Production of Space* have been less widely recognised. However, they relate in important ways to the position of space in cultural conceptions of mental illness. The term 'mental illness' implies, if not a strictly Cartesian mind/body binary, at least a degree of separation between the two. This distinction, although possibly useful in describing the way in which mental illness is experienced, is also limited, since it tends to suggest an either/or approach to disease which fails to take into account the interactions between madness and embodied experience.¹³

Lefebvre uses the example of the theatre to challenge verbal abstractions which set the mind above the body and conceal the necessary, embodied articulations between ideas and physical practice. Theatre, as a 'non-verbal signifying set,' is irreducible to the abstract space of the 'verbal' or 'mental,' because it 'in addition to a text or pretext embraces gesture, masks, costume, a stage, a *mise-en-scène* – in short, a space' (62). For Lefebvre, therefore, theatre is an exemplary instance of the limitations of dualistic thinking – and the importance of space in articulating these limitations. This is particularly important in relation to both Issacharoff's and Scolnicov's taxonomies, which rely on the ability to maintain binary distinctions between the mimetic and the diegetic (in Issacharoff's case) or between 'the given theatre space' and 'theatrical space' (for Scolnicov). As we will see, Lefebvre is less confident about the ability to draw such distinctions.

In order to understand Lefebvre's approach, we must first take a detour through his vexed engagement with psychoanalytic theory. Recent attempts to bridge the divide between psychoanalysis and 'brain sciences' have drawn attention to the curious neglect of the body in psychoanalytic discourse – Ami Klin and Warren Jones note that psychoanalysis 'shies away from dealing with the basic unit of its philosophy – that is, how bodily sensations and experiences become symbolic tools' (2007, 6). Lefebvre shares this materialist approach. Sympathetic to the psychoanalytic privileging of the mirror, Lefebvre nonetheless sees its value as material rather than 'psychic' – the relationships which are described by, for example, Jacques Lacan, through the concept of the 'mirror stage' (1977) are '*material*, because they arise in

¹³ The problems of Cartesian dualism for the practice of 'acting mad' are discussed below in the Introduction to section 2, and in chapter three, 'Acting, Embodiment and Ethics.'

connection with the (material) body/subject and the (material) mirror/object' (Lefebvre 1991, 186).¹⁴

From this point of view, the theatre, as a complex site which cannot be characterised as purely subject or object (and which is not, therefore, purely mimetic) constitutes a 'third space which is no longer either scenic or public' (188) but which rather consists of an interplay between fictional and 'real' spaces. As a result of its position at this point of articulation and interplay, theatre also exists in a complex relationship with Lefebvre's spatial triad:

To the question of whether such a space [theatrical space] is a representation of space or a representational space, the answer must be neither – and both. Theatrical space certainly implies a *representation of space* – scenic space – corresponding to a particular *conception* of space (that of the classical drama, say – or the Elizabethan, or the Italian). The *representational space*, mediated yet directly experienced, which infuses the work and the moment, is established as such through the dramatic action itself (188).

The theatre is therefore one site at which the mental (abstract, ideological) space of a culture can be examined at the moment of its articulation into the physical.

It is no surprise, then, that theatrical articulations of mental illness often derive their *mise-en-scène*, elements of costume, and even of choreography from the spaces which have been produced by the ideological assumptions of Western culture about 'madness' – the asylums. The close connection between asylum space and cultural conceptions of mental illness found expression in Enoch Powell's speech in support of deinstitutionalisation: 'There they stand, isolated, majestic, imperious, [...], rising unmistakable and daunting out of the countryside – the asylums which our forefathers built [...] to express the notions of their day' (quoted in Shiri et al. 1997, 71). As Anna Harpin (2013) notes in a recent article, while the asylum looms large in cultural memory, its space is changing shape under the weight of popular representations and Hollywood caricatures. For Harpin, the important attempt to resist the 'compulsion toward absolutes' (338) which characterises much of the discourse is doubly difficult due to the absence of patient voices from most discussions of the asylum. Attending to the conceptual spaces of

¹⁴ My own approach to material drawn from psychoanalysis shares this sympathetic yet sceptical approach. As will be discussed in chapters 2 and 4 below, psychoanalysis has a questionable relationship with evidence, and with professional ethics. However, it has also had an important influence by suggesting that the experiences of madness deserve to be paid attention to in their own right. This focus on first person experience gestures towards what could be called a phenomenology of madness.

madness, and to what is concealed by them, cannot replace the importance of attending equally carefully to the histories still being told of asylum life, but it can provide another way of approaching these often monolithic signifiers.¹⁵

In order, then, to begin to unpick these complex spaces, to suggest a taxonomy which can capture the multivalent interactions *between* spaces, we must first admit that such a taxonomy cannot aspire to the specificity of those offered by Issacharoff or Scolnicov. Lefebvre's approach indicates that the 'triad' he suggests is only a way of analyzing spaces which, by their very nature, emerge *from* the interactions in question. Nevertheless, we can consider any staging of madness to emerge from the interactions between:

- 1) Mad spatial practice – The (authorised) 'performance' of madness on stage, and the ways in which the audience is orientated in relation to this (As voyeurs? Witnesses? Participants?)
- 2) Institutional space – Both the physical space of the theatre building, and the systems for containing madness which are constructed by the performed fiction. Institutional space is analogous to Lefebvre's 'representations of space,' in that it involves the 'official' spaces, working as intended by those who are in control of them.
- 4) Spaces of Conflict – Those approaches to and understandings of space which challenge the assumptions set up by the institutional spaces. These spaces are akin to representational spaces insofar as they are 'mediated yet directly experienced' (Lefebvre 1991, 188). However, they are not straightforwardly 'resistant,' but rather encompass all aspects of space which cannot be reconciled as (authorised) 'mad special practice' or 'institutional space.'

Drawing on these ideas, the following two chapters will explore the role of space in stagings of mental illness in British theatre since 1960. The first chapter focuses on three productions of Peter Weiss's play *Marat/Sade*, and discusses the significance of the asylum at Charenton for *Marat/Sade* as a play, the ways in which the stage spaces used in productions of *Marat/Sade* have

¹⁵ One contribution to the reappraisal of asylum spaces is the concept of 'containment' suggested by Barbara Taylor (2014) in her memoir *The Last Asylum*. Both Taylor, and Jenny Diski in her review of Taylor's book for the *London Review of Books* (Feb 6, 2014), lament the loss of the 'warmth and camaraderie' engendered by spaces which offered 'places where one could go when overwhelmed by "stranded, lonely, homeless feelings."' This amounts to a loss of the idea of asylum, in its initial, positive sense of harbour and protection.

changed over time, and the ways in which these changing spaces relate to changing cultural conceptions of mental illness. The second chapter narrows its historical focus, to concentrate on plays written by women playwrights between the late 1980s and the present day. This chapter will explore the reasons why feminist playwrights engaged with madness how and when they did, the role of space in feminist dramaturgies of madness, and the changing approaches to space in plays written by women over historical time, especially with the advent of discourses which have been referred to as 'postfeminist.'

Chapter 1

Representing Charenton:

Marat/Sade, changing theatrical spaces, and changing social attitudes

Henri Lefebvre's discussions of theatrical space suggest that the theatre is one point of articulation at which the abstract space implicit in a society is actualised into embodied action. Each production is not a transparently legible 'text,' but a spatial palimpsest in which the conceptual spaces of script and promptbook interact with social theatrical conventions and the actual embodied practices of specific actors and audiences interact within a specific place. In the case of Peter Weiss's *Marat/Sade*, the script itself is inscribed with the history of psychiatric treatment, drawing explicitly on the cultural history (perceived), architectural form (conceived), and symbolic afterlife (lived) of the Asylum at Charenton in France. As a result, differing approaches to Charenton's space on stage can provide an index to the ways in which mental illness and its spaces have changed over time.

First performed in German in April 1964, directed by Konrad Swinarski at the Schiller-Theater in West Berlin, *Marat/Sade* is a metatheatrical work in which the Marquis de Sade directs the inmates of Charenton Asylum in a play about the death of French revolutionary hero Jean-Paul Marat. The audience is placed in the position of Parisians who have come to Charenton to watch the production, and Weiss uses the play to address political questions of liberty, equality, and repression, staging arguments between the libertarian de Sade and the authoritarian Marat. The setting is the bathhouse/hydrotherapy room of Charenton, a space which both echoes the bath in which Marat was murdered and the conventions of psychiatric treatment current in early nineteenth century France.

In order to put Weiss's appropriation of Charenton into context, and then to explore how three directors of *Marat/Sade* have put the English translation of the text into *their* contexts, this chapter will perform two related operations. The first addresses the significance of the asylum for Weiss's play, through a historical examination of the asylum from which he draws his inspiration. By drawing on spatial theory and contemporary descriptions of Charenton itself, this first section gives an account of the 'conception' of the asylum as a space, as well as the conflicting meanings which have been attached to these spaces since their earliest days. The second section returns to the play itself, exploring the ways in which three high-profile British productions of *Marat/Sade* (directed by Peter Brook [1964], Jeremy Sams [1997], and Anthony Neilson [2011]) have responded to the challenge of placing the bathhouse of Charenton on stage. Building up a picture of the productions from archive materials, reviews and interviews, this section examines the process of 'putting-into-space' undertaken for each production.

To begin with a discussion of Charenton is not to assert that Weiss's play engages in a straightforward or easily recoverable way with the historical spaces of Charenton, but rather that the interaction between the historical and the fictionalised can shed mutual light on each other. Drawing on Marx's methodologies as proposed in the *Grundrisse*, Lefebvre asserts that:

The production of space, having attained the conceptual and linguistic level, acts retroactively upon the past, disclosing aspects and moments of it hitherto uncomprehended. The past appears in a different light and hence the process whereby the past becomes the present also takes on another aspect (1991, 65).

Our discussion of Charenton as a historical space, therefore, as well as providing important context for the reception of asylum spaces in production, will also change shape retrospectively. By returning to one moment in asylum history (a moment whose import is less in its specificity as in what it can tell us about general attitudes to the treatment of mental illness at the turn of the seventeenth into the eighteenth century), and then moving forward to explore how a representation of that space has been 'put into space' by different directors, we can gain new perspectives on that past moment, and on ways in which the meaning of the asylum has changed and, as Harpin (2013) suggests, is still changing.

The significances of Charenton

A brief account of Charenton's spaces

An admirable position, extensive gardens, spacious walkways, beautiful newly completed buildings, a resident pharmacist, a chapel served by a resident chaplain, a well equipped medical service, a paternal administration, place Charenton among the best establishments devoted to the treatment of the insane (Esquirol 1838a, 539. My translation).¹⁶

Etienne Esquirol, director of Charenton, described his institution in these terms, terms which foreground its spatial characteristics – the location, the gardens, the walkways and the new buildings – rather than focus immediately on the advantages in medical care available. Indeed, in

¹⁶ Une position admirable, de vastes jardins, des promenoirs spacieux, de belles constructions nouvellement terminées, un pharmacie dans la maison, une chapelle desservie par un aumônier résidant, un service medical largement pourvu, une administration paternelle, placent la maison de Charenton au nombre des meilleurs établissemens consacrés au traitement des aliénés.

the section entitled ‘Mémoire historique et statistique,’ Esquirol both opens and closes his argument with reference to the asylum’s architecture, beginning with a discussion of ‘the buildings, the changes and improvements which took place during each period’ (541), and ending by ‘reasserting the urgent need for new buildings for male patients’ (541). Space is not Esquirol’s sole criterion for treating madness, since he also dwells at length on the characteristics of, and treatments for, a wide variety of conditions. However, the descriptions of Charenton’s space are far more than incidental – for Esquirol, the use and organisation of space is crucial for the successful and well-ordered administration of an asylum, and for the cure of patients (see Edginton, 1994). This section offers a brief overview of the space of the historical Charenton, drawing on spatial theories and historical sources, in order both to indicate the milieu in which the historical de Sade was permitted to direct plays, and to offer a way in to the philosophical contentions which shaped Charenton’s spaces.

The focus on space in Esquirol’s account of Charenton is indicative of its time - a historical moment during which an approach to mental health based on ‘restrain[ing] people identified as ‘mad’ and prevent[ing] them from disturbing public order’ was being replaced by an approach which sought to ‘treat’ those identified as ‘mad’ by ‘secluding [them] from the stresses of mainstream society and family life and incarcerating them in a secluded space’ (Coldefy and Curtis 2010, 2119). Clearly, the distinction between the two approaches is a subtle one – ‘restraint’ and ‘incarceration’ both bring to mind images of confinement. Nevertheless, the shift towards treatment was a crucial development, and the exact terms and geographical extent of this shift have formed a key point of contention in histories of madness at least since the first publication of Foucault’s *Histoire de la Folie* in 1972.¹⁷

‘Moral therapy’ and the division of space in Charenton

A plan of Charenton included with Esquirol’s *Des Maladies Mentales*¹⁸ indicates how the division of space relates to this tension between treatment and containment. The various courtyards seen in the diagram are each set aside for patients displaying different symptoms. Thus, there is a

¹⁷ An issue of the journal *History of the Human Sciences*, (1990, 3.1) devoted to a discussion of the unabridged version of the *History of Madness*, not then available in English translation, provides an introduction to these debates. The question at issue is largely concerned with the status of Foucault’s work as ‘good history,’ and Andrew Scull’s article (57-56) is particularly damning in this respect, taking issue with the whole of Foucault’s project in biting sarcasm. More measured responses, by Roy Porter amongst others, also more clearly identify the limitations of Foucault’s attempt to generalise from specific French examples to a broad ‘European’ approach to madness.

¹⁸ See Appendix 1 for a copy of this plan.

courtyard for ‘very disturbed women,’ a garden for ‘placid madwomen,’ a courtyard for those in a frenzy (*furieux*), and, significantly, one for those who are both ‘disturbed and incurable’ (Esquirol 1838a, 703-706). This accords with Barry Edginton’s assessment of the function of architecture in the asylums:

The architect was to construct a facility that ensured the detailed ordering of placement, movement, and perception for all those within its space. The building assessed the limits and types of bodily activities that would define a person as mad or sane. Asylum architecture, in its quest to create sanity, became a disciplinary technology: a space for a clinical gaze. Each patient was to have a place and each place was to have its patients (1994, 378).¹⁹

This architectural approach accords with the more general trend towards classification by observation in the post-Enlightenment period, a trend bound up with the ‘illusion of transparency’ noted by Lefebvre (1991, 27). In classifying the patients in this way, their location inscribes a certain set of assumptions about their condition, which then appears inherent, concealing the ‘social practice’ (28) which has led to their situation. For Roy Porter, ‘observation of asylum patients led to more precise differentiations in theory and practice’ (2002, 135) – a development which can clearly be seen in *Marat/Sade*, as then-director Coulmier introduces each patient/actor by condition rather than name (‘Marat’ a ‘lucky paranoiac,’ ‘Corday’ has ‘sleeping sickness, also melancholia’ [Weiss 1982, 15]).²⁰

These developments followed the theories of Philippe Pinel and William Tuke, pioneers of ‘moral therapy’ for insanity in France and England respectively. Briefly, ‘moral’ treatment depended on simulating a family-type environment (the ‘paternal administration’ praised by Esquirol in the quotation which opens this section), and focusing on routine and contact with nature, rather than (necessarily) restraining patients. The solitude and separation of the asylum became seen as an ideal space for the treatment of the insane – Pinel is well known for ‘freeing the insane,’ but his theories provided new justification for their confinement in asylums.²¹ When

¹⁹ The use of the term ‘gaze’ here makes clear Edginton’s conceptual debt to Foucault, who discusses the operation of the gaze in *Discipline and Punish* (1977, 195-228), and the importance of visibility to clinical medicine in *The Birth of the Clinic* (1973). These issues will be taken up in more detail in the second section of this thesis.

²⁰ All subsequent references to *Marat/Sade* are taken from this edition, unless otherwise noted.

²¹ For more detail on moral therapy see Tuke (1996), Busfield (1986, ch. 6), Porter (2002, 103-8).

Esquirol praises the 'paternal administration' of Charenton, he is drawing on these ideas, and they are also at the root of therapeutic practice as Coulmier presents it in *Marat/Sade*:

We're modern enlightened and we don't agree
with locking up patients We prefer therapy
through education and especially art
so that our hospital may play its part
faithfully following according to our lights
the Declaration of Human Rights (13).

Before we jump to congratulate Coulmier on his Enlightenment approach, or conversely to condemn him for its incomplete application, we should remember Andrew Scull's caution that casting moral judgment on earlier practices is of limited value. He cites the treatments meted out to George III ('chained to a stake [...] frequently beaten and starved' [Baynum 1964, 319]) as evidence that physicians must have believed these treatments to *work*, or they would never have dared to inflict them on their sovereign (Scull 1989, 84-85). Despite this refusal to morally condemn the medical approaches of the past, however, and despite his more general critique of Foucault, Scull does recognise moral treatment as something almost entirely new, more akin to Foucault's narrative of 'rupture' than Roy Porter's suggestion of continuity (Scull 1989, 15-16).

An example of the developments brought about by this 'rupture' can be seen in the design and location of the 'new female quarters' in Esquirol's diagram of Charenton. The bedrooms all have windows overlooking the courtyard, while windows overlooking the landscaped terraces and gardens line the corridor. As Edginton observes 'windows simplify our attachment to the outside' (1994, 381) and, as with the baths attached to the new building (designed for hydrotherapy of the type featured in Weiss's play), allow the 'normal' environment to act on and calm the 'alienated' individuals living there.²² This hope is implicit in Esquirol's description of the gallery as 'open to the country air,' as well as in the care he takes to point out that, in the new building, the dormitories have only 'a single row of beds' (1838b, 706). Even for patients less able to pay, the institution now offers greater privacy and solitude. Indeed, the windowed corridor mentioned above is part of a deliberate practice. Edginton mentions that, in purpose built English asylums 'corridors were not enclosed by two rows of rooms [...] but were lined on one side by rows of windows facing the asylum's grounds' (1994, 381). This development can

²² It should be noted here that, as Lefebvre argues (1991, 27), the assumption of transparency serves to elide the ideological content of a space. In this case, what is elided is the fact that, although the asylum now offers the illusion of freedom, this illusion is at the expense of freedom itself.

also be seen at Charenton as the corridors in buildings 35 and 38 run ‘along the middle of each floor,’ with rooms on each side (Esquirol 1838a, 704-705) a design which has been abandoned in the new building.

The historical Charenton, then, stood at the threshold of the new treatments so proudly proclaimed by (the fictional) Coulmier and (the historical) Esquirol. However, as is clear from even the slightest familiarity with Weiss’s play, the Charenton of *Marat/Sade* does not confine itself to ‘moral’ therapy. Indeed, the speech of Coulmier’s quoted above is an ironic device, set up in order to counterpoint the dialogue between Sade and ‘Marat’ on the question of ‘freedom.’ At least in the English translation (which, as Anne Beggs points out ‘was crafted with the aim of putting into dialogue the Autaudian aesthetics of non-verbal affect and a Brechtian dialectic of reason and human action inherent in Weiss’s drama’ [2013, 61]),²³ there is a constant tension between the verbal, rational discussions of psychiatric treatment, and the realities of violent repression enacted by the guards and nuns who police the space. Weiss’s Charenton, therefore, is itself a palimpsest of ‘Enlightenment’ and ‘repressive’ values, a spatial reflection of the observation at the end of the song ‘Fifteen Glorious Years’:

All men want to be free
If they don’t
never mind
we’ll abolish all mankind (105).

In order to dig deeper into some of these questions, we turn now to a more detailed account of the use of space in *Marat/Sade*, following a brief digression on the history of the term ‘asylum,’ and its significance within Lefebvre’s spatial scheme.

The ‘asylum’ – perceptions, conceptions, experiences

Lefebvre describes ‘representations of space’ as ‘the space of scientists, planners, urbanists, technocratic subdividers and social engineers [...] who identify what is lived and what is perceived with what is conceived’ (1991, 38). Following this, Esquirol’s account of Charenton, the map to which he refers, and the notion that the built environment can be used as a treatment in and of itself, can be seen as representations of space, tending, in Lefebvre’s scheme,

²³ The question of the body in *Marat/Sade* has attracted much comment over the years. The fourth chapter of this thesis will address the ways in which madness is embodied in *Marat/Sade*, with particular reference to the problems of a strict mind/body dualism for conceptions of madness.

towards 'a system of verbal (and therefore intellectually worked out) signs' (1991, 39). In tending towards the verbal, intellectual (and visible), these conceptions also tend to abstract or erase the physical and the embodied, to dominate and obfuscate both 'spatial practice' (the 'competences' and 'performances' necessary to engage with a space (33)) and 'representational space' ('space as directly *lived*' (39)).

Looking at how Charenton appears in the three productions of *Marat/Sade* under discussion, we can see how these latter elements of space make their reappearance. Under the auspices of the 'moral treatment' movement, the asylum is conceived as a tranquil place in which the spatial practices of the inmates and staff coincide to provide the optimal re-integration of the alienated individual with both nature and society. However, as Edginton notes, although the asylum initially 'signified sanity,' 'the voice of insanity changed the definition of its signifier: the asylum' (1994, 383). This is an, admittedly cryptic, reference to the origin of the term asylum itself. Esquirol, in his determination to improve the lot of those considered insane, recognised the negative symbolic status of institutions for the containment of mental illness. In order to prevent fear in the minds of prospective patients, he suggested a change in terminology: 'I would like us to give these facilities a specific name which does not bring to mind a painful image; I propose we name them asylums' (quoted in Coldefy and Curtis 2010, 2119). One only needs to look at Thorpe Park's 'Fright Night' attraction 'Asylum' to see that the term's primary referent is now, if not painful, at least negative - a controversial internet advertising popup in 2012 proclaimed 'chaos reigns in the Asylum as some of the most disturbed and dangerous patients roam the building, lurking in hidden corners and tormenting anything in their way' (Thorpe Park, 2012).

The change from Esquirol's hopes for the 'painless' term 'asylum' to the current associations suggested by the Thorpe Park attraction speaks of the changes in the spatial practices of, and in relation to, the asylum. The realities of 'production and reproduction' within which discussions of mental illness occur interact with idealised representations of the asylum by writers including Esquirol, and so change its social meaning, rendering its dominant symbolism, its representational space, one of oppression. Lefebvre's spatial triad helps us to tease out some of the conflicts and contradictions relating to asylum spaces – in the same physical space, representational spaces may contain symbolic meanings opposite to those of the spaces of representation, as a result of the spatial practices occurring in and around them. In addition, the 'associated images and symbols' which make up the representational space of the asylum are not stable – the symbolic 'overlay' is different for the staff, the inmates, and the public who live at various distances from it, and encounter various spaces of representation and spatial practices which affect their passive reception of the asylum's representational space. Keeping these shifting

meanings in mind becomes even more important when we move from a discussion of the historical contexts appropriated by Weiss towards a discussion of the play itself.

Charenton in Weiss's *Marat/Sade*

A number of potential functions have been suggested for the asylum setting of Weiss's play (for now I remain on the surface of the English text, in its representations of space, before diving into the 'enspaced' world of the actual productions). For Michel Beaujour, writing in 1965, the primary function of the Charenton setting is to play 'with a situation which has always haunted our poetic imagination – the poet as madman' (115). Beaujour argues that by reducing the debate between Sade and Marat to a banal sparring match, but surrounding it with the architectural trappings and embodied presence of madness, Weiss aims at 'shaking, indeed shattering, [the] general tolerance which constitutes the ideological conformity of our intelligentsia' (116).²⁴ John J. White proposes a dual interpretation of the asylum/bathhouse setting. The first sense is negative, as a result of the 'modern euphemisms for mass slaughter [which are] linked with metaphors of cleansing,' so that the bathhouse echoes the 'blood-bath' of the Terror. The second is more positive 'linked with the ideas of purification.' For White, the asylum allows Weiss to address the question of 'therapy or, if therapy fails, bloodbaths' (1968, 445-446).

The asylum setting is also important for the metatheatrical possibilities it affords. The doubling of patient and historical figure in one 'actor' enables the roles to comment on each other. Thus 'played by a paranoiac, [Marat] is dramatised as a paranoiac' (Cohn 1967, 480) – the question of historical primacy is raised as to whether Marat's paranoia was justified by his murder, or whether Corday's decision to murder him was based on his own (paranoia induced) violent actions. Similarly, the juxtaposition between Corday's central role in the play's action, and the 'sleeping sickness' and 'melancholia' suffered by the actor playing her can be read as an ironic comment on the reactionary nature of the kind of bourgeois sentimentality Corday represents, a comment emphasised by the words of her initial song:

Once both of us saw the world must go
and change as we read in great Rousseau
[...]

²⁴ This reading is a far more generous account than that of Robert Robinson, who, in a discussion of Brook's production in *The Listener* suggested that 'the play, and by that I mean the words, and the actions, was [...] incredibly turgid, incredibly undramatic' (Metcalf et al. 1964).

The very same words we both have said
to give our ideals wings to spread
but my way was true
while for you
the highway led over mountains of dead

Once both of us spoke in a single tongue
of brotherly love we sweetly sung
but love meant one thing to you I see
and something quite different to me (23).

Corday believes herself to be acting according to her convictions in search of a better world, but the illnesses of the patient who plays her means the audience is left with a picture of someone 'cutting down the agent of mass murder and yet helpless against (and oblivious to) the tide of capitalism and militarism that follows' (Beggs 2013: 70).²⁵

Weiss himself saw the Charenton setting, paradoxically, as one of theatrical freedom: 'in a surrounding like that it is possible to say almost everything; in the surrounding of insane people, you have absolute freedom' (Alvarez 1965, 19). Simultaneously, however, he recognised the 'unfreedom' of the patients, who are 'very much like ordinary people in life; they live in this madhouse and they want to express something and they have great difficulties in expressing it; they have no freedom at all' (Alvarez 1965, 19). Juxtaposing these statements, John McKenzie sees the latter as a 'qualification' of the former (1985, 310). However, given the dual character of asylum space discussed above, the interaction between a desire to move away from the 'painful' associations of previous 'psychiatric' practice and the inability to shed the negative cultural valence of unreason, it seems more profitable to read Weiss as fully embracing *both* the potential freedoms *and* the material limitations of the space – in short, of being aware of the *productive* potential of the interactions between contradictory perceptions, conceptions and lived experiences of space.

²⁵ There is also the troubling question of the gender politics implicit in Weiss's decision to render his central female character, a historically decisive and active figure, as a passive, helpless tool of Sade's dramatic action. While the symptoms exhibited by 'Duperret' impel him towards action (and tacitly absolve him of his repeated sexual assaults of Corday), and 'Marat' is discursive match for Sade, speaking in the historical Marat's own words, Corday possesses no self-determination – in Brook's production, 'Marat' himself has to grab her hand to strike her killing blow against him. The question of the historical association between femininity and certain forms of madness will be treated more fully in the second chapter of this thesis.

The experiences of time in Weiss's asylum

The interactions and contradictions explored above also problematise the notion of time in the play. In a semiotic analysis of three major productions (the West and East German premières, in addition to Brook's production) Darko Suvin identifies 'three spatio-temporal levels' in the play, as follows:

1. Paris on July 13, 1793, the day of Marat's assassination as shown in the Sade play;
2. Charenton on July 13, 1808, the day when the inmates perform Sade's play;
3. The first-night date in West Germany 1964, or whenever the Herald addresses his comment to the actual theatre audience of any performance of (some variant of) Weiss's play (1988, 396).

However, despite the obvious importance of these distinctions for the quasi-Brechtian metatheatricality achieved by the production, other spatial considerations upset the temporal distinctions, to provide a curiously 'atemporal' temporality – as Beaujour notes 'it is a play without suspense [...] everything has already happened, and we know it. We attend a rite [...]. It has very much the quality of the Mass' (1965, 114). The action is hermetically sealed in Charenton, in the early days of Bonapartism, during which the ideas discussed have become (for the moment) inert. If, as Beggs argues, the urge to revisit the play in education and performance is so strong due to 'its structure of irresolvable inquiry [...] an assertion that the practice of philosophy is theatrical and that the theatre is, itself, the practice of philosophy' (2013, 60), then the theatrical philosophy succeeds only in endlessly retreading the same descriptions of the world. It never reaches the point, exhorted in the Marxist aphorism, of changing it.

This is largely due to the play's structure. Constructed of self-contained scenes, the play forms a series of returns. Corday, in her somnambulant state, returns three times to Marat's door. Marat and Sade retread their philosophical debate. The patients, according to Weiss's stage direction '*make habitual movements, turn in circles, hop, mutter to themselves, wail, scream and so on*' (11) – returning both to their own behaviours and to a bestial conception of madness which, as Scull points out in his essay 'Moral Treatment Reconsidered' 'the nineteenth century reformers [including Pinel and Tuke...] were in the process of abandoning' (1989, 88). If the function of some of these repetitions is to 'impress [...] upon us the impersonal relentlessness of the drive to murder' (Cohn 1967, 483), this relentlessness does not increase the dramatic tension of the play, but rather emphasises the repetitious cycles of mass killing, which thread from the Terror, to the Napoleonic Wars, to the Russian Civil War, to the Holocaust, Stalin's Purges, and beyond. Weiss's audience, whatever the performance date, is locked into the cyclical time of the play,

within which Charenton is produced over and over again, an asylum in which the complete freedom of theatrical excess is near-meaningless in the context of the unfreedom of the asylum itself.

Marat/Sade's spaces as an index of social attitudes

Having explored the historical spaces of Charenton, the symbolic resonances of the term 'asylum' and some of the broad questions relating to Weiss's use of the asylum setting, we can now move on to examine how *Marat/Sade* has been placed in space by its directors. The examples chosen for this comparative study span a period of 47 years, and all took place in the major theatres of their day, for either the Royal Shakespeare Company or the National Theatre: Peter Brook's 1964 production for the RSC at the Aldwych, Jeremy Sams' 1997 production at the National Theatre, and Anthony Neilson's 2011 production, again for the RSC but this time at the Royal Shakespeare Theatre in Stratford.²⁶

In order to explore the approach to Charenton in these different productions, we need to take into account not just the representations of space constituted by the script, but also how each director uses space. In an attempt to access these approaches to space, in the case of productions I have been unable to see myself, I have drawn on the available archive materials – largely prompt scripts, archive video recordings and production files. As noted in the introduction, archival material provides an approximation at best of the experience of live performance, but it does provide an (albeit partial) insight into the decision making process. Although the 1968 film shared the same cast as the stage version, I have not directly referred to it, since the experience of

²⁶ The confusing topography of places and meanings which plays out within *Marat/Sade* echoes a similar confusion of meanings and spaces which can be observed with relation to the subsidised theatre movement to which the play is tied. While the history of psychiatric institutions can be seen as a movement from specific, devoted spaces, towards a more 'deinstitutionalised' model, in which mental illness is no longer as directly associated with a particular space in any given local area, the history of the subsidised theatre is in many ways a mirror image. The Royal Shakespeare Company only arose as a permanent fixture around 80 years after the construction of the Shakespeare Memorial Theatre in Stratford. Its London productions, including *Marat/Sade*, took place in the Aldwych theatre, although this was initially only going to be for a three year period. For Michael Billington, the attacks on Brook and Peter Hall, accusing them of producing 'dirty plays' (including *Marat/Sade*) 'revealed the continuing opposition to the RSC's presence in London' (2007, 170) - an opposition from the establishment which now seems unthinkable. The National Theatre Company was founded before there was a purpose built institution to house it, and was resident at the Old Vic between 1963 and the opening of the National Theatre building on the South Bank in 1976. Over the second half of the twentieth century, both these major subsidised companies have become more and more associated with their institutional spaces – the term 'National Theatre' collapses the company into the building, while the whole city of Stratford has become a theatrical metonym for the RSC. As mental illness has emerged from the asylum, the subsidised theatre has put down deeper roots.

watching a film is very different to that of creating a narrative of a performance from archive materials.

Peter Brook's counterculture influences

The counter-culture of the 1960s provided fertile ground for the emergence of those attitudes which have been labeled 'anti-psychiatric.' Nick Crossley (1998) in particular argues that this counter-culture influenced the sustained critique of psychiatry (by lay authors and disgruntled former psychiatrists alike) during this period, in combination with a shift in left wing politics and the failure of an attempted critique from within the psychiatric establishment. It is alongside the emerging counter-culture that the key texts of antipsychiatry were published. R. D. Laing's *The Divided Self* (1990) a critique of psychiatric orthodoxy (though, as Crossley notes, one from within rather than without), appeared in 1960, Erving Goffman's *Asylums*, discussed above, in 1961, and Ken Kesey's novel *One Flew Over the Cuckoo's Nest* in 1962. It is clear from his plays that Brook was influenced by the emerging currents in counter-culture (although, as his biographer Michael Kustow (2005, 60) notes, not directly part of it). Following *Marat/Sade*, Brook oversaw the creation of a collaborative production, *US* (1966), a play which condemned the Vietnam war, including a speech which transplanted the horrors of that war to the English landscape and, according to Michael Billington 'achieved through language what Sarah Kane's *Blasted*, thirty years later, attempted through visceral imagery' (2007, 172).

The background of the counter-culture, and particularly the rumbles of discontent surrounding the treatment of those labeled 'mad', contributed to a social milieu within which the asylum had taken on a new set of meanings, not just of fear, but (for example in Kesey's novel) as a metonym for illegitimate uses of institutional power more generally. Within this context, Peter Brook's *Marat/Sade* can be read as drawing on characteristically anti-psychiatric ideas. The production remains self-consciously in a nineteenth century space, its set, as Herbert Kretzmer (1964) put it for the *Daily Express*, 'got up to look like the corner of a vast, high-ceilinged asylum room' – drawing on the cultural notions of asylum space outlined above. Brook's comment that 'the play is about madness as it was in 1808 – before drugs, before treatment, when a different social attitude to the insane made them behave differently' (1972, 113) draws further attention to the historical shifts taking place at the time.

The attitudes Brook refers to were not as far in the past as his comment implies, however – before the 1959 Mental Health Act, 'promiscuity and immorality' could be the sole reason for compulsory detention, and suicide only ceased to be a crime in 1961, the same year Health Minister Enoch Powell gave the 'water towers' speech cited above, with its recognition that the

asylums 'express the notions of their day' (quoted in Shiri et al. 1997, 71). However, both Brook's comments and those of Powell demonstrate the growing cultural awareness of the complex interactions between space, social attitudes, and the manifestations of madness. In addition, it is also clear that asylums still existed as a conceptually centralised locus of madness in the 1960s. Indeed, the asylum has a greater significance at the historical moment of Brook's production, precisely because of the ongoing critique of the practice of confinement by Laing, Goffman, Szasz and Foucault, among others.

Anti-psychiatry in the text

The concern with broadly 'anti-psychiatric' themes in Brook's production is in part a result of broader social concerns with questions of social control, which are evident both in Weiss's text and in the emerging counterculture. For Laing, psychiatric treatment is not inherently coercive. However, he does suggest that the psychiatric and psychoanalytic theories current at the time of writing *The Divided Self* could contribute to the depersonalisation of the individual patient. Laing sees depersonalisation as 'a technique that is universally used as a means of dealing with the other who is too tiresome or disturbing' (1990, 46). He locates specific examples of this tendency towards depersonalisation in the language of ego, id, superego and unconscious, lamenting 'how can one demonstrate the general human relevance and significance of the patient's condition if the words one has to use are specifically designed to isolate and circumscribe the meaning of the patient's life to a particular clinical entity?' (18).

In the 1964 preface to *The Divided Self*, Laing draws attention to this problem in relation to 'normality' – 'I would wish to emphasise that our 'normal' 'adjusted' state is too often the abdication of ecstasy, the betrayal of our true potentialities, that many of us are only too successful in acquiring a false self to adapt to false realities' (12). In Laing's developing thought, normality has become a byword for the repression of the self – a self-reflexive and self-fulfilling denial of one's own desires in response to the constant experience of surveillance.

A conviction that normality is tacitly policed through violence and repression appears in Brook's production as the 'barely suppressed violence' noted by Bamber Gascoigne (1964). That the critique is not limited to psychiatric treatment is revealed as this violence is reflected back on the audience through a metonymic connection between the asylum and the world, emphasised by Weiss in conversation with Al Alvarez:

[The characters in the play] are very much like ordinary people in life; they live in this madhouse and they have great difficulties expressing it; they have no freedom

at all, they can't say what they want and, if they say it, it would be misunderstood or the ruling people will say they're only madmen (1965, 3).

This conception of society is also present in Laing's later writings – 'we are potentially men, but are in an alienated state, and this state is not simply a natural system. Alienation [...] is achieved only by outrageous violence perpetrated by human beings on human beings' (1967, 12).

It is important to note, however, that these connections to antipsychiatric discourse come into sharper relief in retrospect, when we follow the 'regressive-progressive' approach suggested by Lefebvre, and recognise the ways in which 'the production of space [...] acts retroactively on the past, disclosing aspects and moments of it hitherto uncomprehended' (1991, 65). The value of the asylum space to antipsychiatric discourse is one of these aspects. Following the history of mental illness in reverse, we can see the early 1960s as a turning point in attitudes, fundamental to the directions approaches to treatment have taken since. However, reviews at the time did not draw much attention to the stage space, other than to note that it was an asylum. Contemporary reviewers writing in the wake of the Cuban Missile Crisis of 1962 understandably focused on how the debate between Marat and Sade echoed the international confrontation between capitalist individualism and Stalinist Communism. Indeed, in a forum about the play at the Off-Broadway St Mark's Playhouse in 1966, Norman Podhoretz, the editor of *Commentary*, stated 'I don't see [...] a dialogue between sanity and madness. I don't take the madness of the play that seriously. The play is largely about politics [...] about] whether or not you believe in this kind of terror based on ideology' (Brook et al. 1966, 222-223).

Anti-psychiatry and individuality

It is this confrontation between the idea of a revolution centered on the individual and one centered on the collective which both organises Brook's use of space and shapes its effect on the audience. This opposition is emphasised through a number of spatial distinctions between individuals and groups within the stage space. Some elements of this structure are inherent in the play text, but Brook's approach (by contrast to Sams's especially) emphasises these interactions through the continual juxtaposition of fluidity and stasis. De Sade is a figure of fluidity and self-determination, moving both around the stage and between metatheatrical levels with ease. This is counterpointed by Marat's position, confined to his bath as a result of his skin disease. Coulmier is also confined, static and ineffectual, to his position in the 'audience box' on the stage, in which he sits with his family, while the sisters and male nurses (in butcher's aprons) are able to move around the stage, the mobile extension of his symbolic power.

It is in relation to the audience that Brook's spatial approach to the individual/collective opposition rejoins the discourses of antipsychiatry. In Laing's developing thought, the family, far from being the source of sanity (as in Tuke's thought, referred to above), begins to be seen rather as the source of *insanity* (Laing and Esterson 1990). In what Laing calls the 'schizogenic family,' the family collective creates strategies and interactions which act to the detriment of the individual. As a result, for Laing, the project of refiguring psychiatry is partly one of championing the good of the individual over the survival of the collective.

This is not quite the position of Sade, who seeks a 'personal annihilation' rather than a more conventional notion of the 'good,' but it is certainly closer to this than the position of Marat, whose notion of revolution requires that 'the half-hearted and the fellow travelers/[...] be dropped' (65). Spatially, the audience is figured as the static recipient of the play, a group of individuals rather than a collective. Indeed, this group of individuals is partly cast by Brook as a group of patients, receiving 'treatment' akin to that prescribed to the patients in the bathhouse. As Brook says, in his introduction to the published text, the stagecraft is designed to 'crack the spectator on the jaw, then douse him with ice-cold water, then force him to assess intelligently what has happened to him, then give him a kick in the balls, then bring him back to his senses again' (Brook in Weiss 1982, 6).

The most clear-cut moment at which Brook's use of space reflects both antipsychiatric and directly political oppositions between the individual and collective is when, at the end, the inmates drown out the applause of the audience with a slow clap of their own. At this point, not only does the theatre space suddenly flip around the Aldwych's traditional proscenium arch, placing the audience 'on stage,' watched, judged and found wanting by the very people they have recently been judging themselves, but the inscribed space of the asylum is split open.

Throughout the play, the conceptually closed asylum space has been threatened, but never fully breached, by the actions of both Sade and the inmates. At the very end of the play, this sense of discipline and safety (both for and from the patients) ruptures, forcing the audience into a new and closer relationship with the stage – the theatre, momentarily, becomes the asylum not only through the process of temporal enclosure facilitated by the text itself, but also through the deliberate undermining of dramatic convention. The audience is forced to recognise the power-imbalance created by their position as spectators, their complicity with the dehumanising psychiatric processes they have observed – if they held comfortable dualistic assumptions about space, madness, and the theatre when they entered, these assumptions cannot stand afterwards. Although this moment of arises from and through space, it gains its specific force from the

historical context in which it took place – a milieu in which the nation’s conscience had already been pricked regarding the conditions in asylums.

Jeremy Sams: space and history in the round

Discussing the intersections between space and time (geography and history), Edward Soja re-imagines a famous comment of Marx: ‘we make our own history and geography, [...] under circumstances directly encountered, given and transmitted from the historical geographies produced in the past’ (1989, 129). This historico-geographical matrix of production ensures that the spatial echoes of Brook’s *Marat/Sade* inform, consciously or not, the staging of subsequent productions.

By contrast to the characterisation of Brook’s production as era-defining, Jeremy Sams’ 1997 National Theatre production, presented with Brecht’s *Caucasian Chalk Circle* as part of an ‘in the round’ season, opened to mixed notices, the occasional piece of high praise being generally drowned out by accusations of mediocrity. As Robert Robinson’s comment, cited above, which saw ‘the words [...] incredibly undramatic’ (Metcalf et al. 1964) suggests, even in the 1960s there was a critical suspicion that it was Brook’s direction, rather than the play itself, that gave that production its power. Despite these reservations, however, Sams’s production deserves consideration for its treatment of the *space* of Charenton, as well as for the clearer index of shifting attitudes towards the asylum, and madness in general offered by the similarity of its aesthetic to that found in Brook’s production.

During the ‘in the round’ season, the Olivier theatre was turned into ‘a virtually new auditorium’ (Ramsden 1997) by the building of a central stage over the front stalls and grandstand seating over the original stage. Sams embraced the possibilities afforded by this new environment, converting the space into ‘an operating theatre crossed with a debating chamber’ (Grant 1997, 27). The auditorium becomes a public space in which the audience can experience the force, both entertaining and broadly political, of an encounter with ‘madness.’ In the programme, Sams provides contextual material referring to the guided visits of the Bethlem Royal Hospital available in London, and the historical fact that plays were indeed performed by the patients in Charenton. The inclusion of this material serves to place the National Theatre production within the same historical genealogy as these events.

Indeed, Sams aimed to provide an almost naturalistic experience analogous to those historical productions of de Sade’s, capturing the ‘huge cast and audience in an all-embracing environment’ (Ramsden 1997). Visually, the production largely achieves this historicised vision

– the actors enter to a fanfare, doffing their hats to the audience in a manner which, if not strictly accurate to the period in question, at least very much suggests another time. Similarly, the costumes, with their drab whites and shapeless cuts, show a remarkable attention to detail – the production records at the National Theatre archive (National Theatre Costume Department 1997) preserve the extensive reference materials provided for the costume designers. The desire to maintain historical detail is signaled most powerfully by the image of Corin Redgrave's Marat, costumed, lit, and often posed to recall the famous painting *The Death of Marat* by Jacques-Louis David – an image also used in the promotional material.

Despite the clear commitment to historical research and detail, the production is still bound to the present. Changing conceptions of the asylum alter the spatial practices relating to asylums, and so affect and are affected by any process of research and representation. The representational spaces of asylums in the nineteenth century, the passive space of 'inhabitants' and 'users,' as Lefebvre (1991) puts it, are largely out of our grasp, leaving only 'technocratic' documents such as those written by Esquirol and other medical authors. However, these historical documents, already shaped by their author's assumptions about mental illness, are re-imagined as a result of the historical processes which have produced the spaces (both psychiatric and social) which exist in the present. The interrelationships between the three elements of the spatial triad ensure that changes in spatial practice and representational spaces will impact on the spaces of representation used by Sams as a guide for his production, as in the 'regressive-progressive' mode of historical research discussed by Lefebvre.

The risk of this approach, as Lefebvre notes, is of 'the regressive phase telescoping into the progressive one, so interrupting or obscuring it' (1991, 66), one result of which being the emergence of anachronistic elements in even a consummately researched piece of avowedly 'historical' theatre. It is by paying close attention to these moments of anachronism, this detritus left by changing perspectives on mental illness and confinement, that we can begin to untangle the relationship between space, history and representation which has influenced contemporary approaches to 'madness' in both medicine and theatre.

Twentieth century psychiatry in a nineteenth century space

Anachronistic elements can be clearly identified early in the production, as the patient playing Charlotte Corday is introduced as suffering, not from 'sleeping sickness' as in the translation used by Peter Brook, but 'narcolepsy' (Weiss and Sams 1997). Although this alteration does not affect the meter of Adrian Mitchell's verse adaptation, it does mark a point at which the pressure of making the play intelligible to a late-twentieth century audience takes precedence over

historical accuracy – Coulmier, or any other denizen of Paris in 1808 would have had no idea of the meaning of the term ‘narcolepsy’ (or even *narcolepsie*), as the condition was first described in 1880 (see Todman 2007).

The practice of replacing historically accurate medical terms with those in use at the time of the production is continued in a couplet introducing the orchestra, which is added after the introduction of the chorus: ‘our orchestra the cream of their profession/but liable to clinical depression’ (Weiss and Sams 1997). Although ‘depression’ has existed as a metaphor for low spirits in English since the eighteenth century, the Oxford English Dictionary has no record of it as a specifically psychological term until 1905, and even then it is only as a symptom of the more period-correct condition of ‘melancholia.’ In addition, the epithet ‘clinical’ is a far more recent addition to the language of mental health, part of an attempt to differentiate between ‘depression’ as a medical condition, and ‘depressed’ as a synonym for non-pathological sadness.

Although these issues of terminology are not specifically to do with space, they do have an important bearing on the spatiality of asylums as related to Lefebvre’s triad, since the changing terminology also implies a developing medical understanding of ‘Madness’ and a trajectory of treatment away from the ‘moral’ approach taken in Charenton towards the psychopharmacological orthodoxy of today. If, as discussed above, asylums are architectural artifacts of a specific approach to mental illness, then the changing language of mental illness implies a changing physical space in which that approach is taken – specifically from ‘total institutions’ such as those discussed by Goffman and Foucault, and represented by Charenton, towards ‘psychiatric wards’ and ‘acute care facilities’ whose function is merely to deal with crises, with the aim of a speedy release of the patient back into a system of community care. As a result, the production’s use of twentieth century clinical language opens up a conceptual gap between the physical space of the set (based on a nineteenth century conception of ‘madness’), and the space as it is perceived and lived by the actors and the audience.

Community care and Sams’s repressive asylum

This gap is emphasised by the conclusion of Sams’s production. The two RSC productions come to a climax, with the triumph of the inmates through metatheatrical shifts (Brook) or the dramatic conversion of Coulmier into sex-crazed ‘deviant’ (Neilson). The National Theatre production, by contrast, ends with the escalation of power by Coulmier and the guards, the killing of Roux, and the apparent complete victory of ‘institution’ over inmates. In its afterlife, the concept of the asylum has lost the powerful and contradictory sets of meanings it possesses

for Brook, and become a metonym for total power, with no scope for tactical action by the patient-inmates.

At the end of the play, Roux's line 'when will you learn to see/when will you ever understand' (109) is, in Sams's production, in response to his frustration with the compliance of his fellow inmates who obediently, possibly eternally, march in a set path which even resembles the symbol for infinity. However, their passivity is shown to be as much about self-preservation as antipathy: Roux's outburst results in an escalation of violence as his attempts to hide among the other inmates draws others into the path of the guards' batons, before he is beaten to death himself. While for Brook, at the moment when demands for deinstitutionalisation were becoming a widespread political force, the patient-inmates could harness in 'madness' the power to challenge the structures within which they were situated, for Sams, when the asylum had ceased to be a 'real' space, this power is stunted.

To quell the riot precipitated by Roux's actions, the guards use bayonet-fitted rifles, to force the inmates back into the centre of the stage, trapping them in a cage which falls from the flies. The final image in Sams's production, then, is not the sinister 'slow clap' of Brook's, or the anarchic riot of Neilson's, but the inmates 'cling[ing] to cage and mak[ing] noises. Guards and Sade circle stage, Sade laughing' (Weiss and Sams 1997) as the lights go down. With the advent of community care and the death of the asylum as a physical space, Sams's production suggests that the symbolism of the asylum has become more totalising, less flexible and more authoritarian.

A potential reason for this is the changing debate over the questions of deinstitutionalisation, following the killing of Jonathan Zito in 1992. Christopher Clunis, who had been released from Guy's Hospital only two months earlier, stabbed Zito in the eye at Finsbury Park tube station. Clunis had a history of schizophrenia, and Zito's widow Jayne (herself a mental health worker) drew a direct link between her husband's death and the mismanagement of the 'Care in the Community' programme:²⁷

Government policy for community care has failed in the extreme. They are closing down large institutions but not providing the resources for after care. There are clients who need long-term supervision to ensure that they are taking their medication and to ensure that they are safe - Mr. Clunis was one and I want a

²⁷ But see Neal (1998) for a discussion of the representations of gender and race in the media coverage of this story.

public inquiry into why he was not given the provision of after care that he should have received (Donegan 1993).

Jayne Zito set up the Zito Trust, which lobbied for increased powers over mental health service users in the community, in order to protect the public. This renewed concern with the potential violence of people with mental health diagnoses was reflected in the extensive news coverage of the case, and other similar cases, with a report from the Royal College of Psychiatrists warning of the limitations of community care making headlines in April 1997, just weeks before Sams's production opened.

Although it is not likely that Sams had the Zito murder specifically in mind when he made his directorial decisions, the increased public awareness of the debate around community care (and a renewed media-led concern about the potential connection between mental illness and violent conduct) provides an additional symbolic resonance to the asylum. The extreme violence with which the rioting patients was met occupies an unstable position between wish-fulfillment on the part of those advocating for much stricter legislation, and a reminder of some of the reasons deinstitutionalisation had been advocated in the first place.

In this context, the contradiction between a supposedly enlightened contemporary discourse which focuses on medical categories such as 'clinical depression,' and the 'old' repressive approach of the asylum becomes muddled – the apparent humanistic certainties of the 1960s have been replaced by a sense of fear. At the same time, the implicit connection between the world of the asylum and the 'real' world of the audience sounds a Foucaultian note – with the move away from institutional spaces and towards community care, the technologies of surveillance which once characterised the prison and the clinic have now expanded to act upon society as a whole.

Anthony Neilson: the heterotopic asylum

The seemingly straightforward image of the 'total asylum' presented in Sams's production is radically complicated by Neilson's 2011 revival for the RSC. By 2011, although the asylum remained a figure, or context, for psychiatric detention, this image had become severed from its geographical specificity, losing even the echoes of the 'real' asylums present in, for example, Sams's production, and replaced either by haunted house clichés or spatial aesthetics which owe far more to the contemporary psychiatric treatment facility than the medico-architectural philosophies of the nineteenth century. In response to these shifting conceptions of psychiatric

space, Neilson's updated *Marat/Sade* finds a resonant conceptual space outside the 'traditional' asylum.

This resonant space emerges, not simply from the interaction between the perceived, conceived and lived, as in Lefebvre's scheme, but from the shared resonances which exist between different kinds of sites. In order to get some kind of purchase on what is at stake in this spatial shift, I turn to Michel Foucault's conception of the 'heterotopia': 'something like counter-sites, a kind of effectively enacted utopia in which [...] all the other real sites that can be found within the culture, are simultaneously represented, contested, and inverted' (1986, 24). This broad definition of 'heterotopia' demonstrates a concern with the *interactions* between different cultural spaces, and suggests that certain sites are able to bring these interactions into sharper focus. For our discussion, it is pertinent that Foucault uses both psychiatric hospitals and theatres as examples of heterotopic spaces, and notes that heterotopias are 'capable of juxtaposing in a single real space several spaces, several sites that are in themselves incompatible' (25).

The concept has come in for criticism: Edward Soja has described Foucault's formulation as 'frustratingly incomplete, inconsistent, incoherent' (1996, 162) while ideas about space can themselves be seen as the unexamined basis of much of Foucault's own work relating to psychiatry, the penal system, and sexuality, as he acknowledges himself: 'the problems you put to me about geography are crucial ones for me [...]. Where geography itself was concerned, I either left the question hanging or established a series of arbitrary connections' (1980, 77). However, it is precisely the fluidity of Foucault's approach to heterotopias which renders the concept useful for approaching the complex spatial interactions at issue here, so long as caveats about its rigour are observed – we cannot make final, definitive statements about these spaces, for the simple reason that the power relationships which are constantly enacted, distorted, challenged, and re-enacted within them are not stable.

The theatrical space of Neilson's 'Charenton' displays a spatial sensibility which resonates with Foucault's interest in the juxtaposition between spaces.²⁸ The stage-space created in Neilson's production is not fixed, with different markers all implying different kinds of spaces. At the back of the stage, a row of turnstiles, functioning as entrances and exits, suggests a prison or young

²⁸ Neilson's work, both as a director and a playwright, displays an abiding concern with the relationship of mental illness to space. In his play *The Wonderful World of Dissocia*, the shift from the Lewis Carroll-esque 'Dissocia' of Lisa's psychotic experience to the banality of a modern psychiatric ward evokes questions of how the experience of psychosis alters the experience of space.

offender's institute. The costumes, white 'Charenton'-branded tracksuits, sit somewhere the 'white hospital uniforms' (10) suggested in Weiss's stage directions and historical paintings of asylums, and the uniforms associated with various modern day institutions (especially Guantanamo Bay).

These basic costumes are counterpointed by the various costume changes undergone by the characters in the play-within-a-play – Imogen Doel as Corday appears variously in dark, military-style clothing and an 'I love Paris' t-shirt with white headscarf. These costumes, along with Arsher Ali playing Marat as a 'laptop revolutionary' (Billington 2011) were, in 2011, clear references to the 'Arab Spring' protests which had dominated the news during that summer. As a result, rather than offering a play clearly located in an asylum (the play's language ensures the audience are unlikely to forget the notional setting in 1808 Paris), Neilson draws attention to the ways heterotopic sites can resonate beyond themselves. The asylum space in this production is treated more knowingly than it is in Sams's production, and makes explicit the contemporary political resonances of confinement and psycho-political repression.

Spaces of conflict: fluid institutional spaces, fluid theatre spaces

In keeping with this heterotopic space, and the general loosening of the association between mental health service-users and institutional space, comes an increased fluidity of the boundary between the spaces of madness set up in the production and the space inhabited by the audience. The new Royal Shakespeare Theatre is architectural evidence that this is partly due to evolving theatrical fashion, as the thrust stage with its walkways through the stalls reflects RSC director Michael Boyd's desire to 'move away from the 19th Century [sic] proscenium "picture frame" to a theatre which celebrates interaction' (quoted in Lethby 2010, 46). Neilson uses this more flexible space to the full, with curved ladders enabling actors to deliver their lines from directly above audience members in the stalls. In Sams's production, the asylum is a fully contained space, only making reference metonymically to the contemporary 'outside world,' while in Brook's production the reference to the 'outside' was effected largely through the final image of the inmates applauding the audience. In Neilson's production, however, there is a constant juxtaposition between the apparently incompatible spaces of asylum, contemporary young offenders' institution and Guantanamo bay, while even the distinction between on and off stage is challenged.

In part, this more fluid performance space emerges from the more complex dynamics in the interaction between coercion and care which typifies contemporary mental health discourse. The 2007 Mental Health Act, which allowed doctors to mandate certain service users to take

medication, provided a victory for the Zito Trust, which promptly disbanded, citing the Act as the culmination of its efforts. It also, however, complicated the distinction between ‘asylum’ and ‘outside’ – the legal powers which can deprive an individual of freedom based on an assessment of their mental state now also extend beyond the walls of the psychiatric unit and secure hospital. These added complexities are reflected in Neilson’s production, as the physical restraints of straitjackets and clubs, still present in Sams’s historical setting, are replaced by Coulmier’s ability to curtail the activity of the patients via his smartphone – an admittedly far-fetched attempt to capture the more diffused functioning of power in contemporary society.

Neilson’s production is less effective than Brook’s, partly because it tries to encompass too many of the possible connections between Weiss’s play and contemporary politics and power relations. Nonetheless, the spatial dynamics, the proximity of the actors to the audience, and the shifting of institutional power away from the application of physical force and towards a self-reinforcing technocratic ‘grid,’ provides one index of changing social conceptions of psychiatric power, especially when compared to the unidirectional representation of power in Sams’s production. This is a psychiatric power based on surveillance, on power exercised from a distance. This is emphasised by Neilson’s transplanting Coulmier’s family from stage left to the balcony. In this way, rather than having to experience the contradictions of physical power in person (which led in Brook’s production to a need to escape into the flies on a ladder) the Coulmiers and their companions are able to watch from an already relatively safe distance, their power acting by proxy over the whole space.

Conclusions

The shifting spaces discussed in this section, along with the historical background to more general thought about asylums, give access to some ways in which the valance of the asylum has shifted on stage. From its earliest historical development, the asylum has possessed a dual nature as a space for genuine interpersonal compassion and brutal treatment, a space of freedom from the world outside and a space demarking a lack of freedom within it. This instability has provided fertile ground especially in the case of *Marat/Sade* – by shifting the emphases within these parameters of freedom/unfreedom, care/cruelty, directors have been able to simultaneously address questions of temporally local politics, and more universal questions about rights and the nature of sanity.

Anne Beggs argues that, in *Marat/Sade*, ‘the bodies become the material for philosophy’ (2013, 79). If we might want to further interrogate the question of embodiment in the play (as we will in section 2 of this thesis which discusses the treatment of ‘mad bodies’ on stage more generally),

we might nevertheless think about extending Beggs's comment – it is not just the bodies which become material for philosophy, but the space itself. As a space produced from the interaction of the perceived, conceived and lived, and a space within which the contradictory meanings of the heterotopia interact and challenge one another, the asylum in *Marat/Sade* provides both an index of and proving ground for cultural conceptions of mental illness. With this in mind, the next chapter will home in on a more politically specific appropriation of the symbolic spaces of confinement: plays which address directly the question of the relation between madness and gender briefly alluded to above.

Chapter 2

The spaces of hysteria:

feminism, postfeminism, and gendered discourses of madness

'Only when [a woman] has disappeared can the curtain go up; she is relegated to repression, to the grave, the asylum, oblivion and silence' (Cixous 1995, 133).

The role of space in feminist thought is (like so much else) a contested one. This is, in part, a result of the relative (conceptual) absence of women from public space until the last century, and the general association of femininity with the private sphere (Darke 1994). Julia Kristeva attributes this association partly to the fact that 'when evoking the name and destiny of women, one thinks more of the *space* generating and forming the human species than of *time*, becoming, or history' (Kristeva 1981, 15). For Kristeva, space stands in opposition to 'historical time,' glossed by Alice Jardine in her introduction to Kristeva's essay as 'linked to the *cogito*, to the paternal function, representation, meaning, denotation, sign, syntax, narration, and so forth' (Jardine 1981, 8). Kristeva complicates the implicit binary of 'feminine' space and 'masculine' time by introducing 'monumental' and 'cyclical' temporalities, which are 'traditionally linked to female subjectivity' (1981, 17). The picture can be further complicated with reference to Lefebvre, whose concentration on the production of space necessarily considers how space comes into being *through time*. Indeed, he argues that 'real knowledge of the production of space [...] may be expected to rediscover *time* [...] in and through space' (1991, 91).

In addition to a link between space and time, the quotation from Helene Cixous which opens this chapter suggests a connection between the theatre and the asylum: for Cixous, the asylum is one of the repressive spaces to which a woman must be relegated in order for theatre (as traditionally conceived) to take place. The historical specificities of theatre space, and of spaces of psychiatric treatment, cannot be separated from the spatio-temporal processes which have preceded and produced them. Therefore, the many ways of 'being woman' within these spaces are also spatio-temporally shaped – there is no radical distinction between 'space' and 'time' such as that characterised (but not endorsed) by Kristeva.

Indeed, Doreen Massey has explicitly related this dichotomised view of 'space' and 'time,' within which 'time' is a paternal becoming while 'space' is maternal stasis, to the binary of 'female/male' (1994, 9-10). Building on this, if, as Chesler argues (1972, 64-70) the 'sanity/madness' binary can also be mapped onto that of gender, then the asylum, as the space of madness, is inherently tied up with notions of femininity. Without taking this to metaphoric extremes and claiming

the emblematic padded cell as a kind of surrogate womb,²⁹ the question of space is clearly central to feminist accounts of madness, precisely because of its association with other cultural binaries.

Massey's notion of the spatial as 'social relations "stretched out"' (1994, 2) also speaks to the materiality of dramatic production within society, and especially to the tactics used by women playwrights in order to produce plays in the first place. The vast majority of the plays discussed in this chapter have been produced either at the Royal Court, or in more marginal contexts, through academic departments or charity activism. These differing contexts have an impact on the spatialities of the plays themselves. Producing plays for the Royal Court, for example, imposes a certain set of expectations on the part of the writer, determined by both cultural and physical space: the Court is known to have a particular centre-left political position, while budget considerations as well as issues of space limit flexibility in terms of set design or the number of actors available.

This chapter will address the ways in which space has been used in feminist representations of madness on stage, and the argument will proceed in three stages. Firstly, there is a brief discussion of some of the theoretical and historical contexts for the feminist engagement with discourses of mental illness. This is followed by a discussion of the ways in which two plays by Sarah Daniels, *Beside Herself* and *Head Rot Holiday*, use space to explore the interactions between social attitudes to gender and mental illness. Having explored the position of madness in relation to the socialist and psychoanalytical feminist discourses of the 1980s and early 1990s, I move on to explore the development in the later 1990s of approaches which have been termed 'postfeminist,' in order to address the different orientations towards both space and mental illness which began to emerge in response to these changing constructions. The plays of Sarah Kane provide the ground for exploring these questions, and tying them in to the broader shifts in theatrical technique which have been discussed by Hans-Thies Lehmann (2006) as 'postdramatic.'

Gender and madness: a brief history

The 'theatricality' of hysteria

The madwoman has long been a central figure in Western literature, from Medea, Jocasta, and the Bacchae,³⁰ through Ophelia and Bertha Mason, to the protagonist(s) of Sarah Kane's *4:48*

²⁹ Although this view would resonate with R. D. Laing's therapeutic community at Kingsley Hall, as dramatised in David Edgar's play *Mary Barnes* (1979).

Psychosis. During the 1970s and 1980s particularly, this centrality was subjected to critical scrutiny by a number of feminist scholars, most notably Sandra Gilbert and Sarah Gubar in *The Madwoman in the Attic* (1979/2000), and Elaine Showalter in *The Female Malady* (1987). Broader studies have also examined ‘the dramatically increasing numbers of [...] women [...] who are seen, or who see themselves, as ‘neurotic’ or ‘psychotic’ (Chesler 1972, xviii) posing the questions ‘Why is it *women* who are mad? Why is it that it has *always* been women?’ (Ussher 1991, 6).

These gendered implications can be seen, in part, in the persistence of the term ‘hysteria’ in psychiatric discourse long after the classical aetiology of the ‘wandering womb’ had been discredited.³¹ Writers including Showalter and Chesler have explored the gender dynamics of early psychoanalytic practice. For Showalter, although Jean-Martin Charcot is credited with demonstrating that both men and women could experience ‘hysteria,’ he simultaneously succeeded in strengthening the connection between hysteria and femininity. In the context of the present discussion, it is key that this process of strengthening appeared precisely as a result of the *theatricality* of Charcot’s work on hysteria:

[T]he representation of female hysteria was a central aspect of Charcot’s work. His hysterical women patients were surrounded by images of female hysteria. In the lecture hall, as Freud noted, was Robert-Fleury’s painting of Pinel freeing the madwomen. On the opposite wall was a famous lithograph of Charcot, holding and lecturing about a swooning and half-undressed young woman before a room of sober and attentive men, yet another representation that seemed to be instructing the hysterical women in her act [...] Charcot’s hospital became an environment in

³⁰ In Attic tragedy Jocasta’s self-blinding and suicide signified grief, and would not have been considered pathological. However, both self-harm and suicide are strongly associated with mental ill health in contemporary culture.

³¹ Aretaeus of Cappadocia (1978), in Chapter IX of his *De causis et signis acutorum morborum*, provides one of the clearest statements of the idea that hysteria was caused by the womb moving around within the female body:

[I]n a word, [the womb] is altogether erratic. It delights [...] in fragrant smells, and advances towards them; and it has an aversion to fetid smells, and flees from them; and, on the whole, the womb is like an animal within an animal.

When, therefore, it is suddenly carried upwards, and remains above for a considerable time, and violently compresses the intestines, the woman experiences a choking, after the form of epilepsy, but without convulsions.

which female hysteria was perpetually presented, represented, and reproduced (Showalter 1987, 148-150).

Alan Read argues that this spectacular element was similarly present in Freud's practice, and this focus places psychoanalysis (albeit unstably) within Foucault's definition of the Clinic (see Read 2001).³²

For Foucault, the Clinic (a term which encompasses both clinical medicine and the teaching hospital) is a form of medicine in which 'a disease must be regarded as an indivisible whole from its beginning to its end [...] there is disease only in the element of the visible and therefore storable [sic]' (1973, 95). In keeping with this concern with visibility, coherence, and repeatability, the female hysterics used in Charcot's Tuesday lectures were literally stage-managed, cued by their surroundings and the cultural constructions of hysteria to provide a specific embodied (and hence visual) response to Charcot's hypnotism. Later, Freud's 'case studies,' especially those of Dora and Anna O, display a similar tendency to 'display' or 'objectify' female patients suffering from hysterical symptoms. This objectification corresponds to the necessity of sight in Foucault's account of the Clinic. Only what appears before the physician 'in its truth' (Foucault 2006b, 339) can be considered to be a true disease-entity. Both Charcot and Freud were engaged in the clinical process of isolating, making visible, and defining the 'disease entity' of (especially female) hysteria through their practice.

These gendered (and staged) notions of madness have made its aetiology, treatment and politics a contested area within feminism. Early writers tended to align themselves against psychoanalysis, and Freud in particular: Kate Millett, for example, refers to psychoanalysis as 'bigotry [having] acquired the cachet of science' (1969, 203). However, the influence of French post-structuralist thought within the humanities has led to a reappraisal of the value of psychoanalysis, and writers including Juliet Mitchell (2000) have used the tools provided by psychoanalysis for more overtly feminist ends.

More recently, the development of feminist ethics has suggested potentially productive lines of thought which emphasise the importance of taking into account both the body of knowledge amassed by psychiatry and psychoanalysis, and the critiques made of this knowledge by both

³² Chapter 4 of this thesis expands on these concerns in a discussion of the position of the body in Anna Furse's play *Augustine (Big Hysteria)*, which attempts to give a voice to one of Charcot's 'hysterical' patients, and which also addresses the question of the relationship between Freud's psychoanalysis and Charcot's approach to hysteria.

feminism and antipsychiatry. This hybrid approach might allow both the subjective experiences of the patient and the (potentially problematic) 'master' knowledge of medical professionals to meet, potentially offering new possibilities for treatment (Martin 2001).

Space, gender, madness, history

Alongside these feminist critiques of psychiatry and hysteria, the figure of the 'madwoman' has continued to appear in the theatre. She has taken her place both in the developing performance histories of canonical texts (notably including *Macbeth* and *The Duchess of Malfi*), and in more contemporary plays by writers including Pam Gems (*Dusa, Fish, Stas, and Vi* [1976]) and Sarah Daniels (*Beside Herself* [1990]). A key development of the 'madwoman' in the late twentieth century is the appearance of plays exploring her role from a specifically feminist perspective. This perspective is a result both of changing understandings of the nature and location of mental illness, and of the continued influence of feminist critiques.

These changes include the rise of psychiatry as a medical science in the first half of the century, the 'anti-psychiatry' movement in the 1960s and, in Britain specifically, the 1980s programme of deinstitutionalisation known as 'Care in the Community.' As discussed in the previous chapter, these shifts have influenced many treatments of mental illness on the British stage, and feminist theatre is no exception. It is no coincidence, for example, that three plays by Sarah Daniels which most explicitly discuss mental illness appear at a time which saw broader debates around community care: *Beside Herself*, a play which involves a 'half-way house' between a psychiatric hospital and the community, premiered in March 1990, just three months before the National Health Service and Community Care Act 1990 was signed into law.

When cultural and legal frameworks change in this way, the boundaries between the various 'spaces' of madness become permeable, and so too do the distinctions between madness and sanity, reason and unreason. Barry Edginton, describing a parallel moment of conceptual transition, the turn of the eighteenth into the nineteenth century, conceptualises William Tuke's York Retreat as follows:

In an era of transformations when the mad were no longer thought of as animal or inhuman, the Retreat provided an institutional bridge: a salubrious environment, a refuge, and a safe haven from the world (1997, 92-93).

The metaphor of the 'bridge' is revealing – a controlled, yet two-way path connecting the world (reason) and the 'lunatic' (unreason).³³ This can be seen as an instance of the active/passive opposition Cixous draws attention to in her 1975 essay 'Sorties.' For Cixous, this opposition structures thought and ensures that 'woman is always associated with passivity in philosophy' (1986, 64), both necessary to define man as active, and absent because drowned out by the activity of man.

As with gender, so with un/reason: architecturally and conceptually, moments of transition *between* reason and unreason (the community and the asylum) bring into focus their basic connection precisely by providing an uncomfortable reminder that unreason is the invisible partner which makes reason *per se* possible. As Shoshana Felman writes:

If madness as such is defined as an *act of faith* in reason, no reasonable conviction can indeed be exempt from the suspicion of madness. Reason and madness are therefore inextricably linked; madness is essentially a phenomenon of thought, of thought which claims to denounce, in another thought, the Other of thought: that which thought is not. Madness can only occur within a world of conflict, within a conflict of thoughts (2003, 36).

Building on Felman's formulation, it is unsurprising that, if 'madness can only occur within a world of conflict,' moments of conflict surrounding the very *location* of madness should precipitate texts which address questions of madness and its relation to society. Dramatic texts are particularly likely to address these issues, since, in Aristotle's formulation of dramatic structure, internal conflict itself is central to drama (Aristotle 2000, 55-56). In the light of these approaches, and the co-incidence, in the second half of the twentieth century, of changes in social understandings of madness and widespread debate over the position of women within society, it is similarly unsurprising that feminist playwrights became particularly concerned with the relationship between gender and madness.

The writers who will be discussed in this chapter engage with space, not just within their plays, but also in their own interaction with British theatrical culture. The representation of women writers in the traditional spaces for new writing was limited in the early days of the subsidised

³³ In relation to contemporary cognitive science, Philip Barnard (2004) has also employed the metaphor of the bridge as a way of thinking about the interactions between theory and practice. See Shaughnessy (2013b, 18-24) for broader applications of Barnard's bridging paradigm to theatre and performance studies.

theatre movement, and so merely getting work produced required a tactical interaction with space. While some were able to work within mainstream theatrical spaces, other had to find locations on the fringes of the theatrical establishment. An example of the latter is Caryl Churchill's *Schreber's Nervous Illness*, an adaptation of Daniel Paul Schreber's famous 1903 autobiography of a psychotic breakdown, a text which formed the basis for a number of psychoanalytic reflections, including one by Sigmund Freud. *Schreber* was a BBC radio play, a genre which has 'often been described as a female medium' (C. Mitchell 2004, 157). The status of radio drama in relation to the broader theatrical ecosystem is unstable, since it has the potential reach a large audience, but requires fewer resources to produce and lacks the visibility of a run at a theatre such as the Royal Court, thereby providing a space which can be appropriated for increasing exposure.³⁴

Engagements of this kind can be approached through Michel de Certeau's explicitly spatial concept of the 'tactic' – 'a calculated action determined by the absence of a proper locus' (1988, xix). Tactical actions are not simply made by the writer in a vacuum, and nor are they imposed by an external force, such as theatre management. Instead, they are the result of the interaction between the two – the writer taking advantage of the miniscule opportunities afforded within the more 'fixed' spatial structures of the theatrical establishment. The writer's knowledge of the institutional spaces in which they are moving allows them to react, to exploit opportunities 'in the moment.' Discussing this mode of operating, Sarah Daniels describes the ways in which these experiences shape a production: 'the pressures on managements, and so on everyone who works in the theatre, are very real but it all happens in a more subtle and insidious way' (Stephenson and Langridge 1997, 4).

As a result of these pressures, and the fact that plays considering the gender dynamics of mental illness are intimately connected to the contested spatialities they inhabit, represent, and attempt to bring into being, special attention must be paid to the forms of tactical engagement at these intersections. Being tactical in de Certeau's sense, these plays always emerge from the specific individual decisions made in a specific (and probably less than ideal) economic and spatial context. I wish to argue that it is this 'tactical' character, this concern with the local, the personal, and the specific, which shapes the political scope of feminist plays in relation to mental illness. By addressing historical discourses of madness from the conflicted positions of individual female patients (for example), the best of these plays challenge the binary constructions which

³⁴ Radio drama is also notable for its unstable connection to the body. Nicola Shaughnessy notes that radio drama '[erases] the visible bodied of speakers and performers even as it insists on the immediacy and tangibility of the speaking voice' (2000, 246).

make it more likely for women to be labeled mad. In addition to this, the plays also strike to the very heart of the time/space binary, demonstrating *how* individual people in individual times and spaces have shaped (and been shaped by) discourse.

Sarah Daniels: the madwoman in and out of the asylum

***Beside Herself* and the spaces of naturalism**

Elin Diamond (1997) argues that there is an intimate connection between the development of 'naturalist' or 'realist' theatre (for example, that of Ibsen) and the development of psychoanalysis. As a result, the hysteric is a central figure to both discourses – the apparently 'illegible' object of enquiry which empirical processes must reveal 'in its truth' as Foucault (2006b, 339) says in relation to the clinic: For Diamond 'hysteria provides stage realism with one of its richest and, ideologically, one of its most satisfying plots' (1997, 5), because 'like the new science of psychoanalysis [it] establishes its truth by reading of the enigma of hysterical symptoms' (6) – symptoms which are inherently gendered.

However, despite, or rather because of, this gendered connection, Diamond suggests that 'realism itself is a form of hysteria' (4), since in order to 'represent' the hysterical woman, apparently containing her within its process of truth making, 'the truth of referentiality passes through the signifier of hysteria' (7). However, while realism has the potential of 'catching' hysterical (and hence non-naturalistic) modes of representation through the very representation of hysteria, this cannot by itself make such representations of hysteria subversive – the positivist trappings of realist theatre continue, as in the previous chapter's discussion of the asylum, to constitute what Foucault describes as a 'monologue of reason about madness' (2001, xi), and simultaneously a monologue of men about women. For realist theatre, what is 'true' is that which is observable, what is external – and therefore what can be categorised.

For playwright Sarah Daniels, as for Diamond, naturalism and hysteria are connected. Indeed, Daniels's plays actively engage with this connection the manipulation of spaces – both of the theatre and of madness. First performed in 1990 at the Royal Court, *Beside Herself* tells the story of St Dymphna's 'halfway house' and its employees, focusing on Evelyn and her double, Eve, a figure for Evelyn's own childhood trauma and growing mental illness. By locating madness in the staff, rather than simply in the residents, of St Dymphna's, Daniels probes questions of how we recognise and interpret aberrant mental states. *Beside Herself* is an early example of an increasing interest in women's mental health in the British theatre of the 1990s. Zindika Kamausi's 1992 *Leonora's Dance* explores racism and mental illness in ballet, while

Bonnie Greer's 1993 *Munda Negra* similarly addresses women's madness from a specifically black perspective. Meanwhile, Caryl Churchill's 1994 *The Skriker* uses fairytale imagery to explore post-natal psychosis, a theme also present in Churchill's 1986 *A Mouthful of Birds*.

Beside Herself is particularly interesting both in its use of space and in its apparently banal setting. The play opens in a decidedly non-naturalistic space, which juxtaposes costume and blocking suggesting an archetypal Renaissance painting with the banality of supermarket shelves. However, the action quickly moves into the realistic setting of St Dymphna's. St Dymphna's provides a liminal space between the 'traditional' location of madness in the asylum, and the public space which it is beginning to transgress through the process of deinstitutionalisation. It is thus the site both of the residents' attempts to negotiate their own re-entry into public space, and the site of resistance from that public, as can be seen from its visual appearance at the scene's opening.

The only room in St Dymphna's seen by the audience visually references the drawing room of turn of the century realism, while a fireplace bearing graffiti reading 'Loonies' suggests that, for the 'reasonable' members of the community, madness needs to be marked by disorder. St Dymphna's can therefore be seen as a 'bridge' between the worlds of reason and unreason in a similar way to the York Retreat, as discussed by Edginton (1997), and hence as a gendered articulation – bringing the basic connections between reason and unreason, between gender and madness, into focus. While, to the patients, St Dymphna's represents their chance to reintegrate, to 'the community' it possesses the disorderly valence of the asylum, rendered more threatening because it lacks the reassuring presence of walls and guards.

Allegorical spaces and the nature/culture binary

This 'bridging' is emphasised by the play's structure, which oscillates between scenes which take place in St Dymphna's, and scenes with allegorical titles ('The Power and the Story,' 'Genesis,' 'Exodus') which take place in other locations, notably including a supermarket and the kitchen of Evelyn's father, George. Continuing the spatial concern indicated by the centrality of St Dymphna's as a liminal space between sanity and madness, Evelyn's move towards healing is emphasised through a move from the supermarket to the 'open air' (Daniels 1994, 176).³⁵

³⁵ Unless otherwise stated, all subsequent references are to this edition.

In *Beside Herself*, the supermarket is a polyvalent location: at once a space of madness in which Evelyn's façade of 'normality' finally crumbles, and a space coloured by its position in the surreal opening sequence as both 'a dream' (97) and Hell. Drawing attention to the possibility that somewhere considered a 'women's space' can also be a figure of women's oppression, the supermarket provides a site for potential deliverance and cleansing, as implied by the subtitle, 'Exodus' (175) given to the second supermarket scene. Biblically, the Exodus was a moment of deliverance, in which the Israelites passed through the Red Sea (an image of chaos) into the uncertainty of the wilderness. Following the resonance of the scene's title, the supermarket can be related to the Red Sea, keeping Evelyn in slavery to her past and to the patriarchal conventions which see her as 'absolutely barking mad' (138). It is through her ability to say to Nicola 'there's something I want to tell you' (176) that she is able to cross it and, again paradoxically, to return to the 'Genesis' of her distress in order to confront it, first by sharing the truth of her abuse with Nicola, and then by her cathartic confrontation with George.

However, in contrast to the studied instability of both St Dymphna's and the supermarket, the spatial dynamic of the 'Exodus' into the 'open air' reinscribes a patriarchal myth which, in associating women with nature, subordinates them to culture. Following Diamond's observation that realism can 'catch' melodramatic elements from the representation of hysteria, Daniels's dramaturgy here could, in the playscript at least, be argued to have 'caught' patriarchal naturalism – specifically the essentialist myth of a necessary association between women and nature.

Heather Debling sees the scene in 'the open air' as 'a straightforward or unproblematic testimonial process' (2008, 259), characteristic of the kind of understanding and community necessary to challenge the psychological trauma created by patriarchal structures. However, the spatial logic of the play also contains the implication that, in order to establish this female community, women must escape the built environment of supermarket, community home and asylum, and return to nature – the open air. This is not the 'entirely different stage/scene' Cixous (1995, 134) sees as necessary for a theatre hospitable for women, but rather another patriarchal myth in which women appear as the weaker half of a binary opposition. Since the play does not suggest an ecofeminist critique of the nature/culture division, perhaps along the lines of that proposed by Ynestra King in her essay 'Healing the Wounds' (1989, 115-141), this construction appears unproblematic. In her attempt to undermine a binary which suggests a necessary association between femaleness and irrationality (the subordinate half of the sanity/madness binary), Daniels's dramaturgy unwittingly re-inscribes women within the related binary of nature/culture.

Although this problem may have been slightly mitigated in the production by leaving the set of the supermarket in place for both the Exodus and Genesis scenes, the model of spatial escape as resolution is a problematic feature of much of Daniels's work, from Mary's suicide in *Ripen Our Darkness*, to the utopian escape at the end of *The Madness of Esme and Shaz*. Lefebvre's notion of utopias as 'spaces occupied by the symbolic and the imaginary,' and his argument that 'the most effectively appropriated spaces are those occupied by symbols' (1991, 366) suggests something of the danger of this approach: to appeal to utopia is, paradoxically, to increase the domination of actually existing space by placing it into the realm of the absolute, and hence the immutable.

Spaces in time: *Head-Rot Holiday*

Daniels's *Head-Rot Holiday* (1992) gestures towards a less utopian approach to space. Like *Beside Herself*, *Head-Rot Holiday* addresses the psychiatric landscape post-'Care in the Community,' in this case the continuing use of 'special hospitals.' Constructed in part on the basis of interviews with women who were or had been incarcerated in these institutions, *Head-Rot* follows Dee, Ruth and Claudia as they negotiate the world of Penwell Special Hospital, in which you can demonstrate your 'recovery' by dancing with a former abuser at the Christmas disco. First performed at Battersea Arts Centre in 1992, by ex-inmates working with Clean Break theatre company, *Head-Rot*, like *Beside Herself*, also draws attention to the fragility of the distinction between patients and 'carers,' as three actors double the parts of nurses and patients, the domestic abuse suffered by Barbara, the head nurse, finds an outlet in her actions towards the patients.

The inmates of secure hospitals inhabit a contested discursive space between 'mental illness' and 'criminality,' and it was for this reason that Clean Break, 'the first and only theatre group for women ex-prisoners' (Clean Break Annual Report 1992-3), commissioned Daniels to address the subject. The play contains a similar division between approaches which are broadly 'realistic' and those which eschew realism to that found in *Beside Herself*. However, while the latter ties this division to space, in the alternation between St Dymphna's and allegorical spaces, *Head-Rot* keeps its realistic content on the level of individual vignettes drawn from interviews with women who had been inmates of 'special hospitals.'

Carina Bartleet relates the play's cyclical structure to hysteria via Kristeva's (1981) notion of women's time as 'cyclical.' She argues that the focus on embodied experience can be seen as 'a doubly hystericized dramaturgy, which itself collapses the distance and separation between the knower and the known [...] the play stages [...] experiences rather than displaying the madwoman as a spectacle' (Bartleet 2003, 257). It is questionable whether the play finally

achieves the complete escape from visual constructions of madness, but the extent to which it does so is made possible only through the use of a closed, non-naturalistic *space*. The play's cyclical structure is only believable insofar as the contingent space within which it takes place supports that structure.

Possibly as a result of the terms of her commission, *Head-Rot Holiday* is less straightforwardly redemptive than other of Daniels's plays, since it offers no easy way out of the nexus of patriarchy, madness, and psychiatric power. However, as a result, it also avoids the trap of abandoning the issues under discussion too soon, giving a narrative appearance of resolution which, by transcending rather than fully resolving the issues, leaves questions uncomfortably, glaringly open, at odds with the artificial neatness of the dramatic denouement. For women in special hospitals, there *is* no easy way out, and the play's dramaturgy attempts to communicate the mutually reinforcing relationship between the repressive structures of the institution and the ways in which psychic distress shapes each individual's embodied experience of those structures.³⁶

Figure 1. Promotional image for *Head Rot Holiday*.

This circularity is emphasised by the constant, non-naturalistic set: a committal document which covers both backdrop and stage (fig. 1). In *Beside Herself*, the alternation between various

³⁶ This 'in between' space connects to the more general challenges to binary structures based on the logic of visibility which emerges both from Lefebvre's approach to space, and (as I argue in this thesis) the representation of madness itself. It can also be thought of in terms of the 'dynamic systems' structure employed in many of the emerging cognitive science approaches to theatre and performance. These approaches will be discussed in more detail in the second section of the thesis.

unstable spaces enacts a dialectic between the visual language of realism and the non-realistic techniques required to avoid producing a ‘monologue of reason about madness’ (Foucault 2001, xi). As demonstrated above, however, investing so much discursive weight in the operation of space may fail to take into account the potential of space to oppress as well as liberate. By utilising a circular plot, and a set which refuses to allow the audience to adopt a straightforwardly clinical gaze, *Head Rot Holiday* emphasises the specific experience of each character. This in turn complicates the terms of the dialectic, so that, instead of forcing a premature synthesis in which ‘female community’ automatically solves complex problems, the play highlights the tensions between social assumptions about ‘special hospitals,’ the lived experience of those who inhabit them, and the Kafkaesque implications of the set itself.

The set divided critical opinions, mostly on the basis of preconceived ideas about the play’s intentions. While Rick Jones (1992) of the *Evening Standard* saw the set as ‘the only outstanding feature’ of the play, giving the actors ‘the aspect of insignificant pawns enclosed by the terrifying greatness of the law,’ Kate Bassett (1992) in *City Limits* argued that this failure of realism undermines ‘the play’s potent docudrama authenticity.’ Bassett’s comments showcase critical assumptions about theatre’s role, and the ways in which female experience of madness *should* be staged. This can be related to Diamond’s (1997) discussion of the intersections between realism as a positivist form and hysteria as a gendered madness – the set, as well as the ‘awkward visionary insertions’ Bassett also complains of, absolutely refuses the audience’s desire to read the play as a straightforward ‘docudrama.’³⁷

This refusal frustrates the culturally ingrained attempt to participate in a ‘monologue of reason about madness,’ thereby forcing the audience to engage with the lived experiences of the characters rather than prematurely placing them in socially sanctioned narrative categories.³⁸ By refusing the realist/psychoanalytic claim that madness exists only insofar as it can be ‘read,’ but

³⁷ Nicola Shaughnessy’s (2013a) work on the imagination in autism provides another paradigm through which to think about this apparent contradiction between naturalistic and hysterical dramaturgies. Citing Happé and Vital (2009), Shaughnessy suggests that there are different *kinds* of imagination, and that the apparent imaginative deficits in autism only appear as deficits in relation to a narrow, neurotypical definition of imagination. For Happé and Vital, Autistic Spectrum Conditions (ASC) provide a unique world-view which leaves ASC children ‘more able to think their own thoughts,’ where Typically Developing (TD) children ‘lose aspects of their originality’ (2009, 1370). If madness, like autism, is thought of as a ‘unique world-view,’ then a dramaturgy which is open to its logic may appear ‘impaired’ to the extent that it refuses to conform to the generic conventions it sets up. Later in this chapter, we will see a similar charge of impairment against the dramaturgy of Sarah Kane.

³⁸ The question of ‘legibility’ and its specific relation to embodiment will be addressed in the second section of this thesis, in dialogue with Emmanuel Levinas’s replacement of ontology with ethics as the basis of philosophy.

rather offering a mediated version of the subjective experience of those labeled ‘mentally ill,’ Jenny Tiramani’s set enables *Head-Rot Holiday* to avoid ‘catching’ the visual epistemology on which realism is based. The audience, often to their frustration, are not offered a simple recourse to other binary constructions, but are caught in a constant conceptual dialogue between the implicit space of the mental institution, the visual space of the stage, the vocal communication of subjective experience, and the body-presence of the actors.

3. Beyond feminism, out of space? Postfeminism and Sarah Kane’s spaces

Despite the developments towards what could be called a feminist aesthetics of madness detailed above, the discursive history of feminism which separates the moment in 2014 when I write these words and the moment in the early 1990s when plays about women’s madness were being written regularly is immediately to raise questions: What has happened since? Have there been further developments? Is feminism even a valid category anymore? This section will examine these questions, introducing the political implications of a ‘postfeminist’ era, and suggesting ways in which plays about women’s madness have re-orientated themselves within it. Since, as already discussed, changing cultural contexts alter how both madness and space are conceived, it is important to understand the wide ranging conceptual shift within which postfeminism falls in order to assess the spaces and conceptions of madness it has influenced.

Postfeminism – development or recuperation?

Elaine Hall and Marnie Rodriguez note that ‘according to the popular media, the United States entered a postfeminist era around 1990’ (2003, 878), while Justine Ashby (2005) identifies a similar trend emerging in Britain over the course of the 1990s, with The Spice Girls and *Bridget Jones’s Diary* (2000) being exemplary instances of postfeminist media. If these examples seem a long way from the combative approaches taken by Sarah Daniels, it is no surprise. Hall and Rodriguez identify ‘postfeminism’ with decreasing support for ‘the women’s movement,’ especially among some women, as a result of a sense that ‘equality’ has been ‘achieved,’ and embarrassment about the gendered implications of the term feminism itself (2003, 879). Using a content analysis methodology, they argue that these claims are false, but also recognise that ‘the mere existence of a postfeminist perspective in public discourse dramatically alters the social landscape in which discussions about and actions to improve the status of women occur’ (884).

Any discussion about postfeminism is complicated by the fact the term is not universally used in the sense identified by Hall and Rodriguez. Amanda Lotz draws a distinction between the negative implications of its use in the United States and its use in Britain, where it encompasses

a range of possible positions. She cites *The Icon Dictionary of Feminism and Postfeminism* (1999) as evidence that the term is used 'in relation to backlash, postmodernism, and as the feminism of the third wave' (Lotz 2001, 112). Whichever definition of postfeminism we use, however, it is clear that the shape of feminist discourse has changed significantly between the 1980s and the present, and that the terms involved have therefore become more contested.

The British theatre of this period, especially those plays written by women, is no exception to this vexed relationship with feminism, as can be seen from Sarah Kane's statement 'I don't believe there's such a thing [as a woman writer]' (Stephenson and Langridge 1997, 134), and the subsequent concern in academic writing to determine whether or not Kane was, in fact, a 'feminist writer' (Aston 2010, Saunders 2010). However, drawing from the British strand of writing about postfeminism, it becomes clear that the anxiety surrounding the conception of feminism is powerfully connected to the same questions of madness, spectacle, and gender which have occupied this chapter so far.

A strong theme within British discussions of postfeminism is the relationship of the discourse to broader political developments since 1990, especially the emergence of 'Third Way' politics as articulated by Anthony Giddens (1998) and put into practice by Tony Blair's New Labour, as well as the New Democrats in the United States and the 'New Centre' in Germany. Despite Tony Blair and Gerhard Schroeder's assertion that 'the past two decades of neo-liberal *laissez-faire* are over' (2000, 56), the politics of the Third Way, in which citizens are 'encouraged to exert control over their future by uniting their individual ambitions and strengths with the economic concerns and demands of the market' (Genz 2006, 334), could better be described as an *intensification* of neo-liberal politics. Stuart Hall describes the situation as follows 'forging a plausible or pragmatic pathway from Left to Right, carrying a proportion of its old supporters with it [...] New Labour may establish neo-liberal society and the market state on firmer, less contested foundations' (2005, 330). Rather than the aggressive marketisation pursued by Margaret Thatcher, Third Way politics pays lip service to social democracy while its underlying engine drives towards neo-liberal ends.

Hall's analysis of Third Way politics and economics ties into Angela McRobbie's (2004) conception of postfeminism as a discourse which invokes feminism in order to repudiate it. McRobbie complicates Susan Faludi's (1991) argument that postfeminism represents a 'backlash' against feminism, arguing instead that postfeminism 'draws on and invokes feminism as that which can be taken into account, to suggest that equality is achieved, in order to install a whole repertoire of new meanings which emphasise that it is no longer needed' (2004, 225). Rosalind Gill (2007, 2008) extends this, noting that, in a profoundly contradictory way,

feminism is not just drawn on to suggest its redundancy (as McRobbie argues), but that postfeminism *simultaneously* expresses feminist and anti-feminist ideas, so that ‘notions of autonomy, choice and self-improvement sit side-by-side with surveillance, discipline and the vilification of those who make the ‘wrong’ ‘choices’’ (2008, 442). For Gill, postfeminism is ‘best thought of as a sensibility’ (2007, 148), so that if, with Frederic Jameson, we see postmodernism as ‘the cultural logic of late capitalism’ (1984), postfeminism could be seen as ‘the gender expectations of late capitalism.’

Gill’s suggestion that ‘the female body in postfeminist media culture is constructed as a window to the individual’s interior life’ (2007, 150) is particularly relevant for a discussion of madness in theatre. This approach to the body can be seen in the proliferation of ‘makeover’ shows, where the viewer is supposed to read deep psychological pain in the poor fashion choices of the women at the opening, and a fundamental psychological realignment when they are revealed ‘made-over.’ The proof of this ‘change,’ however, is in the supposedly unannounced re-arrival of a camera crew several months later, to see whether the subject has maintained the regime prescribed by the presenter. This dual surveillance, both of one’s own inner state and of the exterior cues of others’ inner states, demonstrates the extent to which a particular hegemonic construction of mental ‘well-being’ constitutes a central element of ‘being woman’ in a postfeminist culture.

Staging women’s madness post-feminism

In this postfeminist context, it is unsurprising that the strident socialist-feminist approach which characterised earlier feminist drama is less evident in the 1990s and after. Indeed, the focus on masculinity within many of the plays characterised by Aleks Sierz as ‘in-yer-face’ provides further evidence of the kind of rebalancing discussed above. Sierz argues that the tendency to display casual male violence in plays like Jez Butterworth’s *Mojo* (1995) is a response to ‘masculinity in crisis’ (2001, 207), a crisis whose causes Sierz does not identify, but which would certainly include theatrical feminist polemic, as well as the newly positive influence of and attitudes towards LGBT culture. While a sense of masculinity under attack is clearly at work in these plays, as well as in their cinematic equivalents such as Quentin Tarantino’s *Reservoir Dogs* (1992), the extreme violence (and especially sexual violence) can be read more as a reassertion of masculinity than its crisis.

Although Graham Saunders argues that the inability of feminism to respond to this new dramatic sensibility ‘highlighted the real crisis that was taking place in feminism’ (2010, 212), it seems likely that this crisis was only part of the reason that feminist plays ceased to play such a

large part in the output of venues such as the Royal Court. The changed funding structures and associated cuts in arts subsidy over the course of the 1980s increased the tension between subsidised theatre and parts of the press over what kind of theatre should receive subsidy.

Sarah Daniels was a particular victim of press opprobrium in the reaction to her anti-pornography play *Masterpieces*, which was dubbed misandrist for its black-and-white take on sexual violence. Whether as a result of this increased scrutiny or not, Saunders notes that 'successive cuts during the 1980s finally caught up with many of the most well-known women's groups, and between 1992 and 1993 companies including Siren, Monstrous Regiment, Spare Tyre and The Chuffinelles all lost Arts Council funding' (210). One may speculate that the Court's programming department commissioned fewer overtly feminist plays after this period in order to avoid the risk of similar cuts.

However, this move away from overt feminist writing on the part of the Royal Court and other major theatres neither signaled an end to interest in gender and madness on stage, nor an identifiable moment at which representations suddenly shifted. The experience of madness pervades Sarah Kane's work, and she makes a direct link between her concern with madness and Jeremy Weller's play *Mad* at the Edinburgh fringe in 1992: '*Mad* took me to hell [...] and the night I saw it I made a decision about the kind of theatre I wanted to make – experiential' (quoted in Sierz 2001, 92). Identifying this continuity suggests that, although Sierz is right to draw attention to the new *emphasis* on the experiential in the 1990s, it is important to recognise points of continuity and development, rather than being seduced by a narrative of rupture.

As mentioned above, the extent to which Kane's work is 'feminist' is a source of debate. However, rather than asking whether her plays fit better within a 'feminist' or 'postfeminist' paradigm (especially if 'postfeminism' describes a cultural logic rather than a political approach), it is more productive to see in Kane's concerns a change of emphasis. The subjects of the plays become more explicitly focused on the local over time, mirroring the move traced above from plays which make large claims about the nature of madness to those which focus on the spatial specificities of individuals. This can be partly put down to the primacy of the individual more generally within postfeminist (and post-Thatcherite) Britain – 4:48 *Psychosis*, set entirely within an individual psyche, is the logical conclusion of a media culture obsessed with self-surveillance and cynicism about the value of 'society.'

In the discussion of Kane's approach to the spaces of madness which follows, I build on Aston's (2010) 'disinterment' of Kane's first play, *Blasted*, and her reinstatement of it 'as a landmark play in the context of contemporary women's playwriting, and as seminal to an experiential

genealogy of women's playwriting where feeling the loss of feminism presses upon the drama' (585). Aston argues that *Blasted* can be seen as a way of moving beyond the second wave 'rape-crisis' discourses in feminism, without diminishing the crucial centrality of rape as evidence of the violence underpinning the (patriarchal) social order. If this is the case then Kane's later plays, in their treatment of the spatial experience of madness, can be seen similarly as both genealogically related to, and crucially different from, those feminist narratives of madness which see it simply as a figure for the psychic effects of sexual violence.

Spatialising a turn from space

Discussing the state of British theatre in his *Rewriting the Nation*, Aleks Sierz (2011, 195) argues that 'British playwrights in the 2000s explored the inner space of the individual mind'. His discussion of this tendency is limited by the brief treatment he gives it (Sarah Kane's *4:48 Psychosis* is 'completely subjective' [196], Anthony Neilson's *The Wonderful World of Dissocia* contains 'one of the decade's most memorable moments of perfect bliss' [198]). However, he does identify a shift in the spatiality of madness, and in the discussion that follows I will show that one origin of this shift is in the similarly shifting physical location of mental health treatment.

The centrality of space to the representation of madness, as discussed above, is a consequence both of the inherent spatiality of the theatre and of the spatial history of psychiatric treatment. However, the advent of deinstitutionalisation in mental health care, and of experimental theatrical forms which challenge the conventional divisions of the theatre space (such as those proposed by Issacharoff and Scolnicov), suggests a move away from traditional conceptions of space and towards a cultural milieu in which the *idea* of space is at once brought to the centre and radically undermined. It is in analyzing these kinds of 'mad' spaces that Lefebvre's approach to theatrical space, which informed the taxonomy produced above, becomes particularly useful.

This apparent paradox can be clarified somewhat by reference to Hans-Thies Lehmann's (2006, 150) account of 'dramatic and postdramatic space.' For Lehmann, 'dramatic theatre has to prefer a "medium" space' in order to allow mirroring to take place: 'the stage frame functions like a mirror that ideally allows a homogeneous world of the viewers to recognise itself in the equally coherent world of the drama.' This medium point is the point at which space appears as, in Lefebvre's terms, 'the passive locus of social relations' (1991, 11). As a result, any shift into spaces which are very small or very large, or which in other ways complicate the exact division between spectator and performer, both draw attention to the space and radically alter our perception of it.

These shifts in spatial understanding have precipitated concomitant shifts in the on-stage representation of madness, since, as we have already seen in relation to Neilson's *Marat/Sade*, the more fluid and complex stage spaces available are exploited to explore changing perceptions of mental illness. The trajectory of Sarah Kane's treatment of space provides a particularly clear example of this development. Much of what has been written about Kane's work has been related to whether or not the plays she wrote can be interpreted apart from the fact of her suicide. It is undeniable that Kane's biography has shaped the reception of her plays, including those approaches which seek to decouple her individual experience from the broader thematic and performative contexts of her work. However, the debates over whether or not the plays are 'insane' (Singer 2011, 160), or the related moral/ethical status of her dramaturgy also direct attention away from other potentially fruitful lines of enquiry, particularly those relating to spatiality.

Postdramatic spaces and the logic of the visible

Prior to discussing the effect of Kane's approach to space on her representations of madness, it is important to be clear that her manipulation of space is not wholly, or even largely, a direct result of the madness experienced by her characters, even though the theme of madness can be seen even in her earliest play, *Blasted*. Notorious for garnering the *Daily Mail* front-page headline 'This Disgusting Feast of Filth,' after its Royal Court premiere, *Blasted* is set in a Leeds hotel room, initially seeming to depict, 'slice of life'-style, the abusive relationship between a young woman, Cate, and older male journalist, Ian. Before the interval, however, the hotel room is literally blown apart, and the casual violence displayed by Ian becomes the organising logic of a nightmarish, war-torn landscape. By the, Ian has been raped, had his eyes sucked out, and eats a dead baby, while Cate displays a resilience and resourcefulness barely hinted at in the first act. While appearing to fit within the genre of 'plays about women's madness' identified above, *Blasted* offers a less straightforward political message which places it far more clearly within a 'post-feminist' cultural logic.

Christopher Wixson's account of the play provides a helpful introduction to Kane's use of space:

Kane's characters long for a space that confers upon them the properties of home: security, fulfillment, privacy, and belonging. Unfortunately, they find themselves lost in place, wandering within spaces that are transient, porous and constantly under siege (2005, 76).

Kane's decision to 'plant a bomb' (quoted in Sierz 2001, 102) in the middle of *Blasted*, allowing the soldier to be literally present rather than simply a figment of Ian's imagination, draws attention to a concrete sense of spatiality. I would argue that this focus on space is present in all her plays, even (if not especially) in *Crave* and *4:48 Psychosis*, both of which deliberately refuse traditional markers of theatrical space.

Blasted is perhaps the most discussed of all Kane's plays, and her decision to utterly shatter the apparently naturalistic aesthetic of the play's opening with 'a blinding light and then a huge explosion' (2001, 39)³⁹ at the end of scene two came in for critical opprobrium, including Michael Billington's suggestion that the play 'falls apart' because there is 'no sense of external reality' (Billington 1995). As Wixson argues, 'spatial transgressions are at the heart of some of the critical resentment of *Blasted*' (2005, 79). Another factor which makes *Blasted* so uncomfortable is that, unlike Edward Bond's *Saved* (1965), or Howard Brenton's *The Romans in Britain* (1980), Kane does not present a straightforward moral response to the issues she raises. Ken Urban attempts to sidestep this discomfort by appealing to 'ethics' rather than 'morals':⁴⁰

To Kane, the good is not a moral imperative imposed from on high, but rather good is contingent, emerging from specific moments. The success of Macdonald's [2001] production is that Cate and Ian show us the possibility for good, that people ravaged by unfathomable violence can give each other the gift of survival (2001, 46).

In a later essay, Urban expands this reading to argue that the movement known as 'Cool Britannia,' including both the Young British Artists and the playwrights described by Aleks Sierz as 'in yer face,' speak to 'the ethical possibilities of nihilism' (2004, 369). While this reading is valuable, it is equally important that we do not too quickly collapse the radical discomfort which emerges as much from spatial dislocation as from moral uncertainty. While, for Urban, the notion of nihilism suggests Nietzsche's 'theory of the tragic as that which cheerfully endures the unthinkable, not to overcome it, but to embrace it as that which is "pregnant with the future"' (370), even to make this appeal is to lessen the discomfort of the plays – the notion that what we are experiencing is somehow ethical is itself a procedure which makes the experience easier to bear.

³⁹ Unless otherwise stated, all subsequent references to Kane's plays are taken from this edition.

⁴⁰ The question of ethics with respect to the representation of madness will be taken up in the second section of this thesis.

This is not to dismiss Urban's point that Kane 'dramatises the quest for ethics' (2001, 37), but to suggest that we should first allow ourselves to experience the dislocations which make up this dramatisation, not as something 'pregnant with the future,' but as pure presence in space. Kane returns us more forcefully to this presence with every formal experiment: by weakening the traditional logic of the dramatic stage-space, she also weakens the sense that her plays are the containers for a message. In his discussion of 'postdramatic' spatiality, Lehmann identifies this weakening with a number of spatial tendencies in contemporary theatre:

- A space based on embodiment, in which 'the visitor becomes more or less active, more or less voluntarily a co-actor'
- A tendency by which theatre space 'turns from metaphorical, symbolic space into a *metonymic space*'
- A space in which 'bodies, gestures, postures, voices and movements are torn from their spatio-temporal continuum' and 'the actors on stage repeatedly behave *like spectators*'
- A space which 'functions *chronometrically* [and] at the same time it becomes a *place of traces*'
- A space in which an 'immediately spatialized *body-time* aims to communicate directly with the spectators' nervous system, not to inform them.
- A space which 'presents itself [and] becomes a co-player without having a definite significance' (2006, 150-152).

Common to all of these tendencies is the idea that, although space becomes more central, it does not take over as a purveyor or container of meaning, but rather frustrates attempts to 'read' the performance according to the logic of the text.

Lefebvre's approach to space can help us think about the implications of this development. He links the logic of the text to the logic of the visible, abstracting our awareness of time and subordinating it to 'the modernist trio, triad or trinity of readability-visibility-intelligibility' (1991, 96). This triad creates a space which 'presupposes and implies a logic of visualisation' (98). For Lefebvre, this logic of visualisation makes space appear transparent – but this is appearance only, based on a tautology or metonymy which assumes that the truth of a single image (photograph, advertisement, film) is necessarily the truth of space.

In naturalist theatre, such as that referenced by the opening sections of *Blasted* and the décor of St Dymphna's in *Beside Herself*, this metonymic shift can be guilty of the same process of obfuscation as other media. However, Lehmann's sense of postdramatic metonymy is one in which the space 'is not primarily defined as symbolically standing in for another fictive world

but is instead highlighted as a part and *continuation* of the real theatre space' (2006, 151). As a result, rather than contributing to illusion, metonymy in Lehmann's sense draws attention to it. If the 'kitchen sink' drama is an example of a medium which is 'supposed to embody and 'show' the truth, but which actually comminute[s] space and 'show[s]' nothing besides [...] deceptive fragments' (96), then forms which refuse this straightforward approach to space, being aware of their own limitations, have the potential to reveal them, if only briefly and in glimpses.

Blasted can 'work affectively on audiences so that they might *feel* the loss of feminism' (Aston 2010, 577) precisely because it resists the naturalistic impulse of a fully realised fiction. Billington's criticism, as cited above, unwittingly highlighted exactly this strength – the refusal to fulfill the expectation of dramatic space allows the play to 'communicate directly with the spectators' nervous systems, not inform them' (Lehmann 2006, 152). Non-naturalistic forms, by refusing to consider space as *either* transparent *or* opaque, attempt to draw attention to and problematise the logic of the visible.

Beyond institutional spaces

Partly as a result of Kane's use of a pseudonym (Marie Kelvedon) to disrupt the assumptions created by the *Blasted* controversy, *Crave* (1998) and *4:48 Psychosis* (2001) have often been seen to mark a break in her career – Urban describes them as 'companion pieces, both reflecting a shift in her work' (2001, 43), while Sierz sees *4:48* as the point at which Kane 'kissed goodbye to realistic play-making' (2011, 196). Although it is true that, with *Crave*, Kane abandons her detailed and often unstageable stage directions for a deliberate silence concerning set and blocking, it is just as legitimate to read this shift as the logical conclusion of this approach. Stage directions such as those at the end of *Phaedra's Love* (1996), in which '**Man 1 pulls down Hippolytus' trousers. /Woman 2 cuts off his genitals. /They are thrown onto the barbecue**' (2001, 101) point directly to the inability of theatre to represent them literally, and hence to the loss inherent in any staging.⁴¹

Lefebvre, in arguing against semiological readings of space, admits 'that space signifies is incontestable' (1991, 142), and his main point of contention with semiology is that it reduces space to its signification, and thus obscures the fact that spaces are 'if anything, 'over-inscribed': everything therein resembles a rough draft, jumbled and self contradictory' (142). Kane's stage

⁴¹ The absurd detail of the stage directions in *Phaedra* can also be read as a protest against what Kane saw as a limitation of Classical drama: 'I've always hated those plays. Everything happens off-stage, and what's the point?' (quoted in Saunders 2002, 72).

directions demand such an over-determined response – in directing the play, Kane ‘made a decision that [she] would try to do the violence as realistically as possible’ (Saunders 2010, 80), in order to test the signifying potential of theatrical space: ‘if it didn’t work then we’d try something else’ (80). The result of this was that, in rehearsal, cast and crew were ‘all severely traumatized,’ and in performance the distinction between audience and performers collapsed, as the stage blood and entrails were ‘chucked over the audience’s heads’ (81) and ‘audience members’ turned out to be ‘plants’ from the cast, implicating the audience as part of the crowd baying for Hippolytus’s death. As David Greig writes in the introduction to Kane’s *Collected Plays*, ‘by demanding an interventionist and radical approach from her directors she was forcing them to go to the limits of their theatrical imagination’ (Kane 2011, xiii) – and in reaching those limits, they are forced to disavow the simple legibility condemned by Lefebvre.

The excessively detailed stage directions in Kane’s early plays demand that the process of translation to the stage be honestly recognised in performance. The absence of any stage directions in *Crave* and *4:48* similarly (and perhaps more effectively) helps to reveal that any given production of these plays is seen as the product of an active creative process, rather than simply a fixed ‘product’. The excessive stage directions, especially in *Cleansed* (1998) and *Phaedra’s Love*, encourage the whole creative team to exercise their spatial imaginations within defined (but wide) limits. By *Crave*, even these limits have vanished, but this does not mean that space is abstracted. The very fact of staging implies and produces a space, as Christopher Innes notes in his discussion of Kane’s work, connecting the focus on the visual ‘which [...] required a production evolved from improvisation and devising’ and the influence of performance art, in which ‘physical action becomes the equal of verbal dialogue, or even the dominant mode of expression’ (2002, 536).

For Lefebvre, the articulation between thought and physical space is a lacuna in the thought of writers including Foucault and Derrida, made visible in a tendency to ‘spring without the slightest hesitation from mental [space] to social [space]’ (1991, 6). Foucault’s (2006a, 558) connection of the Cartesian *cogito* with the various confinements of madness which emerged following the Enlightenment can be seen as an instance of this lacuna – the philosophical space in which madness is conceptualised is posited as identical with the physical space in which ‘mad people’ are confined.

This tendency is also present in the deployment of the asylum on stage as shorthand for madness – the physical space is an asylum, *and therefore* the actors are mad. This equation often holds regardless of whether the character is a ‘patient’ or a ‘doctor’ – plays from *Marat/Sade* to *Head Rot Holiday* suggest, to varying degrees, that the distinction is untenable, often with the result

that an apparently 'sane' doctor turns out to in fact display 'mad' behaviour (witness Neilson's Coulmier, who enters willingly into the play's orgiastic conclusion, or the abusive actions of Barbara in *Head Rot Holiday*). By contrast, in refusing a concrete institutional space, *Crave* and *4:48 Psychosis* situate themselves at this point of articulation. This liminal space is not, at bottom, a metaphorical representation of the point at which madness enters the physical world, but rather the playing out in time and space of a concrete process: as a voice within *4:48* says (thinks? hears?) 'I sing without hope on the boundary' (214).

Disrupted visibility: staging *4:48*

4:48 Psychosis, an experimental 'text for performance' with no stage directions, cast list or division of characters, addresses questions of mental illness directly, offering meditations on the nature of suicide, psychiatric medication, love, and the therapist/patient relationship. Although sometimes dismissed as a suicide note in pseudo-dramatic form, the play in fact orientates itself with one eye on the feminist asylum dramas of Sarah Daniels and Caryl Churchill, and another on the hyperindividualism evident in some 'postfeminist' approaches. Kane's own comments about the play suggest that one of the keys to its structure is in recognising that the boundary between mind and space is both crucial and permeable. In an interview with Dan Rebellato, she made a comparison between the experience of psychosis and her own formal experimentation:

If I were psychotic I would literally not know the difference between myself, this table and Dan [...]. They would all somehow be part of a continuum, and various boundaries begin to collapse. Formally I'm trying to collapse a few boundaries as well; to carry on with making form and content one (Saunders 2002, 112).

However, this conviction that psychotic experience entails a breaking of boundaries is combined (or counterpointed) in Kane's thoughts with the absolute necessity of interpersonal connection. In an interview with Nils Tabert, she describes madness in strikingly Cartesian terms, as 'the split between one's consciousness and one's physical being,' for which the only solution 'is to connect physically with who you are emotionally, spiritually and mentally' (Saunders 2002, 113).⁴² The task of anyone directing the play, therefore, is not to resolve this apparent contradiction, but to allow it to be embodied – a split between consciousness and physicality

⁴² This philosophical split is itself the source of problematic approaches to mental illness in actor training, as will be seen in Chapter 3 below. However, Kane's non-naturalistic aesthetics serve to at least partially alleviate these risks, as they refuse the kind of stable characterisation or unitary identity implicit in the Cartesian *cogito*.

results in a dissolution of the split between self and space. The productions to be discussed here demonstrate the strength of the tendency to collapse the openness of postdramatic approaches to space into the immediately legible spaces of dramatic theatre – where the ‘external reality’ is implied to be the transparent, abstract space which, as Lefebvre demonstrates, actually conceals the ideological processes which produced it.

In the first two productions, directed by James Macdonald and with set design by Jeremy Herbert, this sense of disorientation was achieved by placing a huge mirror, slanted towards the audience, behind an anonymously minimalist set. For Graham Saunders, this made the already cramped Jerwood Theatre Upstairs feel similar to ‘a small attic room’ (2002, 115), but the effect of the mirror is not simply to physically reduce the amount of space available, but also (paradoxically) to increase the *sense* of space, while also doubling the actors, projecting them into a non-space beyond the bounds of the theatre itself. In addition to the commentary on ‘different states of consciousness’ (116) provided by this mirror, its specifically spatial and theatrical function cannot be overlooked.

For Lefebvre, ‘the mirror is an object in space which informs us about space, which speaks of space’ and which ‘introduces a truly dual spatiality [... arising] in connection with the (material) body/subject and the (material) mirror/object’ (1991, 186). As such, it speaks to the spatial and material grounding of psychic experience. In Macdonald’s production, the mirror allows the audience to experience a dual spatiality, positioning them within the process by which physical space is articulated into psychic space and vice-versa. This may be one reason why critics reported such a sense of release as, on the play’s final line ‘please open the curtains’ (2001, 245), the theatre’s shutters were opened, reconnecting the audience to the ‘real’ space of Sloane Square – by reorientating audience experience to the ‘non-theatrical’ outside space, the distinction between psyche and space, undermined by the dual function of the mirror, is reinstated.

The mirror also provides a link back to earlier constructions of madness as a fundamentally visible and legible condition, exposing them to critical evaluation. In Daniels’ plays, the ‘splitting’ device in *Beside Herself* notwithstanding, this ‘clinical’ approach to madness is maintained. Mental illness is reconceptualised as having its aetiology in the social realities of patriarchy rather than being an essential biological feature of femininity, but it remains within the logic of the visible. In keeping with Aston’s (2010) observations about the relationship between Kane’s work and earlier, more explicitly feminist theatre, both *Crave* and *4:48* radically resist this logic.

Instead of examining the social forces acting on an identifiable body, Kane refuses to be explicit about the body/ies to which the experiences presented are occurring. Although Saunders identifies ‘several narrative strands’ (105) in the similarly fragmented *Crave*, it is still hard to be sure how coherent these strands are – and the extent to which they are playing out in physical or psychic space: the odd moments of chorus (‘**C: LEAVE/A: COME BACK/ALL: STAY**’ [159], the alternating ‘yeses,’ ‘noes,’ and ‘*short one syllable scream[s]*’ [185-7]) complicate any attempt at individuation. Macdonald’s production of *4:48* emphasises that play’s even deeper ambiguity in characterisation, as the mirror ensures that even idea of a single, legible body to which an utterance can be attributed is undermined.

Other companies, however, have been less eager to embrace the radically unstable spatialities implied in *4:48*. An instance of this more conservative approach, which also speaks to the persistence of the asylum as representational shorthand for madness, is Polish company TR Warszawa’s production, first presented in the UK at the 2008 Edinburgh International Festival, and revived for the Barbican’s Polska! Festival in 2010. Dominic Cavendish’s brief description of the set in his review for the *Telegraph*, ‘lined with washbasins at the back, bisected by a transparent wall’ (2010), already suggests the difference between the two productions – we do not have here a radical experiment with stage space, but rather a return to the institutional trappings of the asylum, including surgical green tiles and clinical lighting.

Indeed, Sierz (2010), in a review of the production for *The Arts Desk*, compares the aesthetic and acting style to ‘being locked in a parody of a 19th-century [sic] asylum.’ The desire to confine the stage representation to a more or less well defined institutional space is linked to the naturalistic implication that spaces must be immediately legible. Of course, such a clear division between places of sanity and places of madness is antithetical to Kane’s conception of psychosis as the point at which ‘boundaries begin to collapse’ (Saunders 2002, 112) – and in order to maintain the security of the asylum walls, TR Warszawa are also compelled to re-write the script, dissolving the carefully paced structure of Kane’s text in the search for a coherent, linear narrative. While this approach provides a more immediate connection with the narrative excavated by the company, since we are clearly exploring the mind of Magdalena Cielecka’s character, it also removes the sense of disorientation created by the text’s refusal to attribute itself to any specific voice.

Rather than extending the text’s polysemic resonance, the insistence on narrative coherence mirrors psychiatric and psychoanalytic attempts to impart a transparent meaning to the experience of madness, akin to the desire of a medical voice in the play to pin down the ‘meaning’ of self-mutilation: ‘lots of people do [self-mutilate]. It relieves the tension.’ A patient

voice retorts ‘it does not relieve the tension [...I do it] because it feels fucking amazing’ (217). While TR Warszawa’s version of *4:48* succeeds in relieving the tension bound up in the text’s paradoxical structure, it does so at the expense of the play’s voice itself, treating madness as a tragedy as closely plotted and coherent as any Attic drama, without ever exposing itself to its spatial reality.

The asylum setting insulates the play, insisting that madness remain in its ‘proper’ place, and in so doing removes its danger, while reinscribing the trope of the beautiful, vulnerable, sexualised woman, who ‘begins pale, taut and angry and ends blank-eyed and half-naked’ as Sarah Hemming (2010) put it for the *Financial Times*. Cielecka’s experience is isolated from the outside world, frozen in a non-time of institutionalisation, and overtly related only to Kane’s own suicide. Innes argues that ‘the violence of Kane’s images is intended to destabilize sanity, to free the subconscious’ (2002, 536). This is a limited reading, attributing a Laing-esque anti-psychiatric valance to a play which is, at its core, terribly aware of the consequences of the place from which it speaks. However, the play does have the potential to draw the audience into its own logic as the boundary between self and other is challenged, for both performers and audience. In order for this to occur, however, the text demands a space in which form and content can combine.

Conclusions

If the previous chapter demonstrated the asylum as a key space both producing and produced by shifting conceptions of madness, the discussions of gendered spaces of madness in this chapter allows us to think in more specific ways about the interaction between the historical association of femininity and madness and the various stage spaces in which these associations have been explored and challenged. Earlier plays, under the influence of feminist scholarship, sought to undermine the mapping of the sane/mad binary onto the male/female binary. They explored the unstable psychiatric spaces resulting from deinstitutionalisation, and sought moments which could be turned to tactical advantage.

Later approaches, especially the formal and spatial experiments of Sarah Kane, responded to the ‘loss’ of feminism implied by the recuperative logic of postfeminist thought by turning to ‘postdramatic’ spaces and unstable bodies. In Kane’s plays, space becomes at once more central and more problematic as the madness of the characters inhabiting that space becomes more acute. By refusing to attribute a specific identity to the spaces of madness, Kane’s dramaturgy calls into question both the totalising logic of scientific and medical gazes, and the essentialist approaches to gender and madness implicit in earlier feminist discourses. When the potentials

for spatial disruption are grasped, these plays confront the audience with the proximity of madness by highlighting the futility of conceptions, categories, or spaces which attempt to keep it at arm's length. Following this notion of proximity, the next section of this thesis will explore the implications of what I will call the 'body on stage' in performances of madness, a body which has already begun to insinuate itself into the present discussion.

Section 2 – Staging ‘Mad’ Bodies

Having discussed the importance of spaces in the representation of madness on stage, it is important to note that body’s equally central role in the history of madness. In fact, it is impossible to disentangle the experience of space from the experience of *being a body*. But what is a body? Intuitively, I know the answer – my ‘fleshiness,’ the fingers typing these words, the legs folded under me on the chair, the sense that I would like a cup of tea. However, attempts to pin down these intuitive notions are inevitably frustrating. This is partly a result of the development of the Western philosophical tradition, within which ideas about embodiment remain caught up in the Cartesian notion that the body is simply the mechanical extension of our unified *res cogitans*. New developments in cognitive science, especially the turn to ‘embodied cognition,’ have both lent a new urgency to defining embodiment, and drawn attention to just how complex this apparently simple question can be.

Bodies

Defining embodiment

Tom Ziemke, a cognitive scientist with interests in artificial intelligence, noted in 2003 that ‘while many researchers nowadays agree that cognition has to be embodied, it is less clear so far what exactly that means [...] it is actually far from clear what kind of *body* (if any) is required for embodied cognition’ (1134). This is disconcerting: there is, for Ziemke, no necessity that embodied cognition requires a body. If this is the case, how can we think about embodiment at all? What meaning can the term ‘embodiment’ have if it can be used in such a way that it does not require a body?

The reason for Ziemke’s qualification, it emerges over the course of his article, is that ‘perhaps somewhat surprisingly, many discussions/notions of *embodied* [sic] cognition actually pay relatively little attention to the nature and the role of the body involved’ (1135). This is partly because it is taken as read that, in discussing cognition, the ‘body’ at stake is an organic body. Wilson (2002) offers ‘six views of embodied cognition,’ and her discussion places these six views in the context of ‘theories of human thinking’ and ‘philosophy of mind’ (625). These six views therefore all assume a model of what Ziemke calls ‘organismic embodiment,’ the idea that ‘cognition is not only limited to physical, organism-like bodies, but in fact to organisms, i.e. *living bodies*’ (2003, 1137). Due to his own interest in artificial intelligence, Ziemke is more concerned with the question of ‘what exactly it is that makes human or higher-animal cognition

particularly interesting' (1138) – a question which is dodged by simply asserting that cognition is *prima facie* limited to organisms.

In a discussion of the theatre, of course, we *are* perfectly within our rights to restrict our focus to the organic body. Actors are humans with human bodies, puppets are controlled by human bodies, and mechanical bodies on stage (be they automatons or moving lights) are controlled by humans, either directly or through prior programming. However, this restriction can only advance the discussion so far. Even within the limitations of the human body, the cognitive consequences of embodiment have been conceptualised in diverse ways; from 'situated cognition' which argues that cognitive activity is done in relation to physical stimuli, to 'distributed cognition,' in which 'the forces that drive cognitive activity [...] are distributed across the individual and the situation as they interact' (Wilson 2002, 630). The breadth of possible meaning can also be seen in comments made by John Lutterbie during a visit to the University of Kent in March 2014 – 'neuroscientists nod along when I talk about embodiment, until they realize that, while they see embodiment as the interaction between two neurons, I'm interested in how the whole body interacts with the world.'

Defining embodiment, then, is not a simple matter of asserting that the body is important, or that bodies in the theatre are involved in making meaning. Instead, it is important to recognise that the term has a wide range of uses, referring to anything from the fact that cognition has its basis in neurotransmitters and synapses, to Antonio Damasio's (2006) argument that felt emotions are central to decision making, to the experience of bodily pain and adrenaline having been struck by the body of an Other.

For the purposes of this discussion, processes of embodiment are conceived as belonging to an organic, human body. This body will be conceived in the fullness of its relationship with the environment within which it is situated. This does not require a 'strong' statement of distributed cognition, defined by Wilson as the idea that 'the information flow between mind and world is so dense and continuous that [...] the mind alone is not a meaningful unit of analysis' (2002, 626): as Wilson notes 'relatively few theorists appear to hold consistently to this position in its strong form' (630). However, the value of recognising the density of interactions between mind-body and world is that we can avoid notions of the mind as somehow external to the world. The mind-body and the world, in the model being employed here, exist as open systems which,

although they can be isolated in analysis, are, in practice, constantly causing perturbations to occur in each other.⁴³

Mad bodies and the theatre

As suggested by the above discussion of the feminist deprivileging of binary structures and Sarah Kane's complex interrogation of Cartesianism, and as will be explored in more detail later, madness cannot be conceptualised apart from embodied experience. There is a conceptual strand which connects the embodiment of madness to the Athenian origins of theatre. As Ruth Padel points out in her discussion of Attic tragedy, 'in ordinary fifth-century life, when people wondered what was going on inside someone, what mattered was that person's *splanchna*, "guts." [...] Psychology in tragedy's world has practically nothing to do with the head' (1992, 12-13). Although Greek medical theorists and philosophers also discussed the role of the head in psychology, what is important here is the 'holistic' approach implied by Greek concepts of health: 'Health is a *eucrasia* [good temperament] in accord with nature of the primary humours in us, or function of the physical capacities that is unhindered' (Galen 2006, 43).

To give one example of this holistic approach, the term *melancholia* (an excess of black bile) initially relates to any (normal or abnormal) excess, and this gradually tends towards a conception of psychic distress:

Melancholia, melancholikos: Greek writers use them of delirium or of anyone they think is full of black bile. The words begin to take on their extra tones of passion and madness in the late fifth century. Incorporated into Hippocratic humoral theory, they become psychological and ethical terms, moving towards that Renaissance vision of "melancholy" which compacts several categories of physiological, psychological, and moral damage (Padel 1992, 24).

This humoral theory of madness, which sees melancholia as a fundamentally *physical* (embodied) condition, is intimately connected to the most common approaches to the function of tragedy through *catharsis*. As Leon Golden points out, 'the view that Aristotle's concept of catharsis represents a process of purgation [...] has dominated scholarly discussion of the *Poetics* since [...] 1857' (1973, 473). Despite challenges to this conception, such as those set out by Golden himself, it is clear that the force of cultural association makes it difficult to discount the

⁴³ See a later part of this introduction for a more thorough discussion of the kinds of systems being envisioned here.

influence (if not the veracity) of this reading. Whether or not the aim of tragedy is to purge 'pity and fear,' the very association of tragedy with strong emotions (and, as Padel has demonstrated, with madness) suggests an important link between the theatre and discourses of madness.

In order to address the question of embodiment, I will offer an account which continues a dialogue with the thought of Henri Lefebvre and Michel Foucault, but which also opens these ideas up to concepts drawn from phenomenology and from the cognitive turn in theatre and performance studies in order to add a greater depth to our account of the theatrical event. Initially, I will demonstrate the continuities between concepts of space and concepts of embodiment by exploring the treatment of embodiment in Lefebvre's *Production of Space*. This involves discussing Lefebvre's own vexed relationship with phenomenological ideas, especially those of Martin Heidegger.

Following this, I will give an introduction to the influence of phenomenological thought in the theatre, and offer a critique of Bert States's (1987) suggestion that semiotics and phenomenology can provide a 'binocular' way of looking at theatre. Bringing my discussion of the body into dialogue with more recent developments in theatre and performance studies, I will then give a brief overview of some ideas drawn from the cognitive and affective sciences which can help clarify our thinking about the role of bodies (both of performers and audience members) in performance contexts.

Lefebvre, phenomenology, and performance

Lefebvre and the spatial body

Discussing the role of space and place in the theatre, John Lutterbie begins with a discussion of Lefebvre's approach to space, an approach he sees as limited:

Space is that which is produced and is therefore "readable." It is an analytical and theoretical concept that requires a certain distancing to be understood. Space is not something that is lived in the way that a rehearsal is lived in readying a performance. The equivalent of rehearsal in this analogy is place. To think of place as I am here requires a shift of perspective, from the analytical to the phenomenological, from the observance of experience to the living of experience. To raise the question of phenomenology is to raise the question of the body (2001, 125).

Lutterbie turns to the phenomenology of Maurice Merleau-Ponty at this point in his argument on the basis that ‘Lefebvre tends to negate the body in his work, which he sees as an ancillary concern’ (125). For Lutterbie, the body in Lefebvre is ‘an object in motion, rather than a moving being’ (126). It has already been shown, through the discussions of Lefebvre’s spatial triad (perceived, conceived, lived) in the previous section, that Lefebvre is more suspicious of the notion of ‘readable’ space than Lutterbie here suggests. Although it is true to say that, in *The Production of Space*, Lefebvre understandably foregrounds the spatial, a close reading of both this work and his later text *Rhythmanalysis* (2004) makes the direct association between a produced space and a necessarily readable space difficult to maintain.

Lutterbie sees the roots of Lefebvre’s alleged negation of the body in the Cartesian *cogito*, as well as Lacanian thought about the symbolic. However, Lutterbie in fact crucially misreads Lefebvre in his suggestion that ‘for [him], a child is separated “from its body because language in constituting consciousness breaks down the unmediated unity of the body”’ (126). Although Lefebvre does state this thesis, and attributes it to ‘Lacan and his followers’ (1991, 36), he introduces it with the phrase ‘some would doubtless argue,’ and goes on to critique it on the basis that, for its proponents ‘the pre-existence of an objective, neutral and empty space is simply taken as read, and only the space of speech (and writing) is dealt with as something that must be created. *These assumptions obviously cannot become the basis for an adequate account of social/spatial practice.*’ (36, emphasis mine). In misreading Lefebvre in this way, Lutterbie bases his critique on a view Lefebvre does not actually hold, and fails to engage with the broader thrust of Lefebvre’s approach to the body.

Indeed, in contrast to Lutterbie’s assertion that Lefebvre’s Cartesian heritage causes him to neglect the body, Lefebvre’s central concern in *The Production of Space* is precisely to undermine the philosophical and ideological approaches to space inaugurated by Descartes. Introducing his project, he refers to the impact of Cartesian thought on philosophical conceptions of space, and describes this impact in explicitly bodily terms:

With the advent of Cartesian logic [...] space had entered the realm of the absolute. As Object opposed to Subject, as *res extensa* opposed to, and present to, *res cogitans*, space came to dominate, by containing them, all senses and all bodies (1991, 1).

In other words, then, in seeking to recover space from the abstract and absolute world of Descartes’ thought (in seeking to move beyond space as empty and neutral), Lefebvre, first implicitly and, later in *The Production of Space*, explicitly, seeks to *recover* the body from a conception of space which reduces it to a geometrical object:

[F]or any living body [...] the most basic places and spatial indicators are first of all *qualified* by that body. The 'other' is present, facing the ego: a body facing another body. [...] Here external is also internal inasmuch as the 'other' is another body, a vulnerable flesh, an accessible symmetry (174).

However, while Lutterbie turns immediately to phenomenology in order to recover the body from its Cartesian neglect, Lefebvre (in characteristically dialectical fashion) seeks rather to find a way of thinking about the body which is able to move beyond the binary distinction between 'Descartes's body-as-object [and] the body-as-subject of phenomenology and existentialism' (195), a way of seeing the body as 'neither substance, nor entity, nor mechanism, nor flux, nor closed system' (196). This 'spatial body,' in common with space itself, contains inherent and constitutive (spatial) contradictions – 'between knowledge and action, head and genitals, and desires and needs.' This body 'has neither meaning nor existence when considered in isolation from its extensions, from the space it reaches and produces' (196) – it is both productive of and produced by space, both subject and object, both actor and acted upon. The failure to recognise these dyads as dyads, and the constitution of them instead of binary oppositions, is laid by Lefebvre back at the feet of the Cartesian mind/body split, which inaugurates the body as object, and moves from 'the space of the body to the body-in-space' (201).

Phenomenology: a brief overview

Before we turn to a more in-depth discussion of Lefebvre's own vexed relationship with phenomenology, it is important to be clear about what we mean by the term. Despite its appearance in the title of Hegel's *Phenomenology of Spirit*, phenomenology in the sense that the Western philosophical tradition usually understands it developed from the thought of Edmund Husserl. Evan Thompson, discussing the value of phenomenology in relation to more recent developments in the cognitive sciences, describes it as 'a philosophy of the lived body' (2007, 16). This is because it offers an approach to embodied experience which focuses on the nature, or quality, of that experience, rather than an empirical investigation of what it is that is experienced.

An approach central to phenomenology is the phenomenological reduction, although it must be noted that, as Heidegger says, 'there is no such thing as *the one* phenomenology, and if there could be such a thing it would never become anything like a philosophical technique' (1988, 328). Dermot Moran summarises Husserl's idea of the reduction as follows:

[A] radical shift in viewpoint, a suspension or bracketing of the everyday natural attitude and all 'world-positing' intentional acts which assumed the existence of the world, until the practitioner is led back into the domain of pure transcendental subjectivity (2002, 2).

The term 'transcendence' is used in the Kantian sense, referring to 'the modes or ways in which objects are experienced and known' (E. Thompson 2007, 21). To focus on subjectivity in this way is, for Thompson, to pay attention to 'the *ways in which things are given*' (21). In other words, rather than doubting the data provided by the senses as Descartes does, phenomenology recognises that our access to the world is only through these senses, and that conscious activity is necessary to engage with sensory experience.

In thinking about the theatre, the development of Husserl's thought by both Heidegger and Maurice Merleau-Ponty has provided the most fruitful seams of phenomenological investigation. Merleau-Ponty provides an especially important contribution to the debate, insisting that a phenomenological approach must necessarily engage with embodied experience. For Merleau-Ponty, a phenomenological engagement with the body challenges the body/mind dualisms which have tended to characterise Western philosophy at least since Descartes:

Hitherto the *Cogito* depreciated the perception of others, teaching me as it did that the I is accessible only to itself, since it defines me as the thought which I have of myself, and which clearly I am alone in having, at least in this ultimate sense. For the 'other' to be more than an empty word, it is necessary that my existence should never be reduced to my bare awareness of existing, but that it should take in also the awareness that *one* may have of it; and thus include my incarnation in some nature and the possibility, at least, of a historical situation (1962, xii-xiii).

Judith Butler (1988) draws on Merleau-Ponty's idea that the body is 'an historical idea' (1962, 154-173) in an early statement of her performative theory of gender, while Bert States (1987) sees in the phenomenological method of 'bracketing' a way of thinking about the experience of theatre apart from ideas of mimesis and signification. More recently, in the context of the 'cognitive turn' in theatre and performance studies, phenomenology has emerged as a useful counterpart to more empirical studies of 'brain science.' For Thompson, 'phenomenology can guide and clarify scientific research on subjectivity and consciousness' (2007, 16). Shaun Gallagher and Dan Zahavi highlight the phenomenological focus on experience embodied in Husserl's maxim 'back to the things themselves' (2001, 168). For Gallagher and Zahavi, the phenomenological approach can philosophically ground the work of cognitive scientists 'in a far

more productive manner than the standard metaphysical discussions of, say, the mind-body problem that we find in mainstream philosophy of mind' (Gallagher and Zahavi 2012, 11). Phenomenology offers a timely reminder that we experience the theatrical event as embodied beings, as well as providing a bridge from existing approaches to theatre and performance studies to the more recent discussions of the 'cognitive turn.'

Lefebvre and the phenomenological body

As Stuart Elden (2004) has argued convincingly, Lefebvre's work (especially in *The Production of Space*), in addition to its overt influences from Marx, Nietzsche and Hegel, also has a more covert, but equally central, relationship to Martin Heidegger. Elden suggests that Lefebvre's reticence in openly acknowledging the influence of Heidegger lies both in the political context of Heidegger's support for Hitler (89) and Lefebvre's relationship with the French Communist Party (91), in their status as philosophical contemporaries, and in Lefebvre's conviction that 'Heidegger's work is too abstract [...and] needs to be related to practice, to material conditions' (91). The possibility suggested by Lefebvre's engagement with Heidegger, then, is that of 'a left-Heideggerianism' (101).

These political concerns also contextualise Lefebvre's broader resistance to phenomenology. In his foreword to the 1958 edition of *The Critique of Everyday Life*, Lefebvre reproduces a letter 'from a young Marxist,' which reports accusations against the book by 'sectarian Marxists,' that Lefebvre is 'limiting Marxism to a sort of materialist phenomenology of the superstructures' (Lefebvre 2002, 54). In the light of these accusations against his early work, and their political thrust, it is unsurprising that, even in his most clearly 'embodied' late work, *Rhythmanalysis*, Lefebvre retains his ambivalence towards phenomenology:

A philosopher could ask here: 'Are you not simply embarking on a description of horizons, phenomenology from your window, from the standpoint of an all-too-conscious ego, a phenomenology stretching up to the ends of the road, as far as the Intelligibles: the Bank, the Forum, the *Hotel de Ville*, the embankments, Paris, etc.?'

Yes, and yet no! This vaguely existential (a slightly heavy technical term) phenomenology (ditto) of which you speak, and of which you accuse these pages, passes over that which quite rightly connects space, time and the energies that unfold here and there, namely **rhythms**. It would be no more than a more or less well-used tool. In other words, a discourse that ordains these horizons as existence, as *being* (2004, 18. Emphasis in original).

'Yes, and yet no!' – this exclamation is a good response to the suggestion that Lefebvre is in fact engaging in phenomenology. Yes, insofar as he is deeply concerned with the relationship of the body with the world, and therefore shares common ground especially with Merleau-Ponty (in addition to the relationship with Heidegger explored by Elden), and yet no, in that he refuses to accept the potential political consequences of this focus. In *The Critique of Everyday Life*, Lefebvre characterises these political consequences by suggesting that, despite the apparent focus on the everyday in phenomenology, this focus in fact results in 'the devaluation of the everyday [...] in favour of pure or tragic moments' (2002, 264). For Lefebvre, then, it is not phenomenology *per se* which is to be avoided, but rather any philosophy which at once obscures and props up the processes of production and ideology.

Given the importance of phenomenological thought in recent approaches to the role of the body in the theatre, it would not be appropriate to refuse their insights in order to maintain a direct relationship with Lefebvre's thought. However, it is important that, in paying attention to the body, we do not lose sight of the context within which that body is constituted, that we pay attention to Lefebvre's account of the risks of too close a focus on the body in itself, of losing the political significance of how the body is *thought*. In this model, madness emerges *between* bodies, *in* space.

Phenomenology and theatre: the limits of 'binocular vision'

One of the earliest attempts at a thoroughgoing discussion of the phenomenology of theatre is Bert States's *Great reckonings in Little Rooms*, which draws particularly on the phenomenology of Heidegger and of Merleau-Ponty in order (following Heidegger) to 'open a clearing within the topic of art itself where we can be free of certain biases of the mimetic theory' (1987, 5). In other words, States turns to phenomenology for the same reason as Lutterbie (2001, 125): to move from 'the observance of experience to the living of the experience.' Both moves draw attention to a potential limitation in thinking about the theatre – the excess focus on *signification* at the expense of what the theatre *feels like*: its *embodied* characteristics. This is, in fact, precisely the same problem Lefebvre sees in 'technocratic' accounts of space, which reproduce the 'illusion of natural simplicity' (1991, 29): the idea that space is transparent and legible.

I do not wish to dwell at length on States's project of 'phenomenal renewal' (1987, 13), which after all forms only one origin point for the reintroduction of phenomenology into theatre studies, but I do want to reflect on the implications of his famous suggestion that

phenomenology and semiotics ‘constitute a kind of binocular vision’ (8). At one level, this is a fairly commonplace statement of the fact that we rarely experience any phenomenon *solely* as signifying *or* phenomenal – the two modes of experience overlap but (as in Merleau-Ponty’s example of touching one’s hand touching an object [1968, 133]) never quite coincide. We oscillate between the *more symbolic* and the *more embodied*, without normally being aware of the shifts between the two.

However, following Lefebvre’s critical approach to phenomenology, it is important to note that States conceptualises phenomenology *as an optic*. That is, despite his desire to recover the theatre as an experience, of ‘the scene’ and ‘the actor,’ he conceptualises this experience as a primarily visual one, from ‘a theater seat in [his] mind’s eye’ (14). The risk is that, despite the desire to avoid the dominance of the sign, conceptualising phenomenology as primarily a way of *seeing* may replace itself all too quickly into the realm of the symbolic.

This is very different from Lefebvre’s account of embodied space, a space which is experienced through all senses, and of which the ‘basis or foundation [...] ground or background’ are smells, which ‘do not signify; they *are*’ (1991, 197-198). If we are to grasp the role of the body in the theatre, we cannot simply alter the terms in which we describe the visible, but instead must remember that space is accessed through the body, as well as being produced by it, and that the body consists not just of the senses of sight and hearing, but also of touch, smell, taste, proximity, empathy and any number of other difficult-to-categorise experiences which take place in and between bodies and which cannot be reduced to mere signification.

The scientific context

Between cognition and affect

The questions raised here of embodiment, and of the phenomenological relationship with the stage, are taken up in the cognitive turn, already alluded to in the definitions of embodiment above, as well as in the related turn to affect theory. Antonio Damasio (2006) has provided evidence for the integrated nature of affect and cognition, using examples of patients who have suffered damage to the frontal lobes of the brain (an area associated with emotions) to show that, without emotional feedback, decision-making becomes badly impaired. Patients find it impossible to make choices to benefit their own future well being, even when they can demonstrate the reasoning processes which show a certain option to be superior.

As a result of the work of Damasio and others, the vexed question of the relationship between affect and cognition (see Zajonc 1984 on affect, Lazarus 1984 on cognition, and Plutchik 1987 on the ‘chicken and egg’ approach) is replaced by the more subtle question of how affect and cognition interact and affect each other. As Joseph Forgas argues, in a discussion of the ‘affect infusion model’ (AIM) of affective-cognitive integration:

The empirical evidence reviewed shows that there are close neural links and a complex, multifaceted, and bidirectional relationship between affect and cognition. Cognitive processes determine emotional reactions, and, in turn, affective states influence how people remember, perceive, and interpret social situations and execute interpersonal behaviors (2008, 99).

Another more recent approach to this question, rooted in evolutionary neuroscientific research, is the notion of ‘affective neuroscience,’ proposed by Jaak Panksepp et al. (2012, 1-16). This model sees the ‘Mindbrain’ as involving three evolutionary ‘layers.’ The evolutionarily earliest states are seen as primary, and are associated with the sub-neocortical areas of the brain. These include the most basic affective bodily states (hunger, thirst, pleasure, disgust), and are shared (at least) by all mammalian organisms. The secondary level includes those processes studied by early behaviourist psychologists (think especially of Pavlov’s famous salivating dog), and behavioural neuroscientists: conditioning, and habitual actions. The tertiary level involves ‘higher level’ cognition – thinking, rumination, and the experience of free will. The key insight of affective neuroscience, however, in common with the ideas of Damasio and Forgas, is that, despite this ‘stratified’ view of cognitive-affective processes, they are, in practice, integrated:

[I]n order to understand the whole Mindbrain, one has to understand the evolutionary stratifications within the central nervous system, and to recognize how functions that emerged first i) retain a substantial degree of primacy in spontaneous behaviours, ii) govern the mechanisms of learning (e.g. the unconditioned stimuli and responses behaviourists use to control animal learning are typically affective in nature), as well as iii) motivating higher (tertiary-process) reflective decision-making processes — cognitive choices that integrate affective states within the informational complexities of the world (2012, 8).

Dynamical systems

One way of conceptualising the interaction between affect and cognition is through a figurative employment of the mathematical concept of dynamical systems theory (DST). A dynamical

system is characterised by Marc Lewis as ‘the emergence of novel patterns or structures, the appearance of new levels of integration and organisation in existing structures, and the spontaneous transition from states of lower order to states of higher order’ (2005, 137). In the interaction between cognition and affect, we can look to the ideas drawn from DST to think about how altered affect can alter cognition and vice-versa. A dynamical systems approach can also suggest how interactions between affect and cognition might lead to the emergence of new cognitive-affective states. J. A. Scott Kelso’s description of the three main elements of such a system can help us get a sense these interactions:

The central idea is that understanding at any level of organization starts with the knowledge of basically three things: the parameters acting on the system (which are sometimes equated with the term *boundary conditions*), the interacting elements themselves (a set of primitives), and the emergence or mode (cooperativities) to which they give rise (1995, 18).

While the interacting elements remain stable and predictable, the emergence also remains stable. When there is a change, or ‘perturbation,’ in the interacting elements, the emergence also changes. Dynamical systems, being based on a tripartite structure, have affinities with Lefebvre’s spatial triad in facilitating a move away from binary oppositions (space vs. place, affect vs. cognition). Building on the notion of ‘thinking in threes,’ proposed by Shaughnessy (2014, 18-24) as an extension of Barnard’s (2004) bridging paradigm, this connection is valuable in working between academic disciplines. Paying attention to the interactions *between* concepts can help us to observe links and similarities between the continental philosophical tradition, contemporary cognitive and neuroscience, and performance studies. Dynamical systems provide an apt metaphor for these interactions.

Returning to the question of affect and cognition, it is crucial that those of us working in theatre and performance take into account the research suggesting both these processes are thoroughly embodied. George Lakoff and Mark Johnson (1999), among others, have drawn attention to the wide-ranging implications of this discovery for the way we think about thought itself. Lakoff and Johnson express the challenge posed to Western philosophy as follows:

These findings of cognitive science are profoundly disquieting in two respects. First, they tell us that human reason is a form of animal reason, a reason inextricably tied to our bodies and the peculiarities of our brains. Second, these results tell us that our bodies, brains, and interactions with our environment provide the mostly

unconscious basis for our everyday metaphysics, that is our sense of what is real (1999, 17).

When the integration of cognition and affect, as demonstrated by Damasio and Panksepp, is considered together with the integration of both cognition and affect with embodied experience, we get some sense of the complex interrelationships which shape our interaction with theatre, whether as performers, spectators, or, as in explicitly 'participatory' performance forms, something in between.

As an example, consider the production of *The Trial*, by Belt Up! theatre company. Seeing this at the Edinburgh Festival Fringe, I was aware that the company's technique was 'immersive,' that I would not be sitting passively in a folding seat. However, waiting for the doors to open, talking to friends, there was a sense of excitement and expectation which remained fairly stable while the queue was still. As the queue started to move, the sense of expectation increased, to which was added a small amount of trepidation on realising that we were being ushered through what was apparently the door to the theatre one at a time.

The feeling of trepidation also increased as I approached the door, until I stepped through – and was roughly blindfolded from behind and led by the hand into and around the space. At this point, the initial emergence (excitement, expectation) completely dissolved into disorientation and fear. My sense of balance (or lack of it) came into focus, and time seemed to slow down as I was forced to pay close attention to each movement I made, while struggling to make the small amount of light coming through the blindfold resolve itself into shapes.

Once the blindfold was removed, and I was left standing in semi-darkness with the rest of the audience, my heart rate slowly returned to normal, and my fear ebbed away – after all, it was only a (particularly unusual) play. Cultural cues told me that I was safe, and allowed me to return to a more-or-less neutral state relatively quickly. However, the unusual arrangement of performers and audience, and the constantly changing viewpoint as we were shepherded around the space by the company, ensured that I did not fully regain my more neutral state prior to the performance until my friends and I were safely outside, discussing our experiences.

The remaining chapters of this thesis will suggest some ways of thinking about the intersections between the body on stage and the performance of madness, in dialogue with the emerging paradigms drawn from the cognitive and neurosciences in addition to those approaches from continental philosophy already introduced. Chapter three contributes to discussions about the *ethics* of performance. This chapter shares with many other approaches to the question a

foundation in the ethical philosophy of Emmanuel Levinas, but differs from more established paradigms in proceeding from his replacement of ontology with ethics at the foundation of philosophy, rather than from the 'face to face' encounter. Examining modes of actor training, and how actors talk about 'acting mad,' I propose that any account of the ethics of 'acting mad' is incomplete without first thinking about ethical spectatorship.

Chapter four stages a return to the concerns of the first section of this thesis, examining the role of the body in performances which appropriate psychiatric history. This chapter focuses on Anna Furse's feminist retelling of the origins of psychoanalysis in *Augustine (Big Hysteria)*, a very physical performance which uses psychiatric case notes as the basis for its choreography. However, taking a cue from Freud's 'return of the repressed,' this discussion takes place in dialogue with the productions of *Marat/Sade* discussed in chapter one, since the different ways in which the three directors handled similar material helps to shed some light on Furse's play.

The final chapter brings our discussion up to date, examining two very different approaches to staging madness in the twenty first century. Bringing a pared down, solo autobiographical performance (*Head Hand Head* by Laura Jane Dean) into dialogue with a piece of 'physical theatre' employing puppetry and surreal imagery (*The Fantasist* by Theatre Témoin) provides a way in to think about contemporary trends in the representation of madness. Both performances aim to provide insight into the experience of a specific, diagnosed mental illness, but their contrasting aesthetics allow us to focus on the status of subjectivity and 'objecthood' in performances of madness.

Chapter 3

Acting, embodiment, and ethics

The introduction to this section demonstrated the shared concern with the body in both Lefebvre's approach to space and theatre and performance studies. It also suggested some points of connection between Lefebvre's work, phenomenology, and cognitive science, and offered the language of dynamical systems as a way to think about these interactions. This chapter will explore how considering the body in discussions of acting can help us think about the ethical questions of representing madness on stage. In order to do this, I will look at three related issues: how theorists of actor training have conceptualised acting and actors themselves, some potential vulnerabilities associated with acting, and how these issues might help us look again at the ethics of the body on stage. I use the term 'the body on stage' to refer to any situation in which the body of the Other is framed, in some way, as part of a performance.

Examining these questions reveals the continuing influence of Cartesian body/mind dualism in some twentieth and twenty-first century approaches to (character) acting. This dualism interacts with and supports a widespread cultural assumption that actors inhabit a borderland between sanity and madness. In this chapter, I will suggest that acting challenges the Cartesian body/mind division, and that vulnerability is central in both acting and actor training. Both the challenge to Cartesian ontology, and the centrality of vulnerability, necessitate an ethical approach which pays attention to the Other. As a way to think about such an ethics, I propose a reading of Emmanuel Levinas's work which builds on a recognition of the status of the body in theatre. This reading conceives of the ethical not as something essentially present in the theatre, nor as something in which the theatre can take no part, but rather as something which emerges in the interaction between an ethically engaged spectator and a theatre which insists on the opacity of the body on stage.

Thinking of acting: dualism, theatricality, and the actor

Actor training and the antitheatrical prejudice

The discourse of antitheatricality (Barish 1981) provides an important context to these discussions. Although it can be traced back to Plato's expulsion of drama from his ideal city, this antitheatrical tendency finds perhaps its definitive British statement in the early nineteenth century with Charles Lamb's suggestion that Shakespeare should be read rather than staged. When thinking about the interaction between Cartesian ontology and conceptions of acting, it

is especially important that, in making this statement, Lamb proposes an implicit body/mind dualism:

I have heard much of the wonders which Garrick performed in this part; but as I never saw him, I must have leave to doubt whether the representation of such a character came within the province of his art. Those who tell me of him, speak of his eye, of the magic of his eye, and of his commanding voice: physical properties, vastly desirable in an actor, and without which he can never insinuate meaning into an auditory, - but what have they to do with Hamlet? What have they to do with intellect? In fact, the things aimed at in theatrical representation, are to arrest the spectator's eye upon the form and the gesture, and so to gain a more favourable hearing to what is spoken: it is not what the character is, but how he looks; not what he says, but how he speaks it (2003, 246).

For Lamb, the focus on Garrick's body (the eye and the voice) distracts from and reduces the 'real' (inner) Hamlet – what Hamlet 'is.' This both separates the body and the mind, and assumes that the content of the mind is the proper stuff of literature, infected by the body in the theatre. Indeed, Lamb goes further, and argues that not only is *Hamlet* reduced in performance, but that the representation of Hamlet actually lies outside the scope of acting. For Lamb, the qualities both actors and audiences prize have nothing to do with Hamlet, or the intellect. Lamb's view is extreme, but this kind of antitheatrical prejudice is so widespread that it is worth exploring approaches to the body in theatre for traces of similar attitudes.

One place to start exploring the body on stage is in the tradition of acting which emerges from Stanislavsky's 'system,' an approach based both in the body and in the emerging science of psychology. Barish draws attention to a possible anti-theatrical impulse in Stanislavsky's thought, noting that, for Stanislavsky, the term 'theatrical' is negative, meaning 'conventional in the bad sense' (1981, 156). Indeed, Stanislavsky's criticisms of received (conventional) notions of tragic acting are very similar to those of Lamb, since they suggest that physicality can detract from the substance of tragedy:

Eyes starting with horror. The tragic mopping of the brow. Holding the head in both hands. Running all five fingers through the hair. Pressing the hand to the heart. Any one of them is at least three hundred years old.

Let us clear away all of that rubbish. Clean out all of that play with your forehead, your heart and your hair. Give me, even if it is very slight, some action that has belief in it (1989, 139).

However, Stanislavsky does not refer simply to an inner state, but rather to an *action* containing belief. In other words, far from positing the radical separation between internal being and external action, Stanislavsky insists that the two must be more fully integrated. To unpack this, we need to look at another moment in *An Actor Prepares*, where he elaborates on the connections between gesture and psychology:

In every physical objective there is some psychology and vice versa. You cannot separate them. For instance: the psychology of a man about to commit suicide is extremely complicated. It is difficult for him to make up his mind to go over to the table, take the key from his pocket, open the drawer, take out the revolver, load it and put a bullet through his head. Those are all physical acts, yet how much psychology they contain! Perhaps it would be even truer to say that they are all complicated psychological acts, yet how much of the physical there is in them! (121).

Stanislavsky here demonstrates the logical necessity of an intimate connection between internal and external states, and in doing so undermines Lamb's Platonic conception of acting – there is psychology in the physical, and physicality in the psychological. Later, using the example of Lady Macbeth's hand washing during her sleepwalking scene (148), he notes that tragedy is not composed of grand gestures and *Grand Guignol*, but rather of the interplay between psychological depth and physical simplicity.⁴⁴

Despite Stanislavsky's attempts to take into account the whole, embodied person in his training system, not all those who claim his influence have maintained this model. Jonathan Pitches notes:

⁴⁴ This notion of the interplay between psychology and gesture is supported by recent scientific approaches which see spontaneous emotional expression as multimodal – emotions are expressed not just through individual expressive modes (tone of voice, language use, facial expression, gesture, posture) but also through a combination of these modes. Interestingly, Bänziger and Scherer (2007, 481), in an argument for the creation of a multimodal corpus of emotion portrayals, see it as uncontroversial that 'actors can and should be encouraged to produce believable expressions by using acting techniques that are thought to stir genuine emotions through action.'

As has been well documented in the past, one of the key problems in the American tradition of Stanislavskian acting is the thirteen year gap in the publication of *An Actor Prepares* (1936) and *Building a Character* (1949), and the resulting schism in the teaching of Stanislavsky's actor training. Interestingly, this is the very same schism Descartes was creating with the *cogito ergo sum* debate, the annexation of 'thinking thing' from 'extended thing' – we might say of 'thinking actor' from 'external actor' (2006, 21).

While practitioners such as Meyerhold (and, in the United States, Stella Adler) pursued an extensive programme of physical exercises, Lee Strasberg's incorporation of Freudian ideas pushed acting further into the emotions. This move to the emotions entailed a move away from Enlightenment ideals of pure rationality (Pitches 2006, 20-21), while simultaneously emphasising the division between the body and the mind. Although, for Stanislavsky, the actor is a 'psycho-physical' being, for those who came after him, different social pressures, and limited access to certain texts, ensured the focus on one element of the Cartesian binary at the expense of the other, and hence an entrenchment of the binary itself in much actor training.

Cartesian dualism: an overview

Before moving on to look at the consequences of this binary for our thinking about acting, it is important to give a brief overview of Descartes' philosophy, which is founded on radical skepticism. He states at the opening of the first of his *Meditations on First Philosophy* that he will 'devote [himself] seriously and without encumbrance to the task of destroying all [his] former opinions' (2008: 13). In order to do this, he proposes the existence of an 'evil spirit' who has 'devoted all his efforts to deceiving [him]' (16). Through a process of examining what can be known when all is thrown into doubt, he arrives (in the Sixth Meditation) at the position now known as 'substance dualism,' the statement of which is worth quoting at length:

Now, first of all, I observe here that there is a great difference between the mind and the body, in this respect, that the body is of its nature endlessly divisible, but the mind completely indivisible: for certainly, when I consider the mind, or myself insofar as I am purely a thinking thing, I can distinguish no parts in myself but understand myself to be a thing that is entirely whole and complete. And although the whole mind appears to be united with the whole body, if the foot is cut off, or the arm, or any other part of the body, I know [*cognosco*] that nothing is therefore subtracted from the mind (60-61).

For the current discussion, the most important element of this is the idea that ‘I can distinguish no parts in myself – the self, for Descartes, is indivisible, the *res cogitans*, or ‘thinking thing.’ This is what remains when all else is thrown into doubt. Although it is possible that an evil genius is conducting a deception on a grand scale to deceive the thinker about sense data, there has to be something to be deceived, of a different substance to that which is thrown into doubt (the *res extensa*, or sensing body itself).

The implicit Cartesianism of Lee Strasberg’s approach to acting can be found in his suggestion that the most important thing for the actor is to ‘find a believable core, an essence in the part that can be done’ (Strasberg and Schechner 1964, 130). Whether the actor is conceived as a dualistic being or not, the *character* is: when actors have difficulty, for example, understanding why Othello would believe Iago’s deceptions, Strasberg’s answer is that the actor has not yet discovered the core of the character – his *res cogitans*. Indeed, when on stage, this division is absolutely necessary, since the actor’s body is simply the *res extensa* through which the character’s *res cogitans* interacts with the world.⁴⁵ This dualism will become important later in this chapter when we come to look at how actors talk about their own work. First, however, continuing with Strasberg’s approach to acting, we will look in more detail at the ‘affective memory’ exercise, especially in relation to psychiatric history.

Lee Strasberg’s Cartesian Hysteria

Building on Stanislavsky’s appropriation of Ribot’s idea of affective memory, Strasberg describes a technique for allowing the actor to remember an emotion, and hence to embody it on stage. In an interview with Richard Schechner, Strasberg maintained ‘the emotional thing is not Freud, as people commonly think. Theoretically and actually it is Pavlov’ (1964, 133) – in other words, the aim is not to re-experience the emotion, but to train oneself to remember it in the presence of certain cues (Stanislavsky’s ‘given circumstances’). There is no reason to dispute Strasberg’s claim that he was more influenced by Pavlov’s behaviourist psychology than Freud’s psychoanalysis – indeed, Paul Ekman’s research into the causes of emotion suggests that training oneself to experience a specific emotion is possible at least in theory. Ekman (2004) suggests

⁴⁵ There are also, perhaps surprisingly, traces of Lamb’s Platonic objection to the theatre in Strasberg’s descriptions of acting. For example, in conversation with Richard Schechner, Strasberg notes a difference between his technique and Stanislavsky’s ‘magic “if”’: ‘[Vakhtangov] places the aesthetic intention first and then uses the technique as a way of carrying out the aesthetic intention. When that is not done, often, even in Stanislavsky’s productions, the work makes the reality descend to the level of the actor, rather than helping the actor to ascend to the level of the character’ (1964, 129). While not as extreme as Lamb’s condemnation, there is still a sense that the actor, as an embodied human being, falls short of the ‘ascended’ state required for Art.

nine mechanisms for 'accessing' or 'turning on' emotions and four of them, 'memory of a past emotional experience,' 'imagination' 'talking about a past emotional event,' and 'voluntarily making the facial expression' associated with the emotion (133), offer the possibility of conscious control. For Ekman, one of the functions of these consciously controllable mechanisms is to allow reorganisation of our automatic responses. However, as David Jackson (2014) notes, the existence of these mechanisms, and their possibility of adapting some emotional triggers, also suggests potential value to actors.

Despite the possibility of a Strasberg-derived 'Method' without direct psychoanalytic input, a 'film-strip' of images in the paperback edition of *A Dream of Passion* (1988), which shows Strasberg conducting an 'affective memory' exercise with his wife Anna, suggests at least a *dramaturgical* relationship with psychoanalysis. Jonathan Pitches describes the scene as follows:

Strasberg, the teacher/analyst, is seated off stage, outside the view of the actress but still in the view of the audience. At one and the same time he is both encouraging the regression of his actress and offering a commentary on it to his spectators, offering private pain as a public spectacle (2006, 103).

For Pitches, this scene emphasises the ethical questions raised by the cultural associations between 'Method' techniques and psychoanalytic techniques. The staging of the 'affective memory' exercise is clearly derived from the analyst's couch, but rather than taking place in a private room, it takes place on stage.

In the current discussion, however, these photographs have a different significance. While Strasberg argues that 'to be carried away is hysteria' (1964, 135), the scenography of the affective memory exercise has significant echoes Charcot's 'hysteria shows' at the Paris Salpêtrière. For both Charcot and Strasberg, the female body is treated as almost a puppet, an inert canvas on which the male genius may trace his understanding of the human mind, emphasising his own rationality by contrast to the irrational bodily contortions of his female assistant/prop.



Figure 2: Anna Strasberg during an 'affective memory' exercise.



Figure 3: André Brouillet, *Une leçon clinique à la Salpêtrière* (1887)

Both Strasberg and Charcot claimed to be working for the benefit of their female 'co-stars,' improving their ability to act or their hysterical symptoms respectively. Despite Strasberg's claim that the affective memory exercise (in general) 'didn't give any harmful results' (133), however, Cheryl McFarren suggests that contemporary brain science, in addition to the more established field of trauma theory, gives reason to be wary of such techniques. For McFarren:

[T]he Affective Memory exercise potentially activates the physiological experience of hyper-arousal or dissociation in those who have previously sustained traumatic events. [...W]hen we acknowledge the prevalence of trauma and its lasting effects upon both the psyche and the brain, we must re-think the unilateral use of the Affective Memory exercise (2004, 199).

An intuitive awareness of these potential risks may also account for the perception of actors in general as emotionally unstable. Lorna Marshall (2008, 69), a physical actor trainer at RADA summarises this perception as follows: 'performers are self-indulgent, or are weird, edgy, slightly

unbalanced individuals, preferably neurotic' (Marshall 2008, 69). There is certainly something unusual about the cognitive processes described by actors when they discuss their techniques, and the ways in which they describe it further trouble the Cartesian binary.⁴⁶

David Suchet, Mark Rylance, and the divided *res cogitans*

In order to think in more detail about the processes of acting, and how they interact with the discourses of antitheatricality and Cartesian dualism, I will examine descriptions of characterisation by two well-known actors, Mark Rylance and David Suchet. These examples have been chosen for their similar status as well-respected actors, despite their contrasting approaches to the process of acting itself. Both actors were trained at prestigious 'classical' actor training schools (Rylance and RADA and Suchet at LAMDA), whose curricula offered physical, vocal and character training. In addition, both have spoken at length about their approach to acting.

Suchet is well renowned as a character actor, most associated with going to great lengths to produce a characterisation of Agatha Christie's Hercule Poirot for the British television series. Rylance, on the other hand, has been more generally associated with stage acting. Rylance is also often presented in the media as something of an eccentric: a 2011 article on the *Independent* newspaper's website (Sharp 2011) includes the heading 'Method and Madness,' and speaks of his tendency to stay in character between performances, and his belief in ley lines. Both actors, therefore, take the process of characterisation very seriously, and see the construction of a character as crucial to their work. However, the different approaches they take to this work helps to bring some of the issues in the present discussion into sharper focus.

Describing the experience of playing Timon in *Timon of Athens* at the Young Vic, Suchet draws attention to the potentially frightening consequences of blurring the distinction between self and character:

[Timon] is a very, very difficult and complex role, he actually goes mad. And a dear friend of mine, who was a psychologist, came to see the show, and he came backstage afterwards and said [...] 'you can't do that every night and not get out of character [...] you'll drive yourself crazy.' I said 'I am out of character, what are you talking about? [...] He said 'what's your birthday? What's your wife's birthday? [...]

⁴⁶ The question of the potential risks involved in actor training will be taken up in section 2 of this chapter, which discusses Mark Seton's idea of 'habitual vulnerability.'

What's your address? [...] I couldn't remember any of them, I just couldn't remember them, and he said 'there you are, you're not there, you're not present, now look in the mirror, get back to yourself, say who you are, go through your details, and come back to you.' (Young 2009)

For Suchet, the part of Timon appears to have, in some way, 'overridden' his own 'self.' One possible explanation for this phenomenon can be drawn from Nelson Cowan's idea of working memory. For Cowan, working memory is what allows us to operate in the world at all (2005, 155-156) – in order to understand a play, for example, we must be able to retain information which is not directly accessible to the senses (the previous events of the plot, the characters not currently on stage, the words which have just been spoken in the on-going dialogue). Cowan's approach to the actual mechanisms of working memory depends on the deployment of *attention*,⁴⁷ and he argues that 'attention can zoom in to process as little as a single item, or zoom out to apprehend up to about 4 independent items (i.e., chunks), though not much more than that' (158). In addition to these four items, there is an activated portion of long-term memory which enables stimuli to be compared to previous experience (158-61). In other words, the amount of material which can be held in working memory at any one time is limited, and the range of long-term memory activated is affected by both immediate stimuli and the focus of attention. According to this model, it is unsurprising that, having spent 3 hours inhabiting the stage-world as Timon of Athens, Suchet would find it hard to remember everyday details of his everyday life – they are so far from his recent focus of attention.

However, what is interesting here is not so much potential explanations for Suchet's experience, but rather the way in which he discusses it, and the way it relates to our understanding of the relationship between Cartesian models of self and the practice of 'acting mad.' Suchet makes a strong distinction between self and character, and hints at an experience of distress on discovering that, apparently, the distinction had become less well delineated than he had thought. This desire to maintain a distinction between one's self and the character also implies a

⁴⁷ The term 'attention' is used in a number of different ways in psychology and cognitive science. Indeed, Elizabeth Styles states that, although it may be expected that a book entitled *The Psychology of Attention* might offer a precise definition of the term, 'attention remains a concept that psychologists find difficult to define [...] "nobody knows what attention is" or at least not all psychologists agree' (2006, 1). In the context of Cowan's discussion, attention refers to a focus on particular 'chunks' of memory – it is a process internal to the mind. However, in psychology, the term more usually refers to a focus on external phenomena. Generally, whether attention relates to memory or external stimuli, 'attention is characterized by a limited capacity for processing information and [...] this capacity can be intentionally controlled' (1). This notion of attention can guide us here, although it is important to note that there is some disagreement about how far we can exercise control over our attention (think of being distracted by a loud noise, or experiencing intrusive thoughts), and whether the 'limitations' of processing are the same in conscious and subconscious thought.

belief in an indivisible 'self' similar to the Cartesian *res cogitans* – the act of playing the character must be clearly apprehended as an action done *by me*, on stage, for a defined period of time which 'I' control. The 'leaking' of the character beyond the bounds of the stage troubles this suggestion that 'I' am as I experience myself, and so must be discussed as though there are *two* 'selves,' my self, and Timon's self, which have to be distinguished in a binary way (*either me, or Timon*). The alternative is to recognise the limitations of a notion of an indivisible, disembodied self.

As mentioned above, Rylance is reputed to remain in character between performances. As a result, it is unsurprising that, describing why he proposed that the RSC took a production of *Hamlet* to Broadmoor hospital, he seems more comfortable than Suchet with recognising a continuum between himself and Hamlet:

I remember now feeling that Denmark is a prison and feeling that there was something of Hamlet in me that wanted to go there [to Broadmoor]. There was something – you know, if you do something eight times a week you take on the character's objectives and their desires and passions. They do infiltrate your own life again. And at the time I think it was largely unconscious, but there was in Hamlet a feeling that there are brothers of mine there, of wanting actually to go somewhere where there is chaos, utter chaos internally, and so I think in a sense he wanted to go and see if he had brothers there (2013, 29).

This description again troubles the distinction between self and character, drawing attention to the inevitability of some kind of ongoing effect from regularly playing a demanding role: 'you take on the character's objectives [...] they do infiltrate your own life.'

Although Suchet's psychologist friend would see this approach as risking madness, the narrative Rylance uses to negotiate the relationship between self and character has some elements in common with Gallagher and Zahavi's attempt to demonstrate a continuity between two conceptions of selfhood – that of the self as a narrative construction, and that of the self as an indispensable element of consciousness. Gallagher and Zahavi cite Paul Ricoeur and Charles Taylor as examples of the former tendency, which they summarise as the idea that 'who we are depends upon the story we (and others) tell about ourselves' (2012, 223). They cite Antonio Damasio as an example of the latter tendency, which they identify with classical phenomenology, and see as 'a self linked to the basic structures of experience and action' (227). In order to draw these two conceptions together, Gallagher and Zahavi suggest that the conception linked to Damasio and phenomenology can be properly called 'selfhood,' 'a

primitive form of self-experience or self-referentiality' (228). What has previously been called the 'narrative self' (in e.g. LeDoux 2002, 20), however, they would re-term 'personhood.' In other words, personality emerges as a conglomeration of previous experiences by the primitive self – and the primitive self only has access to these experiences through the body.

By contrast to Suchet's binary of 'in/out of character,' Rylance's narrative of infiltration recognises the continuity between the person playing Hamlet and the person describing the decision to stage *Hamlet* in Broadmoor. Despite the cultural importance of maintaining a distinction between 'Hamlet' and 'Rylance,' there is no feasible way to distinguish between the character of Hamlet and the person of Rylance, since the 'character' is a set of actions performed by the actor. Both actions on stage as 'Hamlet,' and actions offstage, are experiences accessed and performed through the same body, and integrated into the same memory-system. The experience of playing Hamlet is integrated into Rylance's 'narrative self,' so it is unsurprising that some of 'Hamlet's' perspectives are brought to bear onto 'Rylance's' future experiences. However, despite the differences between the narratives they use to conceptualise their process, both actors acknowledge the tension between the self on stage and off. Indeed, both indicate their concerns through a reference to madness, Suchet's 'you'll drive yourself crazy' and Rylance's 'utter chaos internally.' These concerns and tensions resonate with Lorna Marshall's concern about actors being perceived as 'mad.'

The cogito and the fear of madness

A potential explanation for these concerns can be found in the issues at stake in a debate between Michel Foucault and Jacques Derrida over whether Descartes's skeptical procedure represents a fundamental silencing of 'unreason'. In *The History of Madness*, Foucault makes a passing reference to Descartes, arguing that the Cartesian *cogito* breaks off the possibility of dialogue with madness by suggesting 'it would be mad to want to act the madman' (2006a, 558). In an attempt to demonstrate that Foucault's project itself is 'mad,' Derrida offers a subtle reading of this short section in dialogue with the *Meditations*. For Derrida, Descartes does not so much desire to silence madness and exclude it from the realm of philosophy, but rather to acknowledge its proximity, its participation in an 'economy' between 'reason, madness and death' (2001a, 75). In relation to the question of acting, however, the important point is that both Derrida and Foucault maintain the fundamental premise that there is *either* one thing (reason) *or* the other (madness) at any one time.

Derrida sees the Cogito not as something which must necessarily be apart from madness, but as a hyperbolic statement which 'is valid even for the maddest madman' (70). Crucially, however,

the Cogito can only be *communicated* if one is not mad: ‘philosophy is perhaps the reassurance given against the anguish of being mad at the point of greatest proximity to madness’ (72). Language, for Derrida, provides both the structure within which the Cogito can be expressed, and that which betrays the Cogito: ‘one must, in fact, not be mad if one is to reflect it and retain it, if one is to communicate it and its meaning’ (70). If madness is simply a case of thought which cannot speak for itself, language contains both the fear of madness and the inability to speak of it. This is why, for Derrida, Foucault’s project is itself mad, because an ‘archeology of silence,’ thus liberating madness, can only be achieved through language, which betrays itself and its subject in the act of being faithful to it.

If madness is cited in language as a kind of shield against madness itself, to stave off a ‘crisis in which reason is madder than madness’ (76), what might it mean for madness to be cited by actors when discussing their own practice of acting, only to be swiftly disavowed? Is it possible that madness must be cited and insulated against because the concept of naturalistic acting, of ‘living the part,’ challenges the Cartesian binary at a visceral level? When ‘acting mad,’ two states which are culturally supposed to be a simple binary (madness and nonmadness) appear to coincide within the same body: the phenomena described by Rylance and Suchet could not occur within the Cartesian scheme, unless they were mad. The desire to maintain a stable, Cartesian view of the self therefore requires that any apparent ‘grey area’ which destabilises the indivisible *res cogitans* be explained *as* madness.

These engrained binaries, however, do not reflect the understandings emerging from the scientific approaches to embodiment, cognition and affect we have examined so far. The argument that, ontologically, there can only be madness or nonmadness fails to take into account the fact that there is no universal agreement on what ‘madness’ actually consists of, or how it can be distinguished from other neurodiversities. The view of the brain as a dynamical system suggests that the constantly adjusting metastability of an attractor state is the closest the system can meaningfully come to being in a single, definable state.

In this view, ‘madness’ is not a discrete ontological state to live in fear of, but rather a spectrum or system within which all cognitive states can be plotted: from a rigorous, systematic ‘sanity’ which would be unnerving to most people, through the series of attractor states within the portion of the spectrum designated as ‘normal’ by medico-legal systems, to those states which are currently characterised as ‘mental illness’ either by the consensus of cultural norms or the diagnostic criteria of the DSM or ICD. It seems likely that acting takes place in the messy, unstable parts of the spectrum, involving attractor states consciously developed by processes of training and rehearsal. Not easily recognisable as ‘normal’ states by non-actors, or as

‘pathological’ states by the medico-legal system, the cognitive-affective processes which take place in acting actively resist the desire for a neat mode of classification.

Acting, vulnerability, and intercorporeal experience

Although acting offers a particularly vivid example of both how widespread and how limiting binary thinking can be, these problems are by no means limited to the world of theatre and performance. Antonio Damasio charges Descartes with being the source of blind spots within scientific research, stating that ‘the psychological consequences of diseases of the body-proper [...] are usually disregarded [...]. Even more neglected are the reverse, the body-proper effects of psychological conflict’ (2006, 251).

This chapter has so far explored the prevalence of dualistic conceptions of selfhood to examine the connection between the dualistic self, the process of acting, and the conceptual proximity of acting to madness. However, despite our recognition that the connections commonly made between acting and madness rely on an over-simplistic model of cognitive behaviour, Damasio’s charge against Descartes raises the question of whether acting may pose a threat in a different way. In the case of actor training systems which artificially separate mind and body, is it possible that such programmes (to adapt Damasio’s claim) do not take into account the psychological consequences of *training* on the body-proper, while the body-proper effects of *representing* psychological conflict are even more neglected?

Actor training and vulnerability

Sheryl McFarren (2004) cites the developing awareness of interactions between memory and trauma, and raises questions about the use of Lee Strasberg’s affective memory exercise in actor training. Mark Seton, an Australian theatre scholar, has identified a more thoroughgoing set of problems with the field of actor training (2004, 2010). He draws attention to a network of disciplinary technologies, which begins exert itself before an actor even enters drama school, and which functions through the identification and cultivation of qualities referred to as ‘skill,’ ‘talent,’ or ‘having “it”.’ Seton argues that this process has direct, embodied consequences for actors and acting students:

[U]nlike musicians and dancers who are becoming very conscious that their quality of embodied experience is crucial to their potential to have rewarding and sustainable creative practices, many actors are trained in unquestioning vulnerability

to do and become whatever a director requires, without questioning the impact it has on them as embodied persons (2010, 6).

The concept of vulnerability is derived from Seton's study of a number of actor training institutions in Australia. Seton notes the widespread employment of metaphors of colonisation, in which 'the bodies of actors and audiences alike are troped as barriers to be pierced in order to then be transformed and/or transcended' (12). A specific example of this is the comment of one acting teacher, who repeatedly told her students 'we prefer to seduce you rather than rape you' (5). For this teacher, and within this metaphorical landscape more generally, the process of training is understood as involving a power relationship within which the more powerful parties slowly mould the less powerful parties into shape.

Discussing the methodology of the doctoral thesis which formed the basis of this work, Seton notes that the concept of 'generalisability' is a contested one in the kind of ethnographic work he is engaged in (2004, 179). As a result, it is important to be wary of too easily moving from the specific institutions within which Seton conducted his research to a different national and institutional context. However, citing Alex Stewart, Seton notes that, while specific data cannot meaningfully be generalised, one can think usefully about 'the applicability of *insights* elsewhere' (Stewart 1998, 16).

For the present study, this means that, although the specific metaphorical language employed (seduction and rape) can really only tell us about the practices in the particular institution Seton studied, the more general insights about vulnerability may be applicable. Given McFarren's work in the United States, Stanislavsky's concern with 'belief,' Strasberg's 'affective memory' exercise, and the distress discernable in Suchet's account of coming out of character, it seems reasonable to suggest that Seton's general point that acting involves becoming vulnerable in some way has applicability beyond the immediate context of his ethnography.

Docile bodies, Stanislavsky, and cognitive neuroscience

Indeed, although Seton does not make the link himself, his idea of vulnerability can be connected to Foucault's discussion of 'docile bodies' in *Discipline and Punish* (1977). Foucault argues that, under the influence of Newtonian and Cartesian models of the mechanical body (the *res extensa* in Descartes's terms), notions of the body as both intelligible and useful were married in the idea of docility. Foucault's briefest definition of docility is as follows: 'a body is docile that may be subjected, used, transformed and improved' (136). This docile body is therefore the body which is subject to 'discipline,' an 'infinitesimal power over the active body'

which ‘assured the constant subjection of its forces and imposed upon them a relation of docility-utility’ (137). For Seton, the actor’s ‘docile body’ is created, in part, by the student’s desire to *become* docile, to become vulnerable, since vulnerability is ‘misrecognised’ as talent, not only by students, but also (and more importantly) by teachers.

This tendency to encode vulnerability can also be found in Stanislavsky, who addresses the risks of failing to become vulnerable, of failing to allow oneself to be acted on by the power of the teaching institution, through the character of Grisha. Grisha ‘always argues with the director’ (1989, 103), and is often singled out for criticism. His confidence in his own approach is not seen as a virtue, but rather a moment of resistance through which the rest of the class can be further convinced of the importance of Tortsov’s techniques. As Foucault says elsewhere, power takes place ‘when there is a relation between two free subjects, and this relation is unbalanced, so that one can act upon the other, and the other is acted upon, or allows himself to be acted upon’ (Foucault and Bess 1988, 1). Grisha, as a narrative antagonist, serves to reveal that Tortsov’s power is linked to his own experience, his knowledge of the interactions between actor, text, director, psychology and physical action. Through his appeals to his own experience, Tortsov can refute the claims of the younger man, and argue in favour of his own disciplinary techniques. An example of this is when Grisha’s first attempt to act in front of Tortsov elicits a long response on the inferiority of the ‘mechanical acting’ Grisha has been trained in (Stanislavski 1989, 23-26).

When actor training is recognised as a disciplinary technology, in common with other pedagogical regimes, we can start to recognise the fact that any impact of training on the body of the actor will not only be felt in the rehearsal room or on stage. The action of any disciplinary structure cannot help but affect the individual’s entire mode of being in the world: soldiers are recognised by their habitually rigid posture, athletes by their muscle development. Rhonda Blair discusses the effects of training on actors in dialogue with the cognitive and neurosciences, drawing on studies which have shown physical differences in the brains of musicians to argue that ‘the neural biology with which we are born interacts with our environment and experiences to determine the particular way our individual set or neural paths – and, hence, our self – develops’ (2006, 171). These interactions are not limited merely to cognitive activity, or to specific events, but form and are formed by dynamic interactions between a number of factors: ‘feeling and consciousness, conditioned by culture, grow out of bodily schemas, which are the product of neural networks, which are themselves the result of various kinds of experimental and

cognitive memory' (172-3).⁴⁸ In other words, there is an intimate network of connections between (or a dynamical system encompassing) culture, memory, bodily action, and cognition, which affect and are affected by each other in complex and interdependent ways, resulting in the specific embodied experience of each individual – and, for Blair, 'teaching, training and rehearsal are in fact "brain modification"' (173).

Deleuze, time, and madness

The work of Giles Deleuze can provide a way of conceptualising these scientific insights in relation to time. Deleuze's work has been increasingly brought into dialogue with both theatre studies and the cognitive and affective sciences. Manuel DeLanda (2010) offers the most thoroughgoing exploration of Deleuze's work in relation to science and philosophy. There are also a number of edited collections which explore the interactions between Deleuze's thought and the philosophy of science more generally, including Peter Gaffney's *The Force of the Virtual* (2010), and a special edition of the journal *Paragraph* (Marks 2006) entitled "Deleuze and Science".⁴⁹

For the current argument, Deleuze's conception of time will provide one way of thinking about the connection between past experience of disciplinary technologies and the individual's embodied experience of the world. In his early work *Difference and Repetition*, Deleuze argues that time involves a synthesis of the past within the present, and leads to an experience characterised by expectation: event A occurs, and is usually, in our experience, followed by event B. As a result 'When A occurs, we expect B with a force corresponding to the qualitative impression of all the contracted ABs' (1994, 70). In other words, in experiencing something over and over again, it becomes more likely that we associate event B with event A. Philip Zarrilli, discussing the embodied experience of the actor, is understandably cautious about how far we can extrapolate from the extra-daily practices of actor training and rehearsal (2004, 664), preferring to locate his idea of 'non-ordinary, optimal, "inner awareness"' (663) firmly in the studio. However, it seems likely that, at the very least, the actor will experience a world shaped

⁴⁸ Blair is here drawing on Elizabeth Wilson's conception of bodily schema as 'a postural model of ourselves that is dynamic and which determines the *psychological* parameters of bodily posture and movement' (Wilson 1998: 171–2). This approach draws attention to our own motor capabilities, and how we interact with the spatial world in which we find ourselves. However, for Wilson, these schema are also affected by socio-cultural factors.

⁴⁹ In theatre studies, John Lutterbie's *Towards a General Theory of Acting* (2011, 164–167) provides one example of the value of Deleuze's work for thinking about the science of acting. In Lutterbie's attempt to lay the groundwork for a cognitive scientific approach to acting, Deleuze and Guattari's idea of 'lines of flight' from *A Thousand Plateaus* (2004) provides a structure for understanding improvisation.

by this embodied inner awareness insofar as any 'A' which is experienced in the studio may also be experienced in everyday life.

The extent to which the 'brain modification' of the studio also has consequences in everyday life is the extent to which Seton's notion 'habitual vulnerability' has the potential to harm the actor's 'self.' This can provide another model for the relation between acting and madness noted by Lorna Marshall above, and discussed by Suchet and Rylance. Seton observes that, across numerous sites of actor training, 'vulnerability emerged as the quality most valued and required as a gestural symbol of commitment to the discipline of acting' (2010, 13). As a result, actors learn that, in order to demonstrate their commitment, they must make themselves vulnerable, and that increased commitment is demonstrated by increased vulnerability. In Deleuze's scheme, not only does the actor-in-training learn to react positively to requests to make herself vulnerable, but the teacher comes to expect that the request will be greeted with a display of vulnerability (a 'gestural symbol of commitment').

Seton argues that the intercorporeal nature of both actor training and performance is 'misrecognised' as 'individual talent' in drama schools – what is conceptualised as inhering in the individual ('talent') actually emerges in the embodied interaction between performer and trainer, or performer and audience. This misrecognition implies a Cartesian model of selfhood: to be 'vulnerable' requires the decoupling of the *res cogitans* from the *res extensa*, an impulse captured in the language of 'don't think, just do' often encountered in training contexts. This corresponds with Seton's assertion that this vulnerability, which is misrecognised as 'acting skill,' is produced 'as a consequence of interactions *between* participants' (16). Just as the proximity of vulnerability draws attention to the necessity of an ethical reflection on the processes of actor training and conceptions of acting, the centrality of interpersonal relationships in these contexts begins to suggest a way of modeling this ethics. The following section will explore these questions in more detail.

Embodied ethics

Ethical reflection is essential to any discourse or practice engaged with the experiences of other (Other) human beings, and so especially both to actor training (as discussed above) and the actor-audience relationship. These situations involve a relationship of power, the terms of which may not always be clear-cut or obvious. The 'ethical turn' in Continental philosophy, and more recently in theatre studies, has been influenced greatly by the work of Emmanuel Levinas, a Lithuanian Jewish writer whose phenomenologically inflected ethics places the face of the Other at the heart of ethical reflection.

The term 'ethics' has a wide range of potential meanings, and so must be clearly defined. In this discussion, ethics is neither what Rancière describes as 'the subsumption of all forms of discourse and practice beneath the same indistinct point of view' (2010, 184), nor an absolute *morality*, a legalistic code of behaviour within which certain actions are in every case unconscionable, and open to censure. James Thompson, discussing applied theatre practice in *Performance Affects*, provides a useful distinction between the ethical, 'how things are done,' and the political 'why things are done and what the problems with those aspirations may be' (2010, 6).

For Levinas, however, ethics is more basic even than 'how things are done.' In the essay 'Ethics as First Philosophy,' Levinas (1989a) claims that the philosophical underpinning of human violence, and particularly the Holocaust, is the primacy of ontology, which is focused on the self. This aspect of Levinas's thought will be discussed in greater detail below, but the key point is that when ethics, rather than ontology, is treated as 'first philosophy,' as the ground of philosophical reflection, then the basic questions of philosophy change: 'The question par excellence or the question of philosophy. Not 'Why being rather than nothing?', but how being justifies itself' (1989a, 86). The focus of philosophy is shifted from the self (how do I know that I am?) to the Other (does my being prevent the being of an Other? If so, how can I justify my being?). In terms drawn from the title of Levinas's *Totality and Infinity* (1979), ontology seeks 'totality,' a knowledge that erases the Other, while ethics tends towards 'infinity,' that which recognises that the Other exceeds the known.

In order to provide an ethical reflection on the questions discussed so far in this chapter, I will offer a new reading of Levinas's ethics for the theatre. The first stage of this reading is a critique of the ways in which theatre scholars have used Levinas's ideas. Having given an overview of some key appropriations of Levinas's thought, I will examine these approaches in the light of Levinas's own views on aesthetics. Those who have used Levinas in their claims for a theatrical ethics assert, to varying degrees, the importance of bodily co-presence in the theatre. However, Levinas's essay 'Reality and Its Shadow' (1989b) seems to suggest a compromised conception of theatre, more similar to that discussed by Philip Auslander in *Liveness* (1999). Building on this critique, I then suggest that, paradoxically, the apparent antitheatrical strand in Levinas's thought is precisely what offers an ethical response to the questions of embodiment discussed earlier in this chapter. By challenging Heidegger's focus on Being, Levinas offers a phenomenology which is able to illuminate the tensions created by the interaction between actor training practices and latent Cartesian assumptions about the self. By replacing Cartesian ontology with Levinasian ethics, we can begin to think about what might characterise an ethical approach to 'acting mad.' I argue that one of the key advantages of Levinas's work is that it

allows us to think about how the spectator orientates herself towards the stage, rather than insisting that theatre itself is or can be straightforwardly 'ethical.'

What is at stake: body-presence, aesthetics and ethics

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 comment, from Nick Ridout's short book *Theatre & Ethics*, provides a good overview of the attraction of Levinas's ideas for theatre studies academics and theatre practitioners. The interest in Levinas bridges diverse modes and conceptions of performance. James Thompson, although offering a nuanced view of Levinas's argument which reduces the demand from infinite to finite (2010, 167), still turns to the concept of the face in drawing his argument for an *affective* rather than necessarily *effective* applied theatre to a close, seeing the face as 'the acute awareness of the body of the other as it impinges on our sense of self' (162). Peggy Phelan suggests a broader applicability for Levinas's ideas in her claim that if 'the face to face encounter is the most crucial arena in which the ethical bond we share becomes manifest, then live theatre and performance might speak to philosophy with renewed vigour' (2004, 577). There are also more nuanced appropriations of Levinas's work – Simon Bayly, discussing masking in relation to Duchenne's photographs of electronically elicited facial expressions, argues that theatrical representation complicates Levinas's conception: 'What a theatrical thinking offers [...] is that the function of the mask is not to hide the face as site of pure revelation of the individual soul but rather to reveal it as a complicated and complicating figure of appearance' (2008, 29).

What the above examples demonstrate is the extent to which Levinas's ideas have entered into the critical currency of performance studies, especially in discussions of the body. It is particularly noteworthy that Phelan should turn to Levinas, since she also provided a crucial perspective in favour of encounter (but without explicit reference to Levinas) in *Unmarked*, an argument for the distinct value of live performance as against mass media. Phelan states:

Performance's only life is in the present. Performance cannot be saved, recorded, documented, or otherwise participate in the circulation of representations of representations: once it does so, it becomes something other than performance. To the degree that performance attempts to enter the economy of reproduction it betrays and lessens the promise of its own ontology. Performance's being [...] becomes itself through disappearance (1993, 147).

Over the course of the 1990s, performance studies engaged in an interrogation of the notion of 'liveness,' and Phelan's argument for liveness as the fundamental ontology of performance was answered by Philip Auslander's equally strident counterargument. For Auslander, performance is not different in any definable ontological sense from other art forms:

Following [Walter] Benjamin, I might argue that live performance has indeed been pried from its shell and that all performance modes, live or mediatized, are now equal: none is perceived as auratic or authentic; the live performance is just one more reproduction of a given text of one more reproducible text (1999, 55).

The problem for those, like Phelan, who appeal to Levinas in support of the value of live theatre, is that Levinas himself would seem to agree with Auslander. For Levinas, 'the most elementary procedure of art consists in substituting for the object its image. Its image, and not its concept' (1989b, 132). In this model, art is fundamentally static, a process of substitution – and this is the case not simply for painting, or sculpture:

[I]n the general economy of being, art is the falling movement on the hither side of time, into fate. [...] We can then understand that time, apparently introduced into images by the non-plastic arts such as music, literature, theatre and cinema, does not shatter the fixity of images. That the characters in a book (or a play) are committed to the infinite repetition of the same acts and the same thoughts is not simply due to the contingent fact of the narrative, which is exterior to those characters. They can be narrated because their being *resembles* itself, doubles itself and immobilizes (139).

Levinas's ethics, as already noted, depend on displacing ontology from its position as the ground of philosophy, resisting attempts to 'grasp' the other by knowledge, a grasping which is already a gesture of violence and erasure. If the face of the Other is the primordial site at which ethics displaces ontology, then the theatre is the ontological gesture *par excellence*, since it demands that the spectator recognise (re-know) the character rather than the actor whose body is before her.

Jill Robins draws explicit attention to the antitheatrical strand in Levinas's thought by reading his theological work in the light of Jonas Barish's writing on antitheatricity. In *Difficult Freedom*, Levinas discusses Paul Claudel's approach to Biblical exegesis, objecting to the latter's (Christian) tendency to read the Old Testament as a mere 'prefiguring' of the New. Levinas writes 'we distrust this theater, this petrification of our faces, this character that our person would

embrace [...] we distrust all that which plays, in our lucid life, in spite of us' (1997, 121-122). In other words, by suggesting that the individuals discussed in the Old Testament are simply figures or types (King David is a 'type' of Christ, for example), Claudel's exegesis erases the historical being of these figures, and refuses to accept their Otherness. Robbins sees this 'distrust' not simply as a question of scriptural exegesis, but rather as a broader question of representation. What is at stake, in Robbins's reading, is the possibility of representation at all: 'to take on a character (*une figure*) is to risk *becoming* a figure, and thereby to lose what is human' (1999, 50).

Robbins probably overstates the problem, as her use of the phrase 'lose what is human' tends to suggest that this loss renders representation *unethical*. For Levinas, although art is 'inhuman' in its stasis, this stasis is neither ethical nor unethical – not having anything to do with the human it is rather, as Megan Craig argues, 'a-ethical: art is outside the alternative between the ethical and the unethical' (2010, 140). Levinas seems to suggest that criticism can unlock the ethical possibility of art, move beyond the static closure of the artwork and return to the world.

Claudel's exegesis *is* unethical – not because *representation* is unethical, but because his criticism has failed at the task of criticism: 'the intervention of the understanding necessary for integrating the inhumanity and inversion of art into human life and into the mind' (Levinas 1989b, 131).

Ethics, the body, and the visible

So far, I have outlined two approaches to the question of 'liveness' in theatre – the approach of Phelan and others, which seeks to raise the interpersonal relationship to the level of performance ontology, and the approach of Auslander (and, to an extent, Levinas), which rejects the idea that theatre is ontologically different from 'mediatised forms.' The suggestion that Levinas's antitheatricity supports Auslander's opposition to the notion of 'liveness' implies that his ethics have nothing to offer a study of performance. However, in what follows I will show that 'acting mad,' as discussed in the earlier portions of this chapter, can provide a different way of approaching theatre through Levinas's work. The notion that 'acting mad' provides a visceral, embodied challenge to the Cogito suggests that the value of Levinas's thought lies not so much in the face-to-face *per se*, but rather in a more fundamental aspect of his philosophy: the displacement of ontology by ethics.

As discussed above, an implicit Cartesian dualism can be found at the heart of many of the anxieties around acting mad. This is despite both Stanislavsky's desire to offer a psychophysical approach, and the more recent developments in cognitive science which demonstrate the flaws in the Cartesian scheme. For Levinas, the Cogito is emblematic of the limitations of ontological thought:

The passage from the *cogito* to the *sum* leads to that point where the free activity of knowledge, an activity alien to any external goal, will also find itself on the side of what is known. This free activity of knowledge will also come to constitute the mystery of being *qua* being, whatever is known by knowledge (*le connu du savoir*). The *Wisdom of first philosophy* is reduced to self-consciousness (1989a, 78).

In other words, in dividing experience into the *res cogitans*, which remains when all else is doubtful, and the *res extensa*, which cannot be directly known, and which therefore may be doubted, Descartes provides a philosophy which privileges the Being of the Self, and implies that the Other, which can be doubted, has less meaning. For Levinas, 'Knowledge is re-presentation, a return to presence, and nothing may remain *other* to it' (1989a, 77).

Clearly, 'presence' in this context means something other than simply a physical 'being with,' since the 'face-to-face' is so crucial as the moment of ethical encounter in Levinas. Rather, the 'presence' which is returned to here is something akin to Foucault's notion of the 'visible, and therefore storable' – what is present is that which has been grasped. Within the Cartesian scheme, *everything* that is known has fundamentally been grasped, since it only has definite existence insofar as it has been assimilated into the Cogito, re-presented *to* the Self, *by* the Self. Ontology (and particularly Cartesian ontology) is rejected by Levinas because it is egotistical, and fails to allow the Other to remain Other. Ethics, by contrast, gives primacy to the Otherness of the Other, resisting the totalising gesture of Knowledge.

This is where the challenges to the Cogito of 'acting mad' provide a ground of ethical reflection. We saw in the earlier sections of this chapter, that the tendency to assert that actors are 'mad' may result from the desire to claim totalising knowledge within the mad/sane binary (*either mad, or sane*). Although this gesture demonstrates a refusal of the ethical in the name of ontology, it also suggests the theatre's ethical potential. Nicholas Ridout argues that 'the work that would provoke a truly ethical response, in Levinas' terms, would be the work which appeared, at least, to have no ethical ambition whatsoever' (2009, 67). Ridout draws this conclusion from Levinas's comment that 'Art does not know a particular type of reality; it contrasts with knowledge. It is the very event of obscuring, a descent of the night, an invasion of shadow' (Levinas 1989, 132). I would disagree with this, if only insofar as it assumes that an ethical response derives from the work itself. If recognising the a-ethical character of art (including theatre) is, for Levinas, a way of rehabilitating criticism, then the ethical in theatre comes, not directly from a quasi-mystical dramatic form, but from the position taken by the spectator in relation to the stage.

Nevertheless, there is something about the theatre which, *contra* Levinas, offers particularly powerful material for the spectator who approaches with an ethical (infiniting) rather than ontological (totalising) mindset: the body on stage. Megan Craig (2010, 138) draws attention to the 'suspicion of facile clarity' which animates Levinas's discussion of art. We recognise this 'suspicion of facile clarity,' since it is a similar concern to Foucault's 'visible, and therefore stutable,' or Lefebvre's 'conceived space' – it is an assertion that all can be known, and that vision is the master-sense. The ethical, or the infinite, on the other hand, is the deliberate refusal of this clarity – an 'opacity' which always secretes doubt into attempts to 'grasp' the subject (the Other) with totalising knowledge.

The body on stage provides this opacity. The body on stage is not, and cannot be, the transcendent Other, precipitating a face-to-face encounter. Even in the most 'immersive' performance, there is a frame, an awareness that this is 'art.' However, the body is also not the transparent image of which Levinas, Foucault and Lefebvre are suspicious. When we see Mark Rylance playing Hamlet, we *know* he is Mark Rylance playing Hamlet. But, at the same time, we worry that Rylance might be mad, that what he is doing on stage might bleed into his everyday life.⁵⁰ The difficulty of determining what is happening when an actor acts mad, and the potential risks of harm in acting full stop, reveals precisely the opacity of the body on stage, a body which cannot be straightforwardly essentialised as pure presence, nor straightforwardly dismissed as pure mediation.

What the theatre in general, and 'acting mad' in particular does in troubling the Cogito, in bringing it to crisis, is to assert the infinite otherness/transcendence of the Other. Since the art of acting demonstrates the futility of an ontology based on the fiction of a coherent self, it also undermines the attempt to grasp the other by knowledge. In doing so, acting mad asserts the *opacity* of what is being 're-presented.' For Levinas, knowledge and ontology can only ever be 're-presentations,' making an *a priori* assumption that they have grasped what is being represented. As a result, the crises produced by 'acting mad' undermine re-presentation from within, demonstrating the opacity of the body on stage. Therefore, an ethical theatre (in Levinas's sense) is one which repeatedly asserts its own inability to fulfill the claims to

⁵⁰ Of course, at this point we enter back into the paradox of Hamlet. Rylance, as an actor, cultivates an air of eccentricity which appears close to madness. We cannot know whether, in fact, he is 'acting mad' in his everyday life. However, this does not offer a 'solution' or a 'way out' of the questions addressed in this chapter. In fact, the idea that Rylance might 'act mad' in everyday life (for reasons of self publicity, for example) *itself* appears mad in a culture which sees little distinction between identity and authenticity.

knowledge which it makes – but ethics is not simply something the theatre does, rather it is something that emerges from the engagement between the theatre and the spectator.

Conclusions

Thinking about the role of the body on stage in relation to madness, then, provides a way of interrogating the assumptions below the surface of many approaches to acting and performance. This chapter has demonstrated the latent Cartesian dualisms which shape how actors, actor trainers, and critics think about acting. It has suggested a link between these dualisms and the idea that acting itself is in some ways close to madness. Recognising that a dualistic model of selfhood is unsustainable also helps us recognise the ways in which the processes of performance challenge these dualistic assumptions, providing a way of thinking about madness as existing within a dynamic spectrum of cognitive states on a continuum with ‘normal’ states.

However, recognising the limitations of dualistic models also raises again the question of potential harm in relation to acting – failing to recognise that what we conceptualise as ‘individual talent’ is in fact a phenomenon which emerges in the interaction between actor and teacher, or actor and audience can lead actors to place themselves at emotional risk by the practice of reflexive, uncritical vulnerability. This risk necessitates an ethical approach to the theatre. This approach lies, not in essentialising the notion of ‘presence,’ but rather in replacing ontology (a focus on the self) with ethics (a focus on the Other) as the foundation of our thinking about theatre. In the following chapters, I will explore the status of the body in a number of different stagings of madness. These discussions will not always focus directly on ethics, but the importance of ethical spectatorship (rather than simply asserting the role of theatrical performance as ethical) provides a constant underpinning.

Chapter 4

Empathy and Embodiment

It is a bloodbath, violently attacking the emotions and sensibilities of any audience. It will send Aunt Edna round the bend but cannot fail to conquer anyone who has the slightest trace of compassion in him [sic] (Fay 1964).

The above quotation, from a review of Peter Brook's *Marat/Sade*, describes the physical effect of the play on its audience, the possibility that it might either transmit madness or provide a powerful, embodied insight. In doing so, it raises the issue of empathy. The previous chapter argued that taking the body into account in stagings of madness not only draws attention to the limitations of some popular approaches to acting and actor training, but also reveals the necessity of an ethical interaction between the spectator and the body on stage. This chapter thinks about how this interaction might work in practice; how different approaches to staging, to text, and to the body might affect the issues raised; and how techniques used by actors and directors might manipulate the cognitive mechanisms underlying the performer/spectator relationship.

In order to achieve this, I will consider a play which shares the concerns about institutional space, psychiatric history, and gender already introduced in the previous chapters: Anna Furse's *Augustine (Big Hysteria)*. Produced by Paines Plough, and first performed in 1991, *Augustine* enters into the case history of the title character, a young girl who was (historically) confined to Jean-Marie Charcot's Salpêtrière, apparently suffering from hysteria, and whose photographs and case notes are preserved in the Charcot library in Paris. In the play, we see Augustine, and her mute, violin-playing double, go from model patient to escapee, while the young Freud begins to develop a dispassionate, psychoanalytic approach at odds with Charcot's observational model.

In making the artistic decision to stage a fictional encounter between Freud and Augustine, Furse's approach to history can be compared with other fictionalised, dramatic accounts of real events in psychiatric history, but from a specifically feminist perspective. In *Marat/Sade*, Weiss takes advantage of the historical coincidence of the Marquis de Sade being in Charenton to stage the encounter between individual and collectivist modes of revolution, while Terry Johnson's 1993 farce *Hysteria*, responding to a meeting between the terminally ill Freud and Salvador Dalí in 1938 provides a more contemporary example. By contrast to these two more traditionally structured plays focusing on 'great men,' however, Furse engages in a process which could be called 'womanhandling,' a term derived from Barbara Godard's work on feminist translation.

For Godard, a 'womanhandled' text replaces 'the modest, self-effacing translator' with one who 'immodestly flaunts her signature in italics, in footnotes – even in a preface' (1989, 50).⁵¹

Furse's play offers a particularly clear insight into the issues of embodied ethics and the actor/audience relationship. This occurs through its oscillation between the didactic, quasi-naturalistic environment of Charcot's Tuesday Lessons, and experimental, symbolic dramaturgies which destabilise the audience's position. In order to further draw out these issues this chapter also stages a return to the very first chapter of this thesis, and to *Marat/Sade*. This return has two aspects: the first is a re-remembering, literally re-placing the bodies of actor and audience which were set aside when discussing theatrical and fictional spaces; the second is more like a return of the repressed. In this return, the issues of embodiment, of actor/audience relations, and of the collision between 'true' history and artistic license addressed by Furse's play bring to mind aspects of Weiss's play. As a result, efforts to avoid (to repress) these resonances would be both futile and damaging. By staging this dialogue, this chapter gestures towards a broad understanding of the complementary roles of empathy and embodiment, rather than merely an exposition of these effects in a single case study.

Developing the idea of ethical spectatorship discussed in relation to Levinas's replacement of ontology with ethics, this chapter begins with an overview of current theories of empathy, placing them in dialogue with Levinas's ideas. The remainder of the chapter is organised around the differing bodily valences involved in stage representations of madness – the suffering body, the docile body, and the unknown body.

The first of these three terms is fairly self-explanatory, but remains an important category; especially as a corrective both (on the one hand) to disembodied notions of madness as 'all in the mind' and (on the other) to the suggestion by Furse's Charcot that the truth of madness is straightforwardly 'IN THE BODY' (1977, 34).⁵² The term suffering also brings to mind the ideas of Antonin Artaud, which influenced both Furse's writing and the English translation of *Marat/Sade*.

⁵¹ Hélène Cixous's play *Portrait de Dora* uses a similar process of translation to recover the voices of women who have hitherto been 'written by' the famous Fathers of psychiatry.

⁵² Unless otherwise stated, all subsequent references are to this edition.

The second term is drawn from the work of Michel Foucault, and allows us to conceptualise the suffering body on stage as an index of institutional power over against individual agency, reemphasising the sense of a totalising system already explored through the use of space.

Finally, the term ‘the unknown body’ comes from the subtitle of the ‘Epilog’ [sic] to Petra Kuppers’s *Disability and Contemporary Performance* (2003), which examines the ethics of doing performance work with mental health service users and seeks to ‘refuse the ‘normal’ images of people with mental health differences,’ rather ensuring that ‘the participants and their bodies remain unknowable’ (134). In other words, Kuppers’s work seeks to encourage a refusal of totalising knowledge. This impulse is also present, although in dramatically different ways, both in *Augustine* and in Anthony Neilson’s production of *Marat/Sade*.

Introduction to theories of empathy

In discussing the role of the body in performances of madness, I want to suggest that thinking about the manipulation of *empathy* in specific performance contexts, and in relation to Levinas’s privileging of ethics, can help resist the temptation to ‘grasp’ performer’s body in a totalising framework. This can be achieved by paying attention to the relationship between the body on stage and the body of the spectator. In order to do this, I will give an overview of scientific approaches to empathy, in dialogue with the reading of Levinas in the previous chapter.

The word ‘empathy’ suggests a mechanism by which one can understand or access something about the emotional or physical state of an Other. However, there is little agreement among researchers about how this occurs. Despite his background being in theatre studies rather than cognitive science, Jonathan Levy (1997) offers a good outline to the debate in his suggestion that the term ‘empathy’ be replaced with three more precise terms: ‘Involuntary Emotional Identification,’ ‘Sympathetic Projection,’ and ‘Sympathetic Understanding.’ Levy defines his proposed terms as follows:

Involuntary Emotional Identification (IEI): An involuntary suffusion of feeling which is manifested in a physical way, no matter how slight, and triggered by a perceived or imagined sign of feeling, or a perceived or imagined condition which implies feeling, in a living creature or creatures.

Sympathetic Projection (SP): the faculty or capacity for imagining the unarticulated, even unobserved, feeling and/or motives of another living creature, or of attributing feelings and/or motives to an inanimate objects in nature or art.

Sympathetic Understanding (SU): the faculty or capacity for being attuned, at an emotional level, to the unarticulated feelings and/or motives of another living creature and, in particular, being attuned to signals of disturbance or distress (182).

True to his theatrical background, Levy illustrates the first and last of these terms with theatrical examples – IEI is what happens to, among others ‘a member of the audience at Oedipus Rex,’ while SU is ‘what a good Method Actor does’ (182). One reason to continue using the term ‘empathy’ in this context is that there is a clear interaction between IEI and SU – not only do audience members respond involuntarily to a (good) performance of emotion or pain, but actors also report their own awareness of the audience’s own engagement with the stage-action.

Levy’s three terms give a sense of the breadth of discussion around what, exactly, empathy might be, but they do not capture the whole picture. Dan Zahavi (2010) draws attention to two proposed models of social cognition or theory of mind (areas related to empathy because they concern our ability to intuit what others are thinking) – the ‘theory theory’ and the ‘simulation theory.’ He summarises these positions as follows:

Whereas the theory-theory argues that our understanding of others mainly engages detached intellectual processes, moving by inference from one belief to the other, the simulation theory of mind denies that our understanding of others is primarily theoretical in nature, and maintains that we on the contrary use our own mind as a model when understanding the minds of others (286).

These two positions offer different understandings of *how* the approach Levy calls SU might take place. If pressed for an explanation of IEI, partisans of these positions might claim that, although we *experience* such events as involuntary, they are in fact a result of a rapid sub-conscious SU process. As Zahavi points out, ‘both [theory theory and simulation theory] deny that it is possible to experience other minds, both presuppose the fundamental opacity or invisibility of other minds’ (286).

Zahavi turns to phenomenology to support an alternative view which avoids this presupposition of opacity. For him, theory theory and simulation theory both propose resolutions to a non-existent problem: since they both assume that somehow what we experience as knowledge of others in fact emerges purely from within the self, they need to explain how and why we *think* we have such knowledge. The phenomenology of Alfred Schutz provides Zahavi with a way of thinking about interpersonal interaction outside the ‘theory/simulation’ choice, since for Schutz

the 'face to face' is the most basic form of interpersonal encounter, and in a face to face situation we have a 'quasi-perceptual ability to recognise other creatures directly as minded creatures' (Zahavi 2010, 302). Our phenomenological access to the Other comes through a combination of this recognition of the mindedness of the Other and the shared context in which we interact. This is not to say that our understanding will always be correct, but rather that we have no more reason for attributing total opacity/inaccessibility to the mind of the other than we do of attributing these things to anything else in our perceptual field.

Astute readers will have noted an apparent contradiction between Zahavi's argument against the opacity of the Other and my argument in the previous chapter that the body on stage, being opaque, resists the desire to grasp the other through totalising knowledge, and so allows an engagement which is 'ethical' in Levinas's terms. However, closer examination reveals that, despite the slight clash in terminology, the two positions are compatible. For Schutz, as for Levinas, the face-to-face encounter is key. For Levinas, and in Zahavi's use of Shutz's thought, the physical presence of an Other human being complicates our desire assert the primacy of our own understanding of their experience.

The difficulty in reconciling the terms comes from the fact that the word 'opacity' is being used in two different ways. For Levinas, 'opacity' mounts a challenge to Western ontology's assumption of transparency or legibility through which we can substitute the infinite Otherness of the Other for our (totalising) reading of them. For Zahavi, however, the assumption that we cannot access the mind of the Other (that this mind is 'opaque') is what leads theory theorists and situation theorists to assert that we *must necessarily* impose our own meaning on the Other. For both Levinas and Zahavi, a theory which requires us to impose meaning on the Other must be replaced by one in which we recognise the Other as Other.

Despite the complexity of ideas about empathy, and the contested status of models of empathy in scientific discourse, the key factor in thinking about empathy in relation to the theatre is recognising that it is an *embodied* experience. Whether as Levy's IEI, where physical sensations of emotion overtake us, or in models of mind reading where the experience of the Other is present to us in the face-to-face encounter, through gesture, expression and shared context, empathy is not a matter of simply ascribing an experience to another, but of *feeling something* (not necessarily the same something) as a result of our inter-corporeal connection with the Other.

The focus on the Other, and the idea that we can only access the Other's experience while recognising that they remain Other, is useful up to a point, but does not grasp the complexity of

the theatrical situation, in which many Others interact in differing social positions and metatheatrical orientations. In order to explore these effects, I will introduce an additional model of empathy which extends the context in which empathy is considered: Fritz Breithaupt's 'Three Person Model of Empathy.' Breithaupt recognises that 'people cannot help but empathise with others' (2012, 85), but notes that empathy must, on occasion, be blocked, both to maintain a stable distinction between self and other, and to explain (for example) the phenomenon of surgeons conducting operations without being debilitated by empathic pain. For Breithaupt, 'empathy can be sustained only when these mechanisms of controlling empathy are bypassed' (84). An initial, embodied, empathic response is overridden by a blocking mechanism. This blocking mechanism remains in place until other neural processes can assess the utility of that embodied response.

Breithaupt argues that one function of this empathise-block-unblock process is to strengthen decision-making:

Empathy can be regarded as a mechanism for strengthening a decision. The more clearly I feel the pain of the one for whom I decided, the stronger my rage will be against his adversaries, and I will side even stronger [sic] with the one for whom I already decided. Vice versa, the suffering of the opponent, against whom I decided, can release negative empathy such as *schadenfreude* (87).

This provides an explanation for our responses to most fiction, either written or on-stage – authors are particularly good at employing narrative techniques and conventions which guide our initial 'deciding for,' and then using this decision as a basis for creating various empathetic effects. Situation comedy is a good example of this – the regular characters tend to be those whom we are encouraged to 'decide for,' while antagonists tend to be 'guests.' By including the regular characters in the opening credits sequence, the audience is predisposed to align themselves with them, while being suspicious of 'unknown' faces.

The suffering body

Breithaupt's model suggests a more complex approach to the suffering body – we may not straightforwardly 'feel for' a body in pain if we have 'decided against' that individual previously. However, the suggestion that our initial empathic response may be involuntary suggests a role for the suffering body on stage – as a vector through which the audience's automatic tendency to empathise can be manipulated.

This manipulation of empathy can be connected to the ideas of Antonin Artaud, as expressed in Peter Brook's account of the questions being addressed by the RSC's 'Theatre of Cruelty' experiments at LAMDA:

Is there another language, just as exacting for the author as a language of words? Is there a language of actions, a language of sounds – a language of word-as-part-of-movement, of word-as-lie, word-as-parody, of word-as-rubbish, of word-as-contradiction, of word-shock or word-cry? If we talk of the more-than-literal, if poetry means that which crams more and penetrates deeper – is this where it lies? (1972, 55).

The specifically *embodied* language beyond language envisioned here is also at the forefront of Anna Furse's project in *Augustine (Big Hysteria)*, where the central theatrical driving force is the dialectic between the language of the body and the spoken language.

Furse draws attention to the importance of the words of the victim/witness (*Augustine*), while also recognising the risks of overvaluing either language *or* the body, of falling into the trap of Charcotian empiricism or Freudian symbolism. This can be connected to Brook's question in relation to the 'Theatre of Cruelty' 'can the invisible be made visible through the performer's presence?' (1972, 58). Furse's play asks the same question in relation to madness – can the presence of the madwoman make visible her past without that past being grasped, or colonised, by psychiatric discourses?

Dialogues with historical bodies

Both *Augustine* and *Marat/Sade* draw on historical images of 'mad' bodies. The process of re-embodiment of these images resonates with some of Artaud's visionary prescriptions for the theatre. In the 'First Manifesto of the Theatre of Cruelty,' Artaud (1976) suggests a form of physical referentiality not based on linguistic logic (the logic which founds both Coulmier's 'objective' view of history and Freud's approach to madness) but rather on a dream-logic located in the body:

We do not intend to do away with dialogue, but to give words something of the significance they have in dreams. [...]. As to ordinary objects, or even the human body, raised to the dignity of signs, we can obviously take our inspiration from hieroglyphic characters [...] to compose exact symbols on stage that are immediately legible (1976: 72).

It should be clear, here, that Artaud is not proposing the kind of legibility implied by both Freud and Charcot in their treatment of Augustine. For Charcot, 'we won't find the answer in her chattering [...but] anatomically and physiological' (34), while Freud wonders whether the content of hysteria could be 'an outward performance [...] of some deeper story trying to be told' (30). This kind of legibility assumes that there is a truth located 'outside' the specific circumstances of the disease, while Artaud proposes a kind of instinctive, visceral understanding – what he calls 'real language using man's nervous magnetism' (1976, 71). This is akin to the initial state of empathy described by Breithaupt, in which there is a danger of 'self loss': 'losing, ignoring or forgetting one's own perspectives, interests or state' (2012, 85).

Furse sees something like this empathic self-loss at work in the experience of the historical Augustine. Apparently, regular photo sessions had led Augustine to lose her ability to perceive colour, and Furse offers a reading of this effect which sees it intimately related to the descriptions of hysteria offered in the Salpêtrière – 'she takes on the qualities by which she herself is described by others [...she] does not lose her sense of colour because she is *mad*, but because she is merely interpreting and *embodying* that to which the Others condemn her.' (1994, 27). Augustine becomes so focused on 'performing' for Charcot that she 'loses her own perspective', in Breithaupt's terms. For the audience, the question must be how far their empathic response to Charcot's magnetic personality is responsible for Augustine's suffering.

Furse's background in dance and physical theatre led her to reconstruct Augustine's attacks of 'grande hystérie' from the photographs and notations in the Salpêtrière archives:

At the centre of Shona Morris's remarkable performance was the reconstruction of an attack of Grande Hystérie. We have the professional notators of the Salpêtrière to thank for that: in their compulsion to measure, quantify and archive every possible detail of the condition, they bequeathed a diagrammatic chart of every movement of the symphonic 4-phase attack. Whilst in performance the effect is of uncontrollable energy, the actress is in fact following a carefully constructed choreography we devised to blend with the text, at that point - the big showdown in which the whole rape story is strung together (1994, 32).⁵³

⁵³ The detailed images and accounts found in the Salpêtrière archives have provided fertile ground for dance-influenced practitioners. Describing the process of devising *Dr Charcot's Hysteria Shows*, performed in Connecticut and Ohio, Dianne Hunter speaks of 'analys[ing] the first four positions [shown in one of the sets of photographs in the Charcot archives] as if they were part of a dance' (1993, 95). This analysis was completed by physically embodying the positions in order to 'reclaim [...] the (cont.)

The power of this kind of approach is contained in the interplay between cultural understandings of madness and an empathetic response to the physical proximity of the suffering body. For Dianne Hunter, who followed a similar process of embodying Charcot's notes when devising the physical theatre performance *Dr Charcot's Hysteria Shows* (1988-89, Ohio Theatre, Oberlin College), this dual response may have also been the intent behind the historical Augustine's hysterical performances: 'we felt a spectator was built into the movements [captured in the Salpêtrière photographs], and that the represented figure signaled a desire to communicate, but wished to baffle her observer' (1993, 99).

While both Furse and Hunter drew medical notation, Brook used reference images by the artists Breughel, Goya and Hogarth as models for his 'patients.' As an example, compare a detail from Goya's painting *Courtyard with Lunatics* (1794) to production photographs of Leon Lissek as the patient playing 'Lavoisier' in the 'Faces of Marat' scene:

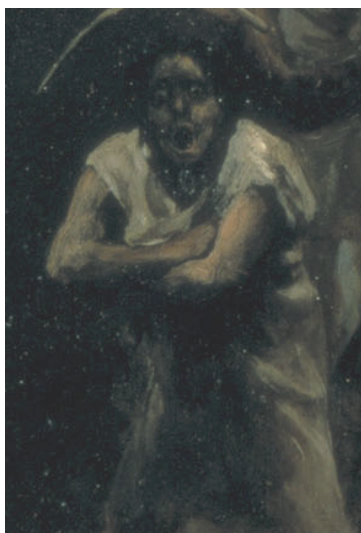


Figure 5: Detail, *Courtyard with Lunatics* by Francisco Goya, 1794

Figure 4: Leon Lissek as 'Lavoisier' in *Marat/Sade*, 1964

Both the 'lunatic' in Goya's painting, and Lissek's interpretation of an 1808 lunatic, share clutching arms, wide eyes, and terrified expressions. This approach relies on iconographic concepts of madness which resonate with the term's history in Western culture: art historian Peter Klein has linked Goya's paintings of 'lunatics,' and especially *Courtyard with Lunatics*, with a broader interest in the 'terrible sublime,' 'the powerful forces of unchained nature and its human victims' (1998, 238-239).

hysterical body from its enclosure in fixed images, and [...] see [...] where the energy and power I felt in the Salpêtrière poses would go if it were free to move' (94).

This sense of the ‘terrible sublime,’ the point at which nature exceeds the limits of the human, is discernable in Brook’s comment that the paintings were intended to serve ‘not as models to imitate but as prods to encourage [the actor’s] confidence in following the stronger and more worrying of his inner impulses. He had to allow himself to serve these voices completely; and in parting from outside models, he was taking greater risks. He had to cultivate an act of possession’ (Hunt and Reeves 1995, 86). The debate between the individual and the collective, taking place between Marat and Sade on stage, is also embodied in the actors themselves as they follow the ‘more worrying of [their] inner impulses.’ Comments from reviewers of Brook’s *Marat/Sade* draw attention to the sense of the patients as cloud of unreason – ‘the lunatic crowd mutters and thunders’ (Metcalf et al. 1964), they are ‘quivering, twitching, many strait-jacketed’ (Kretzmer 1964).

The creation of this cloud of unreason relies on an interaction between the audience’s senses of fear and empathy, and as such asserts the body as the site of political and philosophical struggle in the same way as the more overt tussling for control of the female body by Freud and Charcot. However, in both plays it is the metatheatrical structure, the notion of medical *performance*, which ensures that this struggle is not given to the audience as something to be known, but recognised as having consequences which exceed knowing. The bodies on stage in both these performances slide in a complex manner between being recognised as individuals with inner lives, icons of madness, actors, and unknowable Others.

Empathic audience interactions

The concept of metatheatricality also helps us think about the unstable performer/audience relationships which shape both productions. Herbert Blau, discussing this relationship, describes the spectator’s gaze in terms familiar from our discussion of Levinas’s ethics:

Various techniques of the theater [...] have tried to interrupt or expose the gaze as a vitiating look. But the gaze is obdurate. It is a fixation of sight that really *refuses* to see, since it converts what is palpably out there to the delectable image of the metonymic *I*, that maybe malefic version of the viewing subject itself (1990, 6).

In other words, spectating at the theatre almost inevitably involves a process of grasping, of doing violence to what is seen by remaking it in the spectator’s own image. Blau does not allow his reader to rest long with this concept of spectatorship as pure oppression, however – his wider point is that the audience is also an imaginary object created by the theatre: ‘the audience is what

happens when, performing the signs and passwords of a play, something postulates itself and unfolds in response' (25). The audience, then, is at a point of tension – apparently exercising a totalising power over the actors on stage, but at the same time being constituted only through the spectacle over which it exercises that power.

Both *Augustine* and *Marat/Sade* structure their audience's engagement with fictionalised asylums through an intercorporeal power relationship. Insofar as the audience is constructed by the performers, these performances immediately construct the spectators in a position of power. Furse speaks of an audience 'cast in the role of an audience to a Charcot lecture' and 'implicated in their gazing' (1994, 31). With a similar gesture, *Marat/Sade* casts its audience as a group of wealthy Parisians at the turn of the eighteenth into the nineteenth century attending a spectacle in a madhouse, much as eighteenth century Londoners could visit the inmates at the Bethlem Royal Hospital.⁵⁴ In being told that the play is produced 'for [their] delectation/And for our patients' rehabilitation' (13), and through the citation of the 'declaration of human rights,' the audience are encouraged to see themselves as holding power over the patients jointly with Coulmier – we, the sane and rational humanists, they, the poor unfortunates who are being helped. This encourages empathy with Coulmier, since he is the character who is easiest to relate to. Freud, in taking the *content* of Augustine's dreams and speech seriously, fulfils the same role in Furse's play, offering a kindly and humane point of connection with the audience.

However, neither production allows the audience to remain in this complacent position of benevolent power. *Augustine*, the more polemical of the two, interprets the historical Augustine's escape from the Salpêtrière (wearing men's clothes), as a symbolic victory over andro- and logo-centric languages which seek to objectify her in support of one or other psychiatric theory. As such, the ending involves a vision of suffering which is somehow purgative, a turning of the tables on the established order which has confined her:

My Doctors, sirs messieurs! [...] No more secretions for you! No more exhibition!
No more stories! I'm leaving your stage! [...] I will disappear. Dis-membered. I
will return. Re-membered. I will come together again in a form you won't
recognise. Me and my magical body! I will be immortal. I will be salt. I will parch

⁵⁴ Indeed, the experience of visiting Bethlem may have been more like attending a production of *Marat/Sade* than one might think. Simon Cross notes that 'Bethlem's inmates knew well enough that to extract money and privileges from visitors they had to play to the gallery, performing to the stereotypical Bedlamite image' (2012, 23).

your mouths dry. And you, you will put your tools down, you will listen, really listen, and you will believe every word I say... (49).

The gesture here is utopian, and as such it is open to the same critique as the gestures of escape in Sarah Daniels's plays. This remains the case despite the fact that Furse's own commentary on the play recognises this difficulty, noting that Augustine's future is 'not necessarily a bright [one], but at least an authentic one' (1994, 31). The suggestion of a 'magical body' which is 'immortal,' although having a direct echo of Cixous's 'entirely different stage/scene' (1995, 134) in the comment 'I'm leaving your stage,' still relies on bodily essentialism and linguistic legibility ('you will believe every word I say').

Christina Wald argues that the play can be 'read against' Furse's own intentions, so that hysteria becomes a 'performative malady par excellence' (§6). However, this gesture repeats the attempt to grasp Augustine's experience within a totalising framework, this time the Lacanian notion of hysteria as a 'trans-gender' condition which 'points to the impossibility of reducing identity to gender' (§18). Augustine, in this reading, remains an object to be manipulated for political gain.

Brook's *Marat/Sade* also enacts political manipulation, but through the direct engagement with the audience, as is critical comments which convey a sense of having been assaulted. A *Glasgow Herald* reporter (1964) described Clive Reill's performance as Marat as 'uncomfortably real,' while Herbert Kretzmer called the play 'almost a physical assault upon the audience' (1964). This effect is in part a result of never being allowed a fixed empathic perspective from which to engage with the production – Brook's staging ensures that spectators, having initially sided with Coulmier, have their empathic 'decision for' complicated by the play's events, as in Jacques Roux's direct address to the audience: 'you have to sit way down there, where they don't have to see you' (51). This direct address elides the distinction between audience and patients, and attempts to align both groups against Coulmier.

Brook's use of non-naturalistic techniques add to this sense of disorientation, as can be seen from Harold Hobson's discomfort with the 'Whipping' scene:

I am baffled by how one is to take the scene in which Charlotte Corday beats de Sade with her hair. Are we to be revolted by it, or – twentieth century idiosyncrasies being what they are – actually to enjoy it? (1964).

It seems likely that Hobson's conflicted response emerges from an embodied experience of both enjoyment *and* revulsion. This emotional state is similar to that elicited by watching Shona

Morris's performance of hysteria in *Augustine*. As audience members, we are impressed by the artistry, the 'precision and control and impeccable timing' (Furse 1994, 32) required to produce this simulation of a hysterical attack. At the same time, the ethical question returns – what is it that we are taking pleasure in? The virtuosity of the performer, or the supposed attack of hysteria? Already constructed as the audience at one of Charcot's lectures, does our enjoyment render us as spectators ethically suspect?

In the final analysis, we cannot separate our responses to Morris's virtuosity and 'Augustine's' distress. Our historical experience, and our embodied response to the suffering body, is combined with the construction of Augustine as a *performer*, an 'actress-shaman who signals psychic pain through physical transformation' (Furse 1994, 29). As a result of these interactions, any attempt to unpick these combined elements of the performance would lead almost inevitably towards a renewed binary, separating Morris's psyche from 'Augustine's' body, or vice-versa. However, this concern does draw attention to the *kind* of cognition elicited by these stagings of madness: since our response is embodied, and cannot be reduced to either 'pure rationality' or 'pure sensation,' it highlights the limitations of the models of madness which shape the clinical processes staged in *Marat/Sade* and *Augustine* – all of which rely *either* on reading the psyche *or* the body.

Both these theatres of the suffering body, then, deliberately manipulate the embodied, empathic responses of the audience in order to destabilise the structures which constitute the performance itself. By foregrounding the limitations of models of madness which insist either on the primacy of physicality, of passion, or on the primacy of Enlightenment models of the intellect, these performances also undermine the straightforward distinction between sanity and madness. After all, if a spectacle such as *Marat/Sade* or *Augustine* can elicit such strong emotions, and if these emotions can have such a visceral effect on audience responses, then how can rational thought be used as a fundamental dividing line between sanity and madness?

The docile body

Another key element of Furse's dramaturgy is the process by which Augustine's experience in the Salpêtrière 'forms' Augustine's embodied subjectivity. While Augustine's monochrome vision may have been a result of empathic self-loss, her performances of hysteria are evidence of a learning process, as Elaine Showalter notes in her introduction to the play:

We cannot doubt that the *attitudes passionnelles* were cultural constructs, organised and indirectly taught within the asylum itself, and reinforced by all the pictorial

representations resembling poses from the French classical theatre (Furse 1997, xvi).

However, despite the fact that Augustine's condition is, in part, constructed by her experience of the asylum, it can also be seen as a mode of resistance to it, as she '*play[s] the role of the eager accomplice*' (23), and imbues the final attack of 'hysteria' with the content of her own experience of abuse, complicating the audience's response to her experience and challenging the asylum narrative.

This resistance is in contrast to the formation of the bodies of the inmates in Sams's vision of Charenton, in which the bodies on stage are constructed as already catalogued and under control. As a result of this cataloguing process, the audience's empathy with the patients in this production is unlikely to lead to any reassessment of the conditions within the asylum. This section will connect the above discussion of learned vulnerability and 'docile bodies' with the specific conditions of these fictionalised asylum spaces, in order to see how apparently similar approaches can elicit profoundly different empathic responses.

Bodies in the asylum

To begin this discussion, I will briefly restate the key theories of vulnerability and docility introduced above. Foucault argues that 'a body is docile that may be subjected, used, transformed and improved' (1977, 136), and Mark Seton suggests 'many actors are trained in unquestioning vulnerability to do and become whatever a director requires, without questioning the impact it has on them as embodied persons' (2010, 6). Considered together, and in dialogue with recent understandings of neural plasticity, it becomes clear that any disciplinary process (including therapeutic processes) will have an effect beyond the immediate context of that process, affecting the individual's broader experience of being in the world. This may account for the passivity and docility exhibited both by the inmates of Sams's Charenton, and by Augustine.

A number of critics described the inmates of Sams's asylum as 'terribly tame' (*Time Out*, May 22 1997), 'surprisingly cute' (Jays 1997), and 'largely unthreatening' (Billington 1997). This effect is partly explained by the relations of power within which Sams situates them. For Foucault, power is not 'possessed,' but rather emerges from a series of activities and processes, and 'is manifested and sometimes extended by the position of those who are dominated' (1977, 26). The 'learned vulnerability' of Sams's patients (an extreme form of the learned vulnerability

Seton identifies in actor training programmes) both protects them from the exercise of physical force and manifests the more insidious institutional strategies.

That this Charenton is intended to resemble a penal institution as much as a medical one is clear from the physical, gestural language employed by the male nurses (or 'guards' as Sams' prompt-script calls them [Weiss and Sams 1997]). The postures unmistakably recall those of riot police, and this was achieved through direct liaison with the Public Order Training Centre and the City of London Police:

We have a new production – the *Marat/Sade* – which is currently in rehearsal. There are two actors in the play who are required to take riot control stance positions including the use of batons. We are primarily interested in stance and handling for the benefit of effect on the stage and our actors could be brought to meet a trainer for a briefing at your centre at any time should that be feasible (O'Reilly 1997).

The docility and vulnerability exhibited in Sams's Charenton contrasts with Augustine's performed vulnerability. By focusing on an individual rather than the 'mass' of patients, Furse dramatises the process by which that individual comes into line with the logic of the asylum, and especially with the ideas of the individual physician. This process is emphasised early in the play, as Charcot introduces his project in the following terms:

We must begin by exploring the territory of the hysterical body, then, like cartographers, we must chart it, map out its contours, possess its enigmas... (18).

For Charcot, the disciplinary process does not rely on domination by physical force, but rather the assertion of discursive power through bodily knowledge. This process can be connected to Foucault's notion of clinical medicine as an activity of the gaze, and the nineteenth century French asylum in particular as 'a site of revelation [...] and confrontation' (2006b, 339). In this understanding, Augustine *herself* is less important than Charcot's ability to 'produce the illness in its truth and subjugate it in reality through the power his will exerts on the patient' (Foucault 2006b, 339).

For Augustine, docility and vulnerability are produced in collusion with the doctor who sees her as 'special [...] a chef d'oeuvre, a perfect sample, an... archetype [...] a star!' (23). This returns us to Seton's notion of misrecognition: Augustine's archetypal performance of *grande hysterie* is produced on demand in order to please the doctor and maintain his attention as she has been trained to do. Her hope, presumably, is that Freud and Charcot will 'believe every word [she]

say[s]' (49). Furse's play, however, demonstrates that Augustine's understanding of her own condition is fundamentally incompatible with the models being developed by her doctors. While Charcot wishes to read her bodily experience, and Freud aims to decipher the 'symbols' in her language, Furse sees Augustine's hysteria as emerging in an integrated way, fully textual and fully embodied. This model of hysteria escapes the descriptive power of approaches which aim to bracket out elements of her experience.

Dissection and gaze/power/knowledge

Although these differences in the dramaturgic functions of docility are compelling, it is also important to pay attention to the similarities in how Furse and Sams treat the body as spectacle. These connections are particularly clear at the intersection between medicine and the legal system. The display of patient bodies in public suggests the peculiarly close historical connection between dissection, the theatre, the law, and madness: Stephen Wilf (1993, 63) notes that, from 1752, criminals in England would be publicly dissected after execution; Julie Hansen (1996) draws attention to the theatrical character of public dissection; and Elizabeth Hurren (2012, 66) has shown that the corpses of 'insane paupers' were sold to 'repay their welfare debt to society.' Sams's comment that the 'in-the-round' set was intended to resemble 'an operating theatre crossed with a debating chamber' (Grant 1997, 27) has a particular resonance with these contexts.

The relationship between madness and public medical display is also implicitly noted by Foucault, as he describes the eighteenth century penal system within which the asylum also developed as a "political anatomy" [...which] defined how one may have a hold over others' bodies' (1977, 138). Tierney (1998) and Voruz (2013) both develop this theme, drawing attention to the connections between Foucault's work on medicine and on the gaze. For Foucault, the gaze is integrated within a structure of power: 'there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations' (1977, 27).

Knowledge is, in part, a result of the action of the gaze, which catalogues and classifies, and, in doing so, constitutes a relation of power. The gaze-power-knowledge relationship here can be considered using the language of dynamical systems. These factors are inter-related and inter-dependent, and any sudden change (perturbation) in any one of them (a prison revolt, say, or a scientific breakthrough) also affects the others, which respond in an attempt to find an attractor state which allows them once again to achieve metastability.

Emerging at the intersection between the medical gaze, institutional power, and the field of nineteenth century knowledge of ‘madness,’ both Augustine’s body and the bodies of the patients in Sams’s asylum appear like the cadavers at a public dissection. The public character of Charcot’s lectures and Coulmier’s theatrical events exists to demonstrate the institutions’ ‘modern enlightened’ (Weiss 1982, 13) character. Indeed, even *Marat/Sade* takes on the characteristics of a lecture, especially as the Herald introduces each patient in terms akin to the following:

One of those
who’ve made unprecedented strides since we
introduced them to hydrotherapy (15).

Foregrounding this element of medical performance further emphasises the passivity already noted – the patients in Sams’s Charenton are more exhibits than agents, and even Duperret’s erotomania, which has a real edge of sexual danger in Brook and Neilson’s productions (the Herald notes that he ‘needs more watching than the rest’ [16]), is limited to a couple of half-hearted grabs for Corday’s chest. It is particularly noteworthy that Corday herself is able to repel Duperret’s advances, despite her somnambulant state. Similarly, Roux’s attempts to rouse the patients against the guards result in his being shot: Not only does conflict between the patients actively extend the power of the asylum system, but asylum itself has already formed bodies incapable of exercising independent action.

Similarly, in the early stages of *Augustine*, Augustine herself appears as almost a puppet, controlled through hypnosis (26) and the physical manipulation of ‘hysterogenic points’ (30). This allows Charcot to demonstrate his clinical mastery of hysteria, his control of the gaze-power-knowledge system in order to demonstrate that ‘hysterical patients PRODUCE THEIR OWN SYMPTOMS’ that the hysterical body is one ‘which is LYING to us,’ and to ‘forge a concept of hysteria which doesn’t lie’ (25). Augustine’s body is, at this point, treated in the same way as the bodies in Charenton: like the cadaver at a dissection. Furse’s stage directions make the extent to which Augustine as an individual (an Other who cannot be fully known) does not even exist to Charcot – he ‘*is now using her body as a specimen, touching various parts*’ (29), and repeatedly overwrites her subjectivity through his own dominance, stating that ‘the CONTENT of the delirium is of no importance...the proof is that the cause of the hysteric’s thoughts, can be altered at will!’ (28).

Unlike our understanding of the patients in Sams’s Charenton, however, Charcot’s certainty is not left unchallenged. At one point in the play, Augustine has been found outside in the rain, in

an incident later described by Charcot as a result of one of her 'fits of rage, provoked by the smallest annoyance' (37). Charcot's interpretation of Augustine's night-time adventure is very different to the explicitly embodied account given by Augustine herself in response to Freud's non-leading questioning:

The night was hot. I thought I was going to suffocate. The air was growling like a cat about to pounce! And then the skies broke and there was lots of loud explosions and this big hot rain came down to wash it all clean...I had to be outside, under the avenue of trees. I wasn't going to run away, you know (32).

Here, Furse allows the 'docile body' which has been in the foreground to recede, in favour of a self-narrated of Augustine's embodied experience. This account both exposes and resists the totalising discourse imposed by Charcot.

Building on Merleau-Ponty's phenomenology, we can begin to understand why this approach is so powerful. Merleau-Ponty (1962, 193) argues that speech 'brings about, both for the speaking subject and [their] hearers, a certain structural co-ordination of experience, a certain modulation of existence.' Relating this to (specifically radio) drama, Clive Cazeaux (2005, 169) argues that 'for both the actor and the character he or she plays, the voice is not a fixed entity but the projection of a way of being in the world.' When we connect this to Furse's staging of Augustine's story, we can see that, by giving voice to Augustine's embodied experience (rather than just relying on her display as a medical specimen to be 'anatomised'), the audience is invited to consider the specific ways in which Augustine's psychic experience structures her life-world.

This projection, in combination with the knowing way in which Augustine 'performs' her hysteria, has the effect of undermining the audience's response. While her suffering body leads to audience discomfort, the tension between her docility, the harm caused by it (seeing in black and white) and the indeterminate status of her own, performed, hysteria, draws into question the ability to make any final statement about the aetiology or nature of madness.

Totality and the failure of empathy

While Furse's play includes moments at which Augustine seems to escape from all discursive paradigms and appears as infinitely Other, the display of patient bodies as passive, classified medical specimens in Sams's *Marat/Sade* remains squarely within the ontological mode of knowledge Levinas calls 'totality.' The same impulse towards totality can be seen in Sams's own

account of his approach: 'what I want to represent is a real asylum with real inmates doing a real play: I want to do it on as realistic a level as I can manage' (Shenton et al. 1997). Historical knowledge, here, is constructed in the same way as medical knowledge is constructed by the public dissection: the field of observation (whether of bodies or of historical sources) is central, and the key outcome of observation is the production of a knowledge that can be grasped.

Michael Billington seems to have sensed this dilution in his unfavourable comparison of Sams's production with Brook's: 'where Brook treated the inmates as individually haunted obsessives, in Sams's production they become a largely unthreatening ensemble who never seem in great danger of turning either on the authorities or on us' (Billington 1997). The absence of threat is correlated with the absence of individuality – the totalising construction of knowledge which underlies both the fictional Charenton and Sams's approach to it ensures that the audience never have to confront the embodied experience of the patients, rather perceiving them as objects to be kept at arm's length. In this respect, *Augustine* remains closer to Brook's conception of the asylum, in that Augustine herself is highly individualised. Indeed much of the dramatic tension comes from the interaction between those elements which tend towards the unknowable, towards the construction of Augustine as wholly Other, and those elements which attempt to reduce her to a mere archetype of Charcot's pet theories.

The contrast between the resistant individual and the unthreatening mass raises another question about the possibility of an 'infinite' dramaturgy. In chapter three, I argued that theatre poses a challenge to the ontological logic of the Cogito *insofar as* it calls the Cogito into question. The examples of Sams's *Marat/Sade*, and the less convincing elements of *Augustine*, demonstrate that this possibility is not universal. Instead, this kind of challenge requires *both* an ethical spectator, *and* a dramaturgy which allows the possibility of ethical spectatorship. A dramaturgy reliant on positioning the patients *within* a totalising logic cannot provide this challenge, or at least offers very little to the ethical spectator who wishes to do so. Rather than dramatising the opacity (and hence unknowability) of the body of the Other, the intersections of medical and legal knowledge render it transparent, catalogued, already understood.⁵⁵

⁵⁵ In fact, Furse specifically notes this risk in relation to her employment of the metatheatrical device of the lecture theatre:

The audience is deliberately placed in the role of voyeur. Cast in the role of an audience to a Charcot lecture, they are treated as intelligent and concerned. Naturally there is danger in situating this material in front of an audience in this way. However, when all parties concerned are made aware of their function, this kind of role-play becomes most fruitful for challenging perception. In AUGUSTINE (BIG HYSTERIA) the real audience is implicated in their gazing. They have to work too, to piece together the clues she sheds,

(cont.)

This is not to say that audiences cannot empathise with the action on stage in a production based on the logic of totality. On the contrary, at the end of *Marat/Sade's* 'mad animal' speech (40-41), the patient is subdued with baton blows and the guards prepare to continue beating him and Coulmier intervenes, crying 'stop, that's enough, that's enough' (an intervention not found in the printed script). This event does indeed elicit empathy. Within the 'three person' model, we have already decided against the guards and their over-the-top violence, so we empathise both with the patient being beaten and with Coulmier's attempt to prevent it. However, unlike in Brook's production, our 'decision for' is not challenged or interrogated.

Breithaupt's account of three-person models of empathy notes that 'one may side with the more passive party in a conflict because as an observer one is also in a more passive, receptive position' (2012, 89).⁵⁶ Brook's production suggests that our cognitive life is structured by affective experiences largely outside conscious control, while Furse refuses to allow us to view Augustine as passive, despite her position within the gaze-power-knowledge triad. Sams, however, leaves this process unquestioned, even unobserved. The effects of this failure are discernable in some of the reviews of the production: it doesn't 'convince, move or even particularly interest' (*What's On*, May 22 1997), it is 'terribly tame,' and it 'creates about as much real challenge to its audience [...] as Chris Evans behaving badly' (*The Herald*, May 20 1997).

Both the play's conclusions, and its mode of reaching them, are so clearly in keeping with the audience's preconceptions ('the confinement and beating of people with mental illnesses is bad, and it's not like that now') that the audience is given nothing to do or experience. The Other makes no demands, the audience's empathetic reaction to the patients is limited, because the moral (rather than ethical) message of the production is always transparent, confirming the audience's liberal intuition that asylums were violent institutions with few redeeming qualities, despite the best intentions of those who ran and worked in them.

they have to face her coming out and touching them, they have to discover where they stand between the three points of the triangle (1994, 31).

In other words, it is only through Augustine's *presence* as infinitely Other, through her challenge to the totalising narratives she is supposed to exemplify, that the audience has any hope of moving beyond received narratives of madness.

⁵⁶ This comment is an assertion based on the observation of a propensity to side with the weaker party. It is important to note that Breithaupt recognises this assertion as requiring further elaboration – he also considers the possibility that this propensity to 'decide for' the weaker party is culturally coded, having its roots in the Western cultural inheritance of Christian art and contemplative practice.

The unknown body

Having worked with individuals in mental health settings, scholar and theatre practitioner Petra Kuppers is understandably cautious about the terminology of ‘otherness’ in relation to mental illness. For her, it is important to ‘find spaces for the unknowable,’ but also avoid an aesthetic in which ‘the “other” too quickly becomes fixed into otherness [...which allows] the spectator to see the performers as “mad” and to see the traces of that “madness” evidenced on their bodies’ (2003, 130). Kuppers’ terminology here has an implicit link with that of Levinas: the ‘other’ corresponds to that which tends to infinity, that which makes an ethical demand, while ‘otherness’ is in fact another term for the totalising gaze which seeks for evidence and ‘reduces the presence of bodies to texts that need to be read and categorized’ (Kuppers 2003, 130).

The discussions in this chapter so far have focused on one possible technique for undermining the totalising gaze. First, this involves showing how the gaze has been constructed, through the discourses of nineteenth century psychiatry and the metatheatrical ‘casting’ of the audience as spectators at a public ‘demonstration’ of madness. Next, this gaze is undermined by staging bodies which refuse to be reduced to the limiting categories of totality. Kuppers’s approach in the installation *Traces* (2000), a video installation in which a group of performers lie still, simply breathing, also sought to escape totalising notions. However, the installation sought the ‘infinite’ not within a constructed narrative of madness, but within the pre-existing world-view of the spectator herself: ‘the silent bodies on the screens are not the silenced hysterical women of Charcot’s photographs [...] rather, the multiple screen event fosters the intense presence of the performers’ bodies, while withholding such a “truth”’ (133).

In this section, I want to use the category of the ‘unknown body’ to look again at the ‘restaging’ of hysteria. In *Traces*, Kuppers aimed ‘to move against the fixed images of mad people, of people captured in semiotic frames where the body’s movement is read as [...] negativity’ (134). By discussing the ‘unknown body,’ I will show that this aim can be achieved, in a different way, from *within* those fixed images themselves. Implicit in Kuppers’s argument is the suggestion that any representation of madness through any traditional media form is suspect. Sharing Showalter’s insight about Augustine’s ‘docile’ repetition of the script given her by Charcot, Kuppers notes that the physical experiences of the individuals she was working with ‘seemed to mirror their representational silencing or distortion in the media [...] the representational and social aspects of madness had affected the sense of embodiment of people diagnosed with mental health difficulties’ (125). Does this observation undermine any ethical claims for traditional representation, or is there still work that can be done, even in relation to more contemporary constructions of madness?

My approach to these questions draws on theories of representation and authenticity, in dialogue with ethical questions about the role and knowability of the body of the Other. This combined perspective enables me to explore how the use of complex representational strategies, engaging critically with stereotypical representations of madness and gender, and acknowledging their potentially offensive content, can render bodies doubly unknowable, pressing up against the limits of theatrical representation itself. *Augustine* is here brought into dialogue with Anthony Neilson's production of *Marat/Sade*, a production which shares the Furse's concern with uncovering the implications of stereotyped images, but which also takes a more anarchic approach to representation.

Crippling up?

By including *Traces* in her discussion of disability and contemporary performance, Kuppers locates mental illness unproblematically in the discourse of disability studies. A central element of Kuppers' approach to performances of disability is expressed in the following quotation:

The performance of disability relies on the understanding that disability is transparent, uni-vocal, easy to see, and wholly reproducible in theater. Disability functions as a master sign in our culture by dominating other discourses of identity. Its connotations cannot be escaped – to be disabled thus means to be profoundly excluded from self-representation (54).

In other words, disability is defined from the outside, by reference to a stable norm, and therefore it is by definition 'owned' by those who are not-yet-disabled. This conception is clearly a relative of Foucault's notion that the history of madness is in fact 'a monologue of reason about madness' – those who are spoken about have no opportunity to shape how they are understood. For Kuppers, Brecht's *Verfremdungseffekt* provides a powerful political challenge to these normative definitions, since it 'distance[s] audiences [...] from the established modes of seeing and knowing' (69). She sees Artaud's 'theatre of cruelty,' by contrast, as politically limited, since it 'can be twisted back on itself, relegating disabled people into the negative position of the binary that keeps disabled and non-disabled apart' (86).

A key issue in the representation of disability in the theatre is *how* this kind of 'visibility' is to be achieved. In her 2002 play *peeling*, Katie O'Reilly has one of the (disabled) actors state that 'cripping up is the twenty-first century's answer to blacking up' (44), and the term 'cripping up' has since been used to describe the practice of casting able bodied actors to play disabled roles.

'Crippling up' raises questions about how we as a society think about disability – what does it mean that Richard in Shakespeare's *Richard III* remains a 'great role,' one which tends to be played by well known, able-bodied actors? The performance of disability is always controlled by broader social understandings of disability, and excludes 'really' disabled people from self-representation *even when they are representing themselves*: Richard Tomlinson argues that 'society expects its crippled members to act crippled' (1982, 11). To be represented onstage by someone lacking experience of disability could be seen as a double exclusion.

Daily Mail reviewer Quentin Letts (2011) raised a related concern in relation to Neilson's *Marat/Sade*. In the production, the patients first come onstage making 'habitual movements' and, in one case, prelinguistic 'O' noises, consciously echoing the extensive use of vowel sounds to generate a background hubbub in Brook's production. Letts may have had this opening in mind as he complained of 'prolonged mimicry of mental disability which, in my view, goes beyond actorly portrayal and becomes mockery.'⁵⁷ Neilson, on the other hand, states in a promotional video 'I recoil instantly from the idea of actors acting mad [...] the madness of those characters [...] is purely used as an analogy' (2011).

Given Neilson's own history of writing plays dealing directly with issues of mental illness (*The Wonderful World of Dissocia, Realism*), there is no reason why we should not take his expression of concern seriously. However, as Letts's comment reveals, there is some distance between his own claim to want to avoid 'actors acting mad' and the actual stage picture produced. His justification, that the use of madness is 'an analogy,' echoes Susan Sontag's argument that, in *Marat/Sade*, 'insanity proves the most authoritative and sensuous kind of theatricality [...] it becomes the privileged, most authentic metaphor for passion' (1965, 211).

This raises a secondary problem, which seems to support the concerns about representation outlined above. In *Augustine*, despite the moments of excess which disrupt the audience's empathic knowing, the theatrical experience is largely controlled, not by the *unknowability* of madness as an experience, but by the *knowability* of the causes of madness. Furse understands Augustine's condition straightforwardly as a result of her abuse by 'Monsieur Carnot,' and this understanding is constantly signaled by the production. As Clare Bayley (1991) states in her review, 'it is abundantly clear to us [the audience] that during Augustine's frantic contortions and screaming [...] she is reliving the trauma of rape.' Madness, on at least one level of this production, is straightforwardly used metaphorically – a representation of the ways in which

⁵⁷ Letts' sensitivity to the feelings of disabled people does not prevent him, later in the article, from referring to Charenton as a 'loony bin,' or describing Herald Lisa Hammond as a 'masochistic midget.'

psychiatry, in collusion with society at large, has failed those young women who have been abused.

The potential problems with this metaphorical gesture (and indeed with ‘cripping up’ in general) can be explored with reference to Sontag’s later work *Illness as Metaphor*, in which she argues that ‘the healthiest way of being ill – is one most purified of, most resistant to, metaphoric thinking’ (1991, 3). This view is at odds with her earlier, ‘almost unqualified’ (1965, 212) pleasure in *Marat/Sade*, a play in which madness has an unequivocally metaphorical function. This shift in Sontag’s thinking cannot be understood without reference to her own experience of breast cancer – a consideration which returns us to the question of ‘real’ lived experience as against a dramatised or metaphorical appropriation of it.

While *Augustine* does not engage directly with the ethical implications of ‘cripping up,’ Neilson’s *Marat/Sade* sets questions of lived experience against its representation by casting Lisa Hammond, who has a restricted growth condition, as the Herald, in a motorized wheelchair.⁵⁸ Juxtaposing a real, physical disability with the excessive actorly portrayal of madness both reveals the representations more clearly *as* representation, and draws Hammond’s own body into the unstable representational economy: are we to take her disability as an incidental bodily feature, like hair colour, or to understand it solely within the totalising metaphorical framework of Charenton? The question becomes more vexed following a comment of Marat’s:

You still talk like a grand seigneur
and what you call the indifference of Nature
is your own lack of compassion (34).

At this point, Hammond drops out of character, destroying the theatrical illusion as she exclaims ‘Hello, Stratford!’ and asks for donations to cover the additional costs she faces as a disabled actor. It is possible to read this moment as an ‘unmasking,’ a display of Hammond’s ‘real self’ as she reveals her vulnerability to the audience and confronts them with genuine lived experience in contrast to the mocking stereotypes embodied by the rest of the cast.

However, this reading is radically undermined by what happens next. An audience member (there is no evidence in the prompt book that this is a plant) provides a pound coin, at which

⁵⁸ Importantly, Hammond also starred in the first production of O’Reilly’s *peeling*, a fact which places Neilson’s production the more strongly in dialogue with discourses of ‘cripping up,’ and the ethical questions raised by asserting that disability can meaningfully be represented by non-disabled people.

point the cast explodes with outrage, including shouts of ‘fuck off,’ and Sade continues the play, attacking Marat’s use of the term ‘compassion’:

Compassion is the property of the privileged classes
When the pitier lowers himself
to give to a beggar
he throbs with contempt
To protect his riches he pretends to be moved
and his gift to the beggar amounts to no more than a kick (34-35).

For all its pretensions to ‘reality,’ then, Hammond’s appeal to the audience is merely an extension of the play’s metatheatrical structure – she ‘plays’ herself in order to illustrate a point in the philosophical debate between Marat and Sade about the ethical status of charitable giving.

Drag and the politics of representation

These critiques of ‘cripping up,’ despite their ethical force, are not the whole story. Indeed, some of them are based on conceptions of acting which do not hold up in practice. Carrie Sandahl (2008, 237) offers three reasons to avoid ‘cripping up’: ‘economically for the livelihood of disabled actors, aesthetically in terms of portraying the intimate depths and complex life experiences of the disabled character, and politically as a form of solidarity.’ The first and third of these are legitimate reasons to cast disabled actors, not only in disabled roles but more broadly (as Neilson does with Hammond). The second, however, is more questionable, so it is worth quoting Sandahl’s reasoning at length:

[D]isabled actors argue that non-disabled actors, no matter how good their technical skill at imitating the physicality of a disabled character [...] or how good their research [...] they lack the lived experience of disability necessary [...]. Non-disabled people, even fine actors, understand the disability experience primarily through stereotypes available in mainstream media. These actors often focus on getting the outward shell of the characterization right [...] but have little access to the lived experience of disability. Experiences such as being stared at, using personal assistants for activities of daily living, living with pain, dealing with access issues, and navigating social services and the medical establishment are unavailable to most non-disabled actors (236).

This argument relies on the twin assumptions that direct lived experience is necessary to embody a disabled character on stage, and that theatre is primarily about achieving a physical verisimilitude. It also repeats the claim that direct sensory access to the experience of the Other is impossible, and hence (as discussed in relation to Zahavi and Levinas) that a political project which aims to communicate the social experience of being disabled through theatre is also impossible.

A possible solution to this problem involves a re-valuation of 'cripping up' which suggests an ethical and political potential for the practice. This revaluation may be possible through Judith Butler's approach to drag. Butler's more general notion of performative gender has been influential both in gender and theatre and performance studies, as well as in broader political debates around feminism and LGBT issues. Many feminist approaches to representation in film have focused on the role of the implicit male gaze (for a seminal example see Mulvey 1975), and much continental feminist theory had been concerned with finding a language in which women can express themselves (such as Cixous's 'écriture féminine' (1976), a concept which also influenced Furse when writing *Augustine*). By contrast, Butler's approach has been to undermine the notion of 'some existing identity, understood through the category of women [sic], who [...] constitutes the subject for whom political representation is pursued' (1990, 1). She achieves this by replacing the notion of an essential gender with the idea that 'gender is the repeated stylisation of the body, a set of repeated acts within a highly rigid regulatory frame that congeal over time to produce the appearance of substance, of a natural sort of being' (33).⁵⁹

Butler sees drag as a pastiche of gender (this time 'performed' rather than 'performative'), arguing that 'in imitating gender, drag implicitly reveals the imitative structure of gender itself – as well as its contingency' (137). In this model, drag is 'metatheatrical' in that it draws attention to the real-life social structures within which gender is performed. Butler draws on Fredric Jameson's concept of 'pastiche': 'a neutral practice of mimicry, without parody's ulterior motive, without the satirical impulse, without laughter, without that still latent feeling that there exists something normal compared to which what is being imitated is rather comic' (Jameson 1992, 167). In a later article, Butler (1993, 24) clarifies her position on drag, arguing that drag performance reveals that 'gender is neither a purely psychic truth, conceived as "internal" and

⁵⁹ It is worth noting here that 'performative' is distinct from 'performed' – 'performative' language, in J. L. Austin's (1975) formulation, requires a set of framing norms within which the performative utterance takes place. For Butler (1993, 22), 'it's a girl' is performative in the same way Austin's example 'I now pronounce you man and wife' is – it constructs the baby as female within the social norms which surround gender.

"hidden," nor is it reducible to a surface appearance; on the contrary, its undecidability is to be traced as the play between psyche and appearance.'

Although Butler's reliance on psychoanalysis reintroduces a dualistic conception, specifically of psyche/appearance, the framework of drag can offer some insights into the theatrical effects and political potential of 'cripping up.' What follows relates to the performance of *madness* specifically – the issues surrounding the mimicry of other disabilities, especially in cases where these simulations feed into clichés of disability as tragic, or as a 'freak show' spectacle, are more complex, and a full discussion is beyond the scope of this section. Madness, however, remains more analogous to Butler's notion of gender, a condition whose physical expression is structured through a 'repeated stylisation of the body.' As demonstrated above, this stylisation is the basic structural principle of Furse's play.

By thinking of *Augustine* as 'mad drag,' the ethical spectator can begin to approach the play's representation of madness differently: both accepting that Augustine's hysteria was shaped by her experience of abuse and lack of social support, also refusing to reduce her experience of madness to this. To adapt Butler's terms, Augustine's madness (and staged madness in general), can be read as 'undecidable,' and 'its undecidability is to be traced as the play between psyche and appearance' (1993, 24). In this way, the 'mad drag' in *Augustine* can be read as a critique of the kind of representations Koppers, Sandahl and O'Reilly oppose, but from within. Madness here is embodied in order to reveal its performed nature, an approach noted by Jeremy Kingston (1991) in his review: 'Shona Morris finds a balance between defencelessness and defiance that makes her anguish real, yet just sufficiently "performed" to explain Freud's fantasy that it is fantasy.'

By drawing attention to the tension between performance and psychic distress in Augustine's madness, Furse gestures towards a conception of madness beyond that allowed by the narrative structure of her play. A 'mad drag' approach on the part of an ethical spectator can help to tease out and extend these gestures 'beyond.' If, as Furse suggests 'anorexia and bulimia are the contemporary manifestations of hysteria,' (McFerran 1991) then how can we acknowledge this without reducing the lived experience of people suffering from those conditions to a banal condemnation of celebrity culture? Understanding that madness involves an element of physical performance also recognises a root of psychic pain which cannot be fully 'grasped.' This dual recognition preserves the transcendence of the Other, and hence our ethical duty towards them.

Empathy and the destabilisation of representation

What is at stake in these debates is precisely what is at stake in Levinas's ethical philosophy: do our ways of thinking about the Other serve to recognise them as infinitely, unknowably Other, or do we create a structure (an ontology) within which we can construct them as objects to be grasped within our own knowledge? In Neilson's treatment of the 'charity' scene, Sade understands all charity as objectifying – the Other to whom we give is not recognised as truly different, but is rather a way of externalising our own complicity in the systems which make charity necessary in the first place. This is also a potential risk of the notion of ethical spectatorship, and of the 'mad drag' model suggested above: our attempts at ethical activity are an *act* – an affectation which we use to justify ourselves while colonising the experiences of others. Indeed, this concern is similar to Breithaupt's (2012) view of empathy as a mechanism to support our prior 'decision for' an Other.

However, Breithaupt's account does not totally vindicate this cynical approach. As we saw above, empathy does not function in a straightforward way. It begins as an embodied process which is 'blocked' before entering the cognitive processes of decision-making (85-86). Brook's production destabilised the processes of 'deciding for' by manipulating this embodied aspect of empathy. Neilson makes it almost impossible to 'decide for' any character, as the characters themselves do not remain stable for long enough. Furse's dramaturgy sets up a dialectic between the deliberate performance of hysteria and the (unknowable) psychic pain underlying it. We 'decide for' both Augustine and (to a lesser extent) Freud, and even when Freud is revealed to be repeating Charcot's domination we are still able to recognise his motivation.

In drawing attention to the representational strategies within which we 'perform' our own identities, the notion of drag not only asserts the opacity (and hence unknowability) of the stage body, but of all bodies. In revealing differences (of ability, race and gender) as emerging through embodied social performance as much as essential bodily characteristics, the productions under discussion here open themselves up to ethical critique for their objectification of Others. However, they also reflect that charge back at the audience by positioning them as spectators who have work to do, and who may themselves construct totalising narratives, only to have them undermined by the 'undecidability' of madness's role on stage.

Conclusions

This chapter, in exploring the status of embodiment in *Augustine*, and relating this exploration to the role of the body in *Marat/Sade*, has drawn attention to a wide variety of potential

representational strategies. Peter Brook's production manipulates the audience's empathic reaction in order to provoke questions about their decision-making processes. Jeremy Sams presents no such problems of empathy, appealing to the liberal consciences of his audience by fostering a strong empathic connection with the brutalised patients. Anthony Neilson relates the representational economy of the theatre to that of everyday life, revealing the extent to which social conventions can prevent us from relating to the Other as Other. In Furse's play, the shaping of Augustine's embodied experience by the asylum, and her response to this process, form a 'mad drag' performance, demonstrating the complexity of the procedures by which psychiatric knowledge is generated. All four productions share common features: the manipulation of empathy as a strategy for illuminating debate, the use of physical violence to elicit embodied responses from audience members, and a concern with the tension between what can be known from the surface and what the Other is, in fact, experiencing. These concerns and techniques provide fertile material for an ethical spectator interested in the embodied consequences of the philosophical primacy of ontology, and of selfhood.

Chapter 5

The contemporary scene: objecthood and subjectivity

The above discussions have sought to offer a historical overview of representational approaches to madness in British theatre since 1960. The examples have mainly been drawn from straightforwardly 'dramatic' forms of theatre, involving an enclosing fiction, and with limited influence from other modes of performance. Similarly, the discussion of the ethics of embodying madness took as its basis the psychological/Stanislvskian mode of actor training which has come to be known as classical. This focus on what could (simplistically) be called 'traditional' drama has yielded a number of insights into modes of representation. The early chapters of this thesis, exploring how different uses of space can probe different questions about madness, revealed that the interaction between 'inner' and 'outer' states is mutually reinforcing, so that different (physical) spaces lead to different manifestations of symptoms, while the representation of different symptoms can cause space to be experienced differently by both actors and audience members.

Questions of 'inner' and 'outer' were also addressed in discussing embodiment. This section drew on: philosophical views of the nature of the body's relationship to the mind, including those of Descartes and Merleau-Ponty, as well as the debate between Foucault and Derrida about the status of 'madness' in Descartes's *Meditations*; perspectives from the cognitive and neurosciences; and the ethical philosophy of Levinas. In recognising both the endurance and the limitations of a dualistic understanding of the body and mind, focusing on the status of the body in representations of madness suggested a move towards an ethical spectatorship. This approach recognises that the Other (whether or not they are an actor) is experienced as opaque, as an Other whose status (for example, as mad or sane) is unknown, and who therefore cannot be 'captured' within social models of madness.

These themes are also present in contemporary modes of performance, both those which have emerged from live art, and those which fit broadly within the aesthetic identified by Hans-Thies Lehmann (2006) as post-dramatic. This chapter will examine two examples of contemporary performance practice in order to explore how they engage with and beyond the dualities identified in the preceding discussions of space and the body. Drawing on theoretical discussions of autobiographical performance and puppetry, my own experience as a spectator at the performances in question, and personal interviews with key practitioners, this chapter will reflect on the status of madness in performance today.

This chapter will discuss two performances: Laura Jane Dean's *Head Hand Head* (2013), a solo autobiographical performance about Dean's experience of Obsessive Compulsive Disorder; and Theatre Témoin's *The Fantasist* (2012), which combines the techniques of puppetry and Lecoq-derived physical theatre to explore bipolar disorder. These performances were chosen because, together, they cover many of the aesthetic and thematic issues characterising representations of mental illness in the second decade of the twenty-first century. They also exist within a growing ecosystem of politically engaged work addressing questions of madness and performance. James Leadbitter, who performs under the name 'the vacuum cleaner,' explores questions of power, space and madness in *Mental* (2013, an autobiographical performance told through official documents including a police file) and *The Assessment* (2014), among other work. The company BearDog (Joni-Rae Carrack and Calum Anderson) spent 2014 developing a puppet-based piece called *Do You Mind?* about Generalised Anxiety Disorder. These 'mad performances' fit within a broader trend of performance work addressing questions of disability in 'live art,' celebrated in a 2011 London festival *Access All Areas*, organised by the Live Art Development Agency. The preceding discussions of *Marat/Sade*, and of feminist performance practices, have already gestured towards the increasing concern with diagnostic categories following the publication of DSM-III (Jeremy Sams's *Marat/Sade*, Sarah Kane's *4:48 Psychosis*), the move away from traditional, Victorian asylum spaces, and the concern with individual rather than collective experience. The breadth of contemporary performance work about madness maintains these developing concerns, while also integrating a wider range of performance techniques.⁶⁰

Beginning with an overview of contemporary performance techniques and aesthetics, this chapter will explore the categories of subjecthood and objecthood, how they connect with the issues of history, ethics, space, and the body emerging above, and their relationship to mental illness. I will use *Head Hand Head* to discuss the issues which emerge when placing the 'Self' on stage – how does the performance's minimalist aesthetic and overtly autobiographical content engage questions of truth and falsehood, and implicate the audience as spectator, witness, or bystander? This discussion of selfhood leads on to the more complex theatrical situation of *The Fantasist*, in which fairytale and puppetry combine to bring objects (and objectification) to the fore, encouraging the audience to interrogate the extent to which they consider a 'self' with mental illness to be a self at all.

⁶⁰ This characterization is necessarily simplistic, and is not intended to give the impression that there was somehow a definitive shift in representational techniques at a specific date. Indeed, non-traditional performance techniques have with a long history of being used in representations of mental illness, with productions including Sarah Daniels's *Beside Herself* and Anna Furse's *Augustine (Big Hysteria)* employing techniques beyond those of the traditional stage to reflect the psychological states of their protagonists. However, it is only in more recent years that the focus has been more explicitly on diagnostic categories.

Contemporary performance aesthetics: an overview

Many scholars have attempted to define and maintain a hard-and-fast distinction between 'traditional theatre' and 'contemporary performance.' The very multiplicity of these approaches speaks to its difficulty: Elinor Fuchs (1996) has explored the 'death of character' in 'postmodern' theatre and performance; Hans-Thies Lehmann (2006, 22) has proposed the term 'postdramatic' in contradistinction to a 'dramatic' theatre in which 'what we perceive in the theatre can be referred to a 'world,' i.e. to a totality'; Richard Schechner (1988, 2013), from his position as an academic and a practitioner, has eschewed both the terms 'theatre' and 'drama' in his focus on a notion of 'performance.' Even these three examples make it clear that a thoroughgoing analysis of what precisely makes contemporary performance different from more traditional approaches is beyond the scope of this chapter. Rather than attempting such a definition, I will give a more detailed overview of some of the existing approaches to the problem, giving an account both of their utility and their limitations.

Performance theory, postdramatic theatre, postmodernism

Performance studies – as a practice, a theory, an academic discipline – is dynamic, unfinishable. Whatever it is, it wasn't exactly that before and it won't be exactly that again (Schechner 2013, ix).

This describes postdramatic theatre: the limbs or branches of a dramatic organism, even if they are withered material, are still present and form the space of a memory that is 'bursting open' in a double sense (Lehmann 2006, 27).

My evening in this neorealist world without external referent left me in a prolonged uneasiness, as if my basic ontological security had suddenly become a false memory or the latest disposable product. I had fallen into the mental swoon of postmodernism (Fuchs 1996, 1).

The authors quoted above (among others) have attempted to grapple with the exact nature of a shift in approaches to theatre and performance in the latter part of the twentieth century. Lehmann identifies the key period over which these changes have occurred as 'roughly the 1970s to the 1990s' (2006, 25). However, although it is clear that there is much in common between these characterisations, there is also much debate. What, precisely, might distinguish 'performance' from 'postdramatic theatre?' How do these terms relate to the broader category of the 'postmodern?' Do any of these terms 'stick' when applied to *Head Hand Head* or *The Fantasiist*?

Fuchs's approach to these new theatrical forms is drawn, understandably, from the pervasive discourses of postmodernism. Indeed, for her, it is the 'new epistemological and ontological currents' of postmodernism which variously animate *all* new modes of theatre and performance 'intended to edge [...] differently away from association with the more closed and traditional forms of a dramatic theatre' (1996, 7). Here, Derrida's notion of 'free play' (Derrida 2001b),⁶¹ and Baudrillard's 'hyperreality' (1994, 2) serve to delineate a mode of performance in which the Character (hitherto the centre of the dramatic universe) 'has been pushed out of the center [...] just as Character once supplanted Action, so Character in turn is being eclipsed' (Fuchs 1996, 171). For Fuchs, postmodern performance styles do not replace Character with anything in particular, but with 'a flux of Aristotle's six famous elements' (175) – offering a mode of seeing with an almost religious significance, linked to the Buddha's notion that 'all suffering arises from human grasping for an illusory permanence' (9).

If Fuchs attempts to confront the disconcerting experience of the 'mental swoon of postmodernism' (1) with a Buddhist disavowal of permanence, Schechner's *Performance Theory* (1988), as well as his many other works, attempt to locate the 'dynamic, unfinishable' (2013, ix) discipline of performance within an anthropological 'web' and 'fan' (1988, xii-xv). Schechner argues that 'theatre is only one node on a continuum that reaches from the ritualiations of animals (including humans) through performances in everyday life [...] through to play, sports, theater, dance, ceremonies, rites, and performances of great magnitude' (xiii). This anthropological approach is, in some ways, the equivalent of Fuchs's appeal to Buddhism, in that it recognises the lack of fixity in performance, while also connecting it with other practices seen as central to human communal activity. This allows the potential epistemic threats of instability to be partially contained.⁶²

Lehmann's approach, by contrast to both Fuchs and Schechner, attempts to keep open the sense of uncertainty produced by emerging modes of performance. In the Epilogue to *Postdramatic*

⁶¹ The suggestion of 'undecidability' in the term 'free play' appears to be a result of a translation error in the earliest English translation of the essay 'Structure, Sign, and Play.' See McGowan 1991, 26 (note) for more detail.

⁶² Indeed, Schechner himself recognizes a similar process as he discusses the processes of 'cooling off' and the 'aftermath' of performances: 'the aftermath includes spreading the news about performances, evaluating them – even writing books about them – and in many ways determining how specific performances feed into ongoing systems of social and aesthetic life' (1988, xiv). By recognizing that thinking and writing about performance can themselves be part of performance, Schechner also recognizes that the ways in which we practice containment are key factors in how we experience performance itself.

Theatre, he notes that ‘for a politics of perception in the theatre, it is not the thesis (or antithesis) that counts, not the political statement or engagement [...] but rather a basic disrespect for tenability or positive affirmation’ (2006, 186). In other words, it is not what the theatre (postdramatic or otherwise) *says* that matters, but rather what it *does*. For Lehmann, this is the ‘transgression of taboos’ (186), the engagement with experience *before* the moment at which the audience is able to rationalise what it has seen.

Within this model, theatre challenges appeals to any rational structure which attempts to stabilise experience. Rather than stability, ‘in the age of rationalisation, of the ideal of calculation and of the generalised rationality of the market, it falls to the theatre to deal with extremes of affect by means of an *aesthetics of risk*, extremes which always also contain the possibility of offending by breaking taboos’ (186-7). However, taboo breaking does not itself define the ‘postdramatic.’ Indeed, the rejection of ‘positive affirmation’ ensures that, if the postdramatic is to be defined as anything, it is as a theatre in which Aristotle’s ‘six elements’ (mentioned by Fuchs) are metamorphosed, undermined, or otherwise destabilised.

To return to our earlier questions, then, it seems that the differences between the approaches discussed here are less of form (all three authors draw on the Wooster Group/Performance Group and Robert Wilson as key examples), than how that form is to be taken into account. ‘The postmodern’ remains a frustratingly nebulous concept, at once usefully and unhelpfully contained within Jameson’s (1986) rubric ‘the cultural logic of late capitalism.’ ‘Performance,’ similarly, offers useful perspectives on both aesthetic events and broader cultural activities, but begins to lose its precision as a way to analyze straightforwardly aesthetic events when we begin to ask questions like ‘to what extent does our very survival as a species depend on [...] [e]xactly how a crisis is “handled” – played out, performed’ (1988, 283). ‘Postdramatic’ theatre, in its purest form, is probably something more radical than either of the examples discussed here: David Barnett suggests an almost ascetic process, in which ‘the freedom of interpretation in the auditorium is balanced by a raft of performative rigours involved in resisting representation’ (2008, 22). However, this does not mean that Lehmann’s approach cannot illuminate the current discussion. Rather, if there is a continuum of postdramatic theatre in which narrative is ‘pushed back [...] from an “almost still dramatic” theatre to a form where not even the rudiments of fictive processes can be found’ (2006, 69), then this continuum includes dramatic theatre which is ‘almost postdramatic,’ and which, therefore, shares features with its more clearly postdramatic kin.

Importantly, what these approaches have in common is the destabilisation of those elements (character, narrative, representation) involved in the audience’s processes of ‘knowing.’ This

destabilisation is one reason for the more general difficulty of defining and delineating contemporary theatre and performance. To take the example of character, Michael Kirby explores the idea of 'not-acting,' noting that the performers in Happenings 'generally tended to "be" nobody or nothing other than themselves' (1972, 3). As a result, he proposes a continuum between 'not-acting' and 'acting,' making a basic distinction between 'matrixed' and 'non-matrixed' events. This notion of a 'matrix,' which refers to the surrounding structures of 'pretended or represented character, situation, place and time' (4), can here provide a language for that which becomes more or less unstable in the kind of work under discussion.

Modes of performance which destabilise the matrices of 'dramatic theatre' have obvious links to the representations of madness already discussed. The multivalence of asylum spaces calls into question the signifying qualities of the stage. Feminist dramaturgies of madness draw attention to the contingency of the scientific and medical gazes. The difficult ontological status of the 'mad' body interacts with other 'matrixed' elements to call into question the distinctions between 'mad' and 'sane,' but also between 'acting' and 'not acting.' For Lehmann, Kirby's analysis is useful because it 'brings to prominence the vast terrain "below" classical acting' (2006, 135). In the present discussion, the value of Kirby's approach lies in the fact that interrogating the position of the 'mad' body on stage can draw attention to the questions and tensions within it. As the status of the body on stage as 'acting' or 'not acting' becomes more unstable, the dramaturgy of 'madness' joins the aesthetics of the postmodern, the performative, the postdramatic. If 'dramatic,' or 'traditional' techniques are already called into question by the processes of staging madness, then developing techniques and approaches, in similarly gesturing towards the limitations of received ways of 'reading' the dramatic stage, can offer performers and audiences new ways to interrogate cultural understandings of madness.

Subjecthood and objecthood

Throughout this thesis, a number of unstable binaries have animated the discussion, both questioning and being questioned by the representations of mental illness on stage: mad/sane; space/place; performer/audience; male/female; what is seen/what cannot be seen; actor/character; ontology/ethics; self/other. Discussing contemporary modes of performance requires the addition of another related binary: subjecthood and objecthood. The traditional philosophical category division has been between subjectivity and objectivity – between what I experience as a self, and the (material or epistemic) truth independent of my own perception. However, if the foregoing chapters have demonstrated anything, it is that the concept of objectivity is not a particularly useful one in discussing theatre and madness: the objective existence or quality of a performance is irrelevant if it is subjectively experienced negatively by an audience, and the

current state of scientific knowledge of mental illness itself is such that every diagnosis involves an act of subjective assessment on the part of clinicians.

The distinction between subjecthood and objecthood, however, does not relate to the existence of what is perceived independent of perception itself, but rather to *how* something is perceived. The distinction adds another dimension to Kirby's not-acting-acting continuum – the performer is not simply perceived as more or less acting, but also as more or less a subject. In 'dramatic theatre,' there is a basic assumption of subjecthood. Fuchs identifies the shift towards character and away from plot (which she sees as mirroring the shift from classicism to romanticism) as being related to a shift from 'the physical realm outside the mind, and often outside the entire human order, to the psychic and spiritual realm within' (1996, 169). The subject, therefore, came to form the center of the theatrical universe and, in Beckett, to constitute a kind of void, 'the ultimate reduction: a single mind, a gaping cosmos' (170).

The focus on the *mechanics* of representation, in performance, postmodern theatre, and postdramatic theatre, offers a way beyond this – but a way beyond which both sidesteps and complicates the gaping subjectivity which emerged from Romanticism. As discussed above, a simple return to objectivity is not possible. Nor, however, is the straightforward, unproblematic representation of subjectivity. Having gazed into the representational void, theatre can no longer claim to reflect objective reality *or* subjectivity in any simple way. As a result, contemporary forms have turned away from these aspects towards 'a whole spectrum of movements and processes that have no referent but are presented with heightened precision' (Lehmann 2006, 69). Lacking a referent (internal or external), the movements and processes of this kind of theatre cannot be meaningfully conceptualised using the terms 'objective' and 'subjective,' but rather exist within a dynamic space between object and subject.

Scottish Dance Theatre's short duet *Drift* (2010) can serve as an example of this.⁶³ Signaled as 'between' media by the company's name, *Drift* resists being read simply as 'dance,' although its major aesthetic reference point is indeed contemporary dance. For Lehmann, 'dance theatre' is an example of a form in which 'the body becomes ambiguous in its signifying character, even to the point of turning into an insoluble enigma' (2006, 96). I would contend that this 'insolubility' emerges, in part, from the undecidability of, the oscillation between, the dancer's body appearing as *object* and *subject*. In *Drift*, physicality, rhythm and gesture are foregrounded, as the two performers echo one another, move towards one another, fall apart. The focus is

⁶³ At the time of writing, a single shot document of this performance made using a handheld camera is available at <http://vimeo.com/24827060>.

squarely on their being *as bodies in motion* – on the process of creating a sensation, a visual ‘object.’ At the same time, however, there are tantalising hints, which suggest the still-dramatic elements of narrative, of character. The choice of music, the interactions between the performers (are they linking eyes as ‘characters,’ or just in order to be aware of each other in space? Are they ‘matrixed’ in a narrative? Or not?) suggests the performers are not simply elements of a moving artwork, but are, somehow, the subjects of that artwork as well.

The two case studies in this chapter will be approached through this paradigm, in which the ontological questions of ‘subjectivity’ and ‘objectivity’ are replaced by an interaction between the categories of ‘subject’ and ‘object’ which recalls Levinas’s (1979) ethical call to avoid ‘grasping’ the Other. The insistent subjectivity of Laura Jane Dean’s *Head Hand Head*, in which the whole structure of the dramaturgy asserts that this is *her* story, that she is present *as herself*, provides a counterpoint to the puppetry and physical theatre of *The Fantasist*, in which Louise’s subjectivity is at once asserted and deferred, both by the theatrical techniques which draw attention to objects as objects, and through the traces of myth which leave the performance’s conclusion unsettlingly open.

The ‘self’ on stage: *Head Hand Head*

I was worried that it would be kind of self-indulgent and no-one would really care, and they’d just sort of feel like, well, why aren’t you saying this all to a therapist, rather than saying it to an audience?

(Dean)⁶⁴

Head Hand Head is a small-scale, solo autobiographical performance exploring the experience of Obsessive Compulsive Disorder (OCD).⁶⁵ Supported by the Maudsley Charity (2013), which aims to ‘promote positive change in the world of mental health,’ it offers an insight into the genesis of Laura Jane Dean’s obsessive patterns, and the process of coming to terms with and understanding the condition. The small audience (only about ten people at the performance I attended), are seated in a horse-shoe shape around the performer, who sits on a plain chair, an adult version of the childhood chair which is placed next to her. Two household lamps, a standard lamp and a table lamp, provide the only light in the space. The text alternates between

⁶⁴ Unless otherwise stated, all quotations attributed to Dean are taken from a personal interview conducted at the Barbican Centre in London, 17/09/2013. The full text is included in the appendix of this thesis.

⁶⁵ At the time of writing, a promotional video for *Head Hand Head* is available at <http://laurajanedean.com/head-hand-head>

storytelling, direct address to the audience, and the frantic, insistent recitation of patterns of compulsion ('jewelry, light-switch, clothes, wardrobe, lamp, plug, window, locked...'). As the show progresses, unopened bottles of water proliferate in the space between performer and audience, carefully placed as an illustration of the proliferating, automatic thoughts which characterise OCD. Throughout the show, Dean reassures both the audience and herself: 'if I need to, then I can leave'; 'if anyone else needs to, you can all leave.' The experience of OCD is both narrated and enacted, creating a surprisingly intense experience, poised unstably between autobiography and immersion.

Autobiographical performance and representation

Carrie Sandahl defines solo autobiographical performance as follows:

[A] hybrid form with elements of stand-up comedy, poetry reading, and one person drama [...]. Typically, the performer tells stories from his or her life on a bare stage or playing area in front of a live audience. The stories, often recounted episodically, may be connected thematically or chronologically or told randomly, and the performer narrates or enacts them in the first-person past or present tense, often interacting with the audience (2003, 28).

For Sandahl, among others who have discussed this genre in detail, one of the key elements of solo autobiographical performance is the privileging of 'reality' over 'fiction.' This privileging of the 'real' is also found in performance art, echoing Marina Abramović's definition of performance: 'the knife is real, the blood is real, and the emotions are real. [...] It's about true reality' (Ayers and Abramović 2010). Sandahl is particularly concerned with the intersections between 'queer' and 'disabled' identities, and the ways in which performance can build 'alternative communities.'

Dean does not use *Head Hand Head* to claim identities in the same manner as the performances discussed by Sandahl, or by Holly Hughes and David Roman (1998) in their collection *O Solo Homo*. However, the relevance of 'queer' performance to autobiographical performance more generally is revealed in Dean's comment during an interview with me that the first time she tried out a 'scratch' version of the performance 'it was a bit like coming out of the closet, with lots of people who'd known me for a long time but not really known about [the OCD].' This again attests to the sense of 'reality' in autobiographical performance, as well as the value of this kind

of performance as a process of ‘making visible.’ As Sandahl states, while ‘queer’ performance seeks to make invisible *sexualities* visible, what she calls ‘crip’ performance⁶⁶ draws attention to ‘*social invisibility* both metaphorically (as in nondisabled people’s lack of regard for disabled people) and literally (as in disabled people’s lack of access to public spaces)’ (2003, 30).

However, as Deirdre Heddon notes in her book *Autobiography and Performance*, although there *is* an assumed authenticity in autobiographical performance, ‘there is always more than one self to contend with’ (2008, 27). For Heddon, the importance of this is multifaceted: there is the ethical imperative to recognise that every story involves more people than simply the ‘self’ of the performer (125); the clear sense of *representation* inherent in performance; and the inherent performativity of *all* autobiography (Heddon 2006). As a result, there is always a risk in autobiographical performance. This is not simply the risk of solipsism identified by Dean in the epigraph to this section (‘why aren’t you saying this to a therapist?’), but also the risk of voyeurism on the part of the audience, the ‘contemporary cultural appetite to both confess and consume confession’ (Heddon 2006, 138).

Creating a subject: the (autobiographical) body on stage

Heddon locates the origins of autobiographical performance in second-wave feminism, as a form ‘regarded by women as a means to reveal otherwise invisible lives, to resist marginalisation and objectification and to become, instead, speaking subjects with self-agency; performance, then, as a way to bring into being a self’ (2008, 3). This places both the form as a whole, and *Head Hand Head* in particular, squarely at the ‘subject’ end of the ‘subject/object’ continuum. Indeed, the audience is first, very clearly, confronted with Dean’s body as a subject, as a locus of subjective experience. The ‘I’ of her monologue seems unproblematically associated with the body we see in front of us. We hear that her OCD seems to have grown from two well-meaning pieces of advice given by her parents: ‘when your number is up, it’s up. There’s nothing to be done about it’ and ‘don’t worry, be happy. Worrying won’t get you anywhere.’ The rest of the show forms a

⁶⁶ The use of the term ‘crip,’ as an analogue for ‘queer’ is not one with which I am particularly comfortable. Sandahl argues that ‘the term crip has expanded to include not only those with physical impairments but those with sensory or mental impairments as well’ (2003, 27), and laments the fact that ‘the term *crip theory* has not gained wide recognition in the academy – or even among disability studies scholars in general’ (52-3). I would respond that, since it has not gained any more traction in the eleven years separating her article from the present moment, despite the publication in the interim of Robert McRuer’s *Crip Theory* (2006), there is no reason to insist on it in preference to ‘disabled.’ This may be a question of trans-Atlantic fashion – British disability studies scholars and activists have always been more comfortable with the term ‘disabled,’ viewed through the social model as a way to describe society’s failure to provide an environment containing sufficient affordances to allow disabled people equal participation.

meditation on how these banal platitudes have come to be integrated into the logic of compulsion, the necessity to repeat actions over and over until they feel 'right.'

There is, therefore, a sense of communication 'between selves' – the audience recognises that Dean's subjectivity is 'on display,' but also in dialogue both with earlier forms of itself and with the audience. This is reflected in the reviews chosen to promote the show on Dean's own website: 'so relatable, that we're completely invested in her reflections' (Saville 2013), 'blazes with honesty' (Turney 2013), 'nothing is off-limits' (Walsh 2013), 'the truth is terrifying' (Walmsley 2013). Indeed, it is this sense of 'reality' which elicited the show's most negative review – Camilla Halford (2014) for *Everything Theatre* confessed to being 'quietly disappointed by the fact that the craft of theatre wasn't used to full effect.' The centre of the show is the interaction between audience and performer. To paraphrase Heddon, 'the fact that [Laura Jane Dean herself] is standing in front of me sharing stories about [Laura Jane Dean] makes [her] fear [...] somehow palpable; I could touch it and am touched by it' (2008, 3).

This sense of co-presence is continually bolstered, reasserted, by each element of the production itself: the use of props, the arrangement of the space, and Dean's own use of gesture and eye contact. In Dean's own words, 'I wanted it to be intimate, and therefore have kind of a limited audience [...] so not necessarily to feel like we're in a group therapy session, but [...] I was saying, we're all in this together [...] we're close enough.' By asserting her own presence, as well as reminding the audience that they, too, are bodily present with her, Dean finds what she calls 'a focal point [...] a safe point for me on stage' – a point from which she can 'bring into being a self' (Heddon 2008, 3) in dialogue with the audience, but a self which she remains in control of – she is the one who can choose to reassure the audience with a shy smile, with a moment of eye contact, she who brings into being the sense that she and the audience are 'close enough.'

In *Head Hand Head*, then, the autobiographical body on stage opens itself to the audience, writes itself as a subject, and actively encourages a face-to-face encounter. While Levinas would charge the audience to avoid asserting totalising knowledge of the Other, Dean, with her open body language, reassuring tone, and direct address, actively offers this knowledge to the audience. It is not offered as a totality – the show itself is based 'pre-diagnosis and pre [...] fully understanding what [OCD] is' – but the audience is invited to join in the process of gaining knowledge, to be both collaborator with and witness to Dean's experience.

Autobiography and theatricality: who(se) objects?

Despite the evidence presented up to this point, to focus on subjectivity, on the identical 'I,' and on the self offered to the audience, is too neat: as discussed in chapter 3 of this thesis, the body on stage is never as transparent (or indeed as palpable) as it might appear. In our interview, Dean discussed the rehearsal process, during which she worked with Daisy Orton (as co-designer) and Chris Goode (as 'outside eye,' in Dean's words) as one of 'let[ing] it go':

There was that argument where [...] I'd be a bit like, well, I don't want to alter that because, like, the way I've written it is true, and it's like, but for dramatic purposes perhaps we need to, you know, think about could it actually be written a little but like this, or ever so slightly like this?

This account of the rehearsal process makes explicit what is both obvious and overlooked about autobiographical *performance* in general: that it is, as Heddon notes, 'always that' (2008, 10), always produced, and therefore never as spontaneous or immediate as it might appear.

The reviews of the show, the decision to include them as part of the marketing material, and the funding from the Maudsley Charity, all suggest that Dean's body on stage is a privileged presence, guaranteeing the show's authenticity. She is read as 'not acting' in Kirby's terms, specifically as being engaged in 'non-matrixed representation,' since she 'never behaves as if [she] were anyone other than [her]self. [She] never represents elements of character. [She] merely carries out certain actions' (Kirby 1972, 5). However, the term 'read' raises questions here: very fact that, for example, Sandahl can offer a generic definition for 'solo autobiographical performance' (2003, 28-29) suggests that autobiography has its own 'matrices,' its own assumptions of 'pretended or represented character, situation, place and time' (Kirby 1972, 4), and that these generic features have their own impact on how an audience might interact with the performance.

In the *Festival Journal* review, Mike Walmsley (2013) gives an overview of this interaction: 'By offering herself as both speaker and subject, she appeals to the human tendency to watch others, to try to make sense of the minds of others and, perhaps by doing so, to better understand our own.' Here, we begin to get a sense of the instability of the notion of 'subjecthood' presented in autobiographical performance. Although Walmsley is careful to maintain the focus on Dean as 'both speaker and subject,' his writing oscillates around this point. The subjectivity he notes is not the radical self-fashioning which both Sandahl and Haddon see as the function of autobiographical performance at its best, but rather the offering of subjecthood *to* the audience.

In this way, the audience can indulge their tendency to watch, to 'make sense of' (or 'totalise' in Levinas's terms), and, ultimately, to use Dean's experience as a model (an object) for self-understanding.

That this progression, from the deliberate construction of self, to the use of that self by the audience, is a possible response is not a flaw of Dean's production, or evidence of failure (as Heddon [2008] would likely suggest), but in fact a product of the interaction between the categories of object and subject which is central to contemporary performance aesthetics, and to an understanding of madness. The tension between what is 'true,' and what works 'for dramatic purposes' is highlighted in Dean's performance through the use of inanimate objects (the chairs, the water bottles), and a deliberate instability in the use of language itself.

The first point at which the constructed nature of Dean's story is advertised to the audience is through the minimal, though distinctly theatrical, use of props. As already mentioned, Dean does not simply perform on a 'bare stage or playing area' (Sandahl 2003, 28): objects proliferate, beginning with the echoed chairs (one from her childhood bedroom, and one on which she sits for much of the performance) and similarly echoed lamps, and ending with the stage-space littered with bottles of water.

Figure 6: Still from a promotional video for *Head Hand Head* (2013).

These objects already mark the space out as theatrical, rather than merely confessional. Heddon, in drawing attention to the overlooked centrality of space in autobiographical performance, coins the term 'autotopography,' to refer to 'writing place through self (and simultaneously writing self though place) [...] a creative act of seeing, interpretation and invention, all of which depend on where you are standing, when and for what purpose' (2008, 91). The space 'written'

in Dean's autotopography is one which is at once homely (it doesn't 'feel clinical in any way'), and slightly 'off,' (there are too many objects). The objects also play a role in creating the 'intimacy' Dean desired with the audience. Placing the water bottles allows her to move closer to the audience: 'if they're right by people's feet, and between their legs, then [...] the audience are implicated in it, and [...] I'm bringing you into it.'

However, this proliferation of objects does not simply offer a connection with the audience. Surrounded by identical bottles, mechanically reeling off endless lists of things she needs to check (1, 2, 3, 4, 5. 1, 2, 3, 4, 5. 1, 2, 3, 4, 5), her carefully cultivated subjectivity begins to come into question. This is particularly the case at the moments when, rather than Dean explaining her actions herself, a recording of her voice is played through speakers behind the audience, while she performs the actions specified. The obvious 'mediation' at this point explicitly reveals the scripted nature of the performance, drawing attention to the mechanisms of theatre and creating an identifiable split between the body on stage and the subject under construction.

Freed from this direct connection to the constructed 'self,' Dean's body becomes momentarily 'unknowable' – as audience members, we are caught between the affective experience of hearing a torrent of disembodied commands, and the awareness that Dean's gestures are not, in fact, impelled by them. At this point, Dean's body sits between two modes of objecthood – the object of a gaze, presented for the audience to understand and possess, and the object which is opaque and unknowable, which exceeds the theatre's capacity for representation.

'Will you stay with me?'

The resonance of Dean's body, on stage, in space, is therefore doubly unstable: painstakingly constructed as subject, but also, occasionally, becoming simply an object of the audience's gaze, an object through which they can claim vicarious knowledge of OCD. We appear to be in the realm of ontology, of an art that is doubly ethically suspect since it appears to construct the Other as unknowable (as subject not object), but in practice packages something short of the 'truth' of the Other *as that truth itself*. However, this straightforward picture is again complicated, since the performance is constructed so that the audience itself does not escape this oscillation between subject and object, but is instead drawn into it, experiencing itself in this 'in between' state.

This is achieved through a tension in the referentiality of the word 'you' in the performance – it is often unclear who the subject of this pronoun is. Dean makes it clear that this was deliberately cultivated:

[T]here's a lot of questions to the audience, and the references to them [...] just teasing out [...] the ambiguity between the 'you,' you know, the 'you' of the audience, or the 'you' of whoever it is in the story or in my life [...] where the audience were really, hopefully would be really drawn into it.

The construction of the text, and the lyrical delivery, means that there are a number of moments like this – Dean appears to be in the midst of recollection, asking 'will you come with me to the doctor's?,' a question obviously not directed at the audience, but then follows up with 'will you stay with me?' This latter phrase seems obviously to be addressed to the same, absent person as the former – but, repeating it a number of times, Dean makes eye contact with members of the audience, appearing to address them directly, so that 'will you stay with me?' becomes the counterpart to 'if you need to, you can all leave.' As audience members, we can leave – but Dean would rather we stayed. As she says at another point – 'it's not as bad, when I'm with you' (with whom?).

This tension does not just draw the audience in: it makes us question our own subjectivity. We have been placed, unwillingly, unknowingly, in a position of responsibility for Dean's well being. This position is both powerful and vulnerable. On the one hand, we have the freedom to leave. We have been told that we can leave, if we need to. On the other, however, Dean herself has cast us in this position: she holds the space, has created what she calls a 'safe point,' and is appealing to us to stay. This raises an ethical question, which can be illuminated by reference to Levinas's critique of Claudel. If reducing Jewish figures to mere types of Christian revelation results in a 'petrification of our faces' (Levinas 1997, 121), then to overlay the Otherness of the audience by eliding the distinction between them and an absent friend is to make a similar gesture. Dean's confessions play 'in our lucid life, in spite of us' (Levinas 1997, 122) – our ability to leave is compromised by the fact that, within the fiction of *Head Hand Head*, we are no longer ourselves, but rather 'standing for' Dean's own support network.

Again, however, the dynamic tension between performer and audience, between objecthood and subjecthood, complicates matters. By producing a mirrored sense of instability, so that the audience finds it hard to recognise whether they themselves, as much as Dean, are active subjects or passive objects, *Head Hand Head* produces a shared affective space within which all parties experience a destabilisation of identity, and hence a recognition of the interpersonal nature of

affective experience – Dean notes that, in conversations with audience members following the production, some spectators ‘felt [...] they were kind of helping in some way,’ while also drawing attention to her own desire ‘for the space to feel, I don’t like the word ‘safe’ [...] but] for people not to feel uncomfortable.’ This sense of shared responsibility derives directly from the theatrical techniques which undermine a straightforward sense of truth-telling, folding subjecthood and objecthood together to produce a desire to care for the Other, regardless of their situation, and in recognition that that situation can never be fully known.

Constructing shared subjectivity: *The Fantacist*

This man, who is a puppet, manipulating this woman, it’s really like a projection of the mind
(Yevnine).⁶⁷

Where *Head Hand Head* draws on the aesthetics of solo autobiographical performance to both assert and complicate the idea of subjecthood in madness, *The Fantacist* places its focus squarely in the realm of objects and objecthood. Developed by London based, international devising company Theatre Témoin, *The Fantacist* combines puppetry and Lecoq-influenced physical theatre to tell the story of Louise, an artist who suffers from bipolar affective disorder. In a stage-space resembling an artist’s garret, Louise is alternately visited by a nurse, a friend, and a wide range of puppets which reflect her mental state – from abandoned art projects become sentient, to a tall, blue-faced gentleman who seems at once muse and tormenter.

During the performance, Louise experiences these puppets both as delightful and terrifying, and the audience enters into her experience through a process of analogy. Echoes of the fairytale *Bluebeard*, relics of an earlier incarnation of the show, prevent the audience from comprehending events as a straightforward narrative or characters as straightforwardly representational. Although no members of the cast or crew have experienced bipolar affective disorder themselves, two of them have experience of caring for family members with mental illness. Julia Yevnine, the main performer, has spent 24 years (since early childhood) supporting her mother, who has the condition.

⁶⁷ Unless otherwise stated, all quotations attributed to Yevnine are taken from a personal interview conducted at the Underbelly, Teviot Place, Edinburgh, 28/08/2013. The full text is included in the appendix of this thesis.

'Double vision': puppetry and physical theatre

Both puppetry and what is called physical theatre interact in complex ways with the ideas of subjecthood and objecthood. Definitions of the puppet vary (see for example Tillis [1992, 59-86], Francis [2012, 13-24]), but in all cases the basic elements are the same – the puppet is always clearly an object, but it is manipulated on stage in such a way that both other characters and members of the audience interact with it as though it were a subject. Physical theatre, on the other hand, involves the playing down of a subject's 'subjecthood' so that the body's object-like characteristics can become more visible. The combination of these elements on one stage is what enables *The Fantastist* to imply a 'projection of the mind.'

Yevnine attended l'École Internationnal de Théâtre Jacques Lecoq, and Lecoq's pedagogical techniques can provide a way to think about the interactions between objecthood and subjecthood in *The Fantastist*. Simon Murray (2002, 28) notes that the process of training in wearing a neutral mask requires 'a number of incremental stages – identification with the elements, with matter, with animals, with colours – culminating in exercise where characterisation is permitted.' This resonates with Lecoq's (2000, 39) own comments that 'beneath the neutral mask the actor's face disappears and his body becomes far more noticeable [...] every movement is revealed as powerfully expressive.' The function of the neutral mask is, in effect, to remove self-consciousness, to find 'a state of discovery, of openness, of freedom to receive [...] of perfect balance and recovery of movement' (38).

This notion of unselfconscious neutrality provides another connection between physical theatre techniques and puppetry. In his seminal essay 'On the Marionette Theatre,' Heinrich von Kleist (2012, 123) discusses the superiority of puppets over human dancers, and notes a significant difference between the two which gives the puppet an advantage over the human: 'a puppet does not give itself airs and graces. Affectation appears, as you know, when the soul is elsewhere than at the centre of gravity of a movement.' Lecoq's neutral mask exercise, in both removing those unconscious gestures which determine 'self' and (initially) in fostering identification with objects, animals and colours rather than human characters, seeks a similar end-point to Kleist - the achievement of 'grace' (Kleist 2012, 124) or, in Lecoq's terms, 'freedom' (2000, 38).

This is the real tension of puppetry, and the tension which lies at the heart of *The Fantastist* - puppets fascinate us because they are 'graceful,' because they are free, *and also* because, being objects, they cannot be free, since they has no life, no existence, outside the (human) force

which animate them. In order to approach the use of puppetry in *The Fantacist*, I will draw on Steve Tillis's concept of 'double-vision.'⁶⁸ For Tillis (1992, 59-64), previous attempts to conceptualise the status of the puppet on stage have failed, because they have maintained too strict a binary between the puppet as object and the puppet as subject: Otakar Zich recognises that the puppet can appear to the audience as *either* animate *or* inanimate, but '*only* one way at a time' (quoted in Tillis 1992, 54); Thomas Green and W.J. Pepicello (1983) allow a relationship between the two ways of seeing, but argue that one way is 'disattended' at any given time (see Tillis 1992, 60-61); Henryk Jurkowski (1988, 41), possibly the most prolific writer on puppets, coined the term 'opalescence' to refer to a point at which 'the object is still the object and the character at the same time,' but did not see this dual appearance as *inherent* in the puppet.

Tillis's concept of 'double vision' goes further than all these conceptions, to argue that:

Every puppet, in every age, in every theatre and tradition, invites its audience to acknowledge, at once, its two aspects; [...] through the tension inherent in this dual acknowledgement, the puppet pleurably challenges its audience's understanding of what it means to be an "object" and what it means to have "life" [...] the audience sees the puppet, through perception and through imagination, as an object and as a life; that is, it sees the puppet in two ways at once (1992, 63-64).

In *The Fantacist*, this double vision functions as a way to alter the audience's perception. As Yevnine says 'I'm not interested in showing a realistic aspect, I think transposing is more interesting.' This is partly an ethical question – not having personal experience of bipolar disorder, she mentions being concerned 'is it legitimate, what I am doing?' The process of transposition, avoiding the temptation to offer something that looks like 'truth' (perhaps using an aesthetic similar to that of *Head Hand Head*), helps maintain the Otherness of the Other.

⁶⁸ The term 'double vision' itself is not ideal since, as has been explored in previous chapters of this thesis, the category of vision is itself problematically associated with notions of truth, transparency, and objectivity. Similarly, discussions of the cognitive dimensions of 'spectating' in the theatre have drawn attention to the fact that this experience is always fully embodied, and not limited to visual 'reading' of on-stage action. However, it is clear from Tillis's suggestion that the audience sees 'through perception and through imagination' (1992, 64) that he does not intend 'vision' to reduce all perception to vision, but rather to use vision as a metaphor for sense perception more generally. Similarly, the pun in 'double vision,' which implies 'seeing double,' nicely captures the sense of instability and disorientation produced by this aesthetic effect.

Thinking about shared subjectivity

This process of transposition, of using a process of performance and analogy to create an altered perception can be clarified and further explored in dialogue with Nicola Shaughnessy's training programme for volunteers with a project called *Imagining Autism*. This project aims to use 'interactive, multi-sensory, immersive installations, in conjunction with play-based performance, puppetry and digital media as a means of facilitating language, attention, empathy and imagination for children with a diagnosis of autism' (2013a, 323). This training programme involved a session called 'Perceiving Differently':

Trainees physically explored autism and participated in exercises, based on ideas from Ting Theatre that could give them experiences of what autism may be like. Nicola carried out exercises designed to confuse the left and right hemispheres of the brain, experience old objects in new ways and find the pleasure in "stimming" behaviour, as well as rocking and spinning (*Imagining Autism* 2014).

The similarities between these processes and those employed by Theatre Témoin should be clear: both involve techniques drawn from contemporary performance aesthetics to give some insight, clearly signaled as limited and analogous, into altered states of cognition.

However, the differences in context and intent are just as, if not more, important. While the exercises in the 'Perceiving Differently' training work on the subjectivity of individual participants, creating a confusion between affect and embodied experience as participants attempt to walk fast but feel sad, for example, *The Fantasiist* sets up a space of shared subjectivity. As audience members, we are drawn into Louise's experience not through our engagement in exercises designed to alter our perception, but through our sharing in the 'double vision' provided by the puppets. Melissa Trimmingham, a co-investigator on the *Imagining Autism* project, suggests a way of exploring this shared subjectivity through the insights of the cognitive and neurosciences. She concludes her discussion as follows:

[W]e experience on stage the very essence of creative thinking and the imagination in action, a moment that can subsequently be analysed if we wish in terms of conceptual blending, metaphorical truth, and basic schemas of thought. With this in mind puppetry, as a physical medium of communication, can key into what is normally lost to us, so that we notice both the normally unremarked and also precarious nature of our self hood [sic] (2013, 10).

Central to Trimmingham's argument, then, is that puppets, as objects, can provide insights into the nature of our own subjecthood. In the course of her discussion, Trimmingham notes that 'puppetry is an example of a space of shared cognition almost entirely dependent on expanding thought through the use of material objects' (10). Trimmingham draws on theories of extended cognition and conceptual blending to illustrate the point, particularly Edwin Hutchins's contentions that culture is 'a human cognitive process that takes place both inside and outside the minds of people' (1995, 354), and that the 'outside' portion relies on external, material anchors to stabilise concepts into things groups of individuals can agree on (2005).

This notion of interpersonal agreement, of interpersonal cognitive activity through objects as mediators, returns us to the question of empathy discussed in the previous chapter. To recap, I introduced a model of empathy (based especially on the work of Dan Zahavi [2010, 2012] and Fritz Breithaupt [2012]) which considered it as a mode of perception. According to this model, some kind of phenomenological access to another's mental experience is possible. This allows for a genuine affective empathic experience, but does not assume that my understanding of the Other is necessarily accurate, or that my affective experience is necessarily the same as theirs. Hutchins's recognition of the importance of external 'anchors' for cognition, in combination with Matthew Ratcliffe's work on the phenomenology of mental illness, can help us to think about how the shared subjectivity produced by the 'transpositions' in *The Fantastist* might shape the audience's affective and cognitive responses.

Transposition: empathy and shared subjectivity

Discussing the phenomenology of depression, Ratcliffe claims that depression is characteristically difficult to describe, and therefore to empathise with. His proposed explanation for this resonates with Hutchins's notion of external 'anchors':

Most of the experiences that we relate to each other occur against the presupposed backdrop of a shared world, in the context of which self and other are taken to have differing experiences and thoughts. When that backdrop is itself altered, as it is in depression, the result is quite unlike forms of mundane experiential change that presuppose its stability (2013, 272).

For Ratcliffe, the problem is not that the depressed person knows that her experience of the world differs from that of her peers. After all, all empathy requires knowledge of that difference, otherwise humans would constantly experience the kind of pathological self-loss described by Breithaupt (2012, 85) in which it becomes impossible to tell the difference between our own

experience and that of the Other. Rather, the difficulty lies in an inability to quantify, or even fully to believe in that difference, so that ‘the attempt to empathise [either by or with the depressed person] proceeds on the assumption of a common ground which is not there’ (Ratcliffe 2013, 273).

One function of the puppetry and physical theatre in *The Fantacist*, then, is to facilitate a sense of shared cognition between performer and audience. Although the shared cognition which emerges in puppetry is common, it is also obviously distinct from normative cognitive experience. Puppetry, and the kind of ‘neutral’ physical performance fostered by Lecoq training, is a particularly rich medium for fostering this kind of shared space. Anna Furse (2008, 21) describes the uniqueness of the puppeteer in ethical terms: ‘[p]uppeteers are unlike other actors because they are entirely committed to the Other [...]. It is a question of attention and the places that the performer draws attention to and from.’ In *The Fantacist*, this commitment to the Other, this direction of attention, has the effect of ensuring that the audience, by the process Yevnine describes as ‘transposition,’ are able to share in an experience which is recognisably different from the ‘presupposed backdrop’ which otherwise makes understanding difficult.

Louise’s experience is of a world in which objects do not just have affordances (characteristics which present themselves as suited to a certain task [see Gibson 1977]), but also possess their own subjectivities. An abandoned sculpture climbs out of the wastepaper basket, communicating in squeaks, because Louise never gave it a mouth. In the heights of her mania, it seems that the theory of affordances is actually inverted – rather than her seeing paintbrushes as affording the action of painting, the paintbrushes take the initiative, seeing her as affording being painted with. The entire room takes on a texture of possibility – a standard lamp comes to life, she dances with a jacket as though it is her lover, a roll of masking tape flies and floats like a balloon.

Figure 7: Still from promotion video for *The Fantacist* (2012).

The audience is able to enter into shared subjectivity with the performers through Tillis's double vision: the things in Louise's room are at once 'objects' and 'subjects' – we are clearly not operating within the same 'presupposed backdrop' any more. Yevnine describes this process as one of entering into Louise's logic – 'we know that they [the puppets] don't exist, but we accept that they exist so we enter another world.' This other world is one in which perception is different, in which the audience has been engaged with on 'another level of their brain than just intellectual.'

By opening up a new world, *The Fantacist* begins to suggest a new way of looking, what Ratcliffe calls 'radical empathy,' a process in which 'the sense of belonging to a shared world comes to light as a phenomenological achievement, one that is prone to considerable variation in structure' (2012, 491). In other words, by entering into the world of *The Fantacist*, the audience is confronted with the fact that others may perceive the world in a radically different way. Yevnine draws attention to this as follows:

You feel [the puppets] existing also for yourself [...and] understanding when they disappear and for her [...] it was real, and so the audience can connect with this idea of like 'but that existed, but it's not any more.'

While *Head Hand Head*, in its focus on the oscillation between subjecthood and objecthood, constructs a sense of shared responsibility for shared well-being, *The Fantacist*, by enacting the process by which objects come to be perceived as subjects within the shared cognitive

environment of the theatre, draws attention to the degree of ‘interpersonal difference’ (Ratcliffe 2012, 491) which pertains especially in mental illness.⁶⁹

Conclusions

The examples of contemporary performances about mental illness discussed here demonstrate a number of differences from the approaches already discussed in this thesis. Most significantly, they develop, and offer the audience, aesthetic structures which complicate and draw into question the traditional reference points of the theatre: plot, character, setting, representation. In addition, they deliberately and explicitly focus, not on the general categories of ‘madness’ or ‘mental illness,’ but on specific conditions described in the two major documents of psychiatric diagnosis: the DSM (IV or V) and the ICD-10. Finally, despite this focus on diagnoses, their physical setting is domestic rather than medical, with medical practitioners and structures providing only side issues, rather than the major sources of conflict as in *Marat/Sade*, or the plays of Sarah Daniels, Sarah Kane, and Anna Furse. They also demonstrate significant differences from each other. The aesthetic of *Head Hand Head* deliberately partakes as little as possible of theatricality, stripping down the stage space and audience numbers in order to focus more fully on Dean’s construction of herself as a subject. By contrast, *The Fantasist* deliberately deploys the representational techniques of theatre, both constructing objects as subjects and using physical techniques to emphasise the object-like characteristics of the body.

Despite these differences, however, both point the way towards a model for staging mental illness which shies away from straightforward claims to ‘representation.’ A particularly useful concept which emerged from this discussion is Yevnine’s term ‘transposition,’ which describes an approach to staging which shies away from claims to representational truth in favour of grasping something of an affective experience. Despite its apparent gestures towards ‘authenticity’ and ‘truth,’ *Head Hand Head* can be seen as a process of transposition just as *The Fantasist* can, since it foregrounds how solo autobiographical performance can be used as a mode of reflection on personal experience.

Contemporary performance aesthetics, then, whatever name is given to them, and however they are conceptualised, provide a powerful tool for the exploration of madness on stage. By transposing personal experience into a structure which both offers the audience an affective

⁶⁹ Ratcliffe (2012, 491 [note]) suggests that differences predicated on discontinuous cognitive environments also include ‘somatic illness, trauma, bereavement, childbirth, and mystical experience, amongst others.’

experience and challenges their structures for making sense of what they perceive on stage, both *The Fantacist* and *Head Hand Head* bear witness to the complexities of mental illness, constructing their subjects as Others whose minds the audience can perceive empathetically, but not necessarily understand, or grasp through knowledge. As such, it is unsurprising that both have been able to produce conversations about mental illness which extend beyond the current clichés of ‘ending stigma.’ Stigma itself is predicated on an ontological understanding of the other, but so long as anti-stigma campaigns, or representations of mental illness on stage, treat ‘real knowledge’ of madness as an equally ontological proposition, the structures which perpetuate stigma will continue.

Epilogue and reflection

The above discussion suggests that representations of madness in British theatre over the past half-century or so draw on broader trends in theatre and performance, as well as on developing cultural understandings of madness itself. However, they have also suggested that theatre is not merely reactive in this process, but rather enters into a constructive dialogue with cultural models of madness. As the point at which abstract cultural assumptions are made concrete by the interaction between bodies in space, theatre makes the relationships of power and knowledge which inform these assumptions more clearly visible.

In addition to this, the relationship between audiences and on-stage action offers the potential for an ethical interrogation of these power relationships, including the actor-audience relationship itself. This is not an automatic effect of the theatre, and requires that both actor and spectator be ethically engaged. Being aware of the need for this two-way ethical reflection can help avoid simplistic approaches to performance which fail to take account of how the audience is positioned. It can also challenge equally simplistic suggestions that performance is unable to meaningfully engage in culture.

In this epilogue, I will restate the main research questions, and give a summary of the central findings of the thesis. Following this, I will suggest that these findings can be thought of in relation to three themes: (in)visibility, fluidity, and identity. Thinking about my findings under these headings clarifies the main contributions this thesis makes to the literature, and its implications for current debates in the theatre and performance studies in general and the study of representations of madness in particular.

Research Questions: A Recap

This thesis explored how madness has been represented on stage in the British theatre of the late twentieth and early twenty-first centuries. My approach was guided by three subsidiary questions:

- (a) What is the role of space in representations of madness on stage?
- (b) What are the ethical implications of representing the embodied experience of mental illness?

(c) What happens when both space and the body are called radically into question by contemporary performance aesthetics?

In order to address these questions, I selected a number of case studies which embodied broader representational trends, and gathered information about them from archive materials, newspaper reviews and personal interviews. I then discussed these case studies in dialogue with a combination of theoretical approaches, including treatments of madness, ethics, and space in continental philosophy, and the cognitive turn in theatre and performance studies.

Summary of findings

In answer to research question (a), I found that the spatial histories of madness, the move from the asylum to the 'secure psychiatric facility,' through the liminal spaces of 'half-way houses' and 'community care,' have had a decisive influence on the spaces of madness on stage. Developing a taxonomy of 'mad' stage spaces from the work of Henri Lefebvre, I found that psychiatric spaces, both on stage and within broader cultural understandings, emerge from and are challenged in the interaction between institutional frameworks and the embodied practices which take place within them. It became clear that there was a particular interaction between discourses of gender and of 'mad' space, with both Sarah Daniels and Sarah Kane staging direct confrontations between feminist politics and changing institutional practices.

Research question (b) emerged from my recognition of the centrality of embodied experience ('mad' spatial practice) to the representation of space. On more closely examining questions of embodiment in relation to madness, I found that acting itself is associated both philosophically and culturally with a loss of reason, and of humanity. Drawing on Emmanuel Levinas's argument that the foundation of philosophy should be an ethical recognition of the transcendent unknowability of the Other, rather than an ontology focused on the Self, I found that focusing on how performers, directors, and playwrights manipulate the actor/audience relationship provides a 'way in' to thinking about ethics. I suggested that an 'ethical' representation of madness is not the sole responsibility of the actor, playwright, or director, but requires an 'ethical spectator' prepared to do the necessary work to consciously avoid reducing the body of the performer to an object they can claim totalising knowledge of.

Research question (c) provided a way to re-integrate the artificial separation between space and the body in questions (a) and (b). I found that, despite the diversity of approaches encompassed by 'contemporary performance aesthetics,' there is a dual turn towards the local as opposed to the institutional, as well as towards a diagnostic sense of 'mental illness' rather than a more

general ‘madness.’ In addition to this, there is a greater sense of the ‘unknowability’ of what is being offered. Borrowing a term used by performer Julia Yevnine in an interview, I found that ‘transposition’ of the experience of mental illness to the stage was a key concern in both case studies I explored. This involves an ‘offering’ of affective experience (through the mechanisms of empathy), rather than a sharing of absolute ontological truth. An approach which aligns its conceptions of space and embodiment in order to achieve such a ‘sharing’ may be able to ‘teach’ ethical spectatorship, as well as an ethical response to mental illness more generally.

Synthesis: putting the pieces back together

The three questions which organised this study and made it manageable cannot be kept artificially separate, and common concerns emerged over the course of the discussion, which have a bearing on the central research question. A key concept in the representation of madness on stage is *(in)visibility* – what appears as ‘given,’ and what apparently ‘given’ concepts disguise. Lefebvre discusses twin illusions of ‘transparency’ and ‘substantiality’ (the latter of which could also be called ‘opacity’), and sees them as mutually supportive, providing an oscillating image which obscures the processes which produce it. He sees the ‘illusion of transparency’ (1991, 27) as a key feature of space in the post-Enlightenment period. This illusion suggests that everything can, essentially, be known, be ‘grasped’ by sight, and is inherent in many of the spaces of madness (asylums, locked wards) based on the principle of surveillance.

Levinas too sees a danger in too readily ascribing ‘knowability’ to the body, since this illusion of knowability tends almost inevitably towards a way of thinking which commits the violent act of imagining the Other as identical with the closed system into which they can be categorised. The oscillation between transparency and opacity is also at the heart of the contemporary performance practices addressed in chapter five. These practices draw attention to the processes of meaning-making, revealing how concepts come to *appear as* either transparent or opaque (as object or subject). In this way, many contemporary practices attempt to frustrate both potential ways of knowing. In specific relation to madness, these approaches assert that the complex ‘truth’ of madness is, ultimately, less important than recognising the limitations of that truth. Instead of seeking totalising knowledge which makes the individual transparently known, or asserting a mystical ‘naturalness’ in madness, these techniques draw attention to the vale of fostering truly ethical relationships with individuals.

Representations of madness in British theatre and performance, then, are intimately connected to far deeper questions about the nature of selfhood. Indeed, the effect of madness on stage is often to draw attention to the limitations of the isolated Enlightenment self posited by

Descartes. *Pace* Foucault, this is not straightforwardly because Descartes expels madness from the Cogito, but rather because madness itself makes no sense outside an interpersonal, intercorporeal setting. As audience members are asked, in various ways, to alter their perceptions of madness, and to empathically share the perceptions of the bodies presented on stage, they are also given the opportunity to reassess their own immediate reactions.

Another concept which bridges the discussions of madness, space, embodiment, and performance is the notion of *fluidity*. Considering the interactions between these elements as fluid suggests an approach akin to what Nicola Shaughnessy calls 'thinking in threes' (2013b, 18-23). Thinking about the fluidity of theatre and performance can help to draw attention to the limitations of both purely subjective and purely objective approaches to madness. In performance, madness is shown to emerge within constantly shifting intercorporeal interactions, interactions which take place in spaces which are themselves produced by the interaction of unstable approaches to space (Lefebvre 1991, 33).

This idea of shifting interactions chimes not only with Lefebvre's spatial triad, but also with Breithaupt's (2012) 'three person' model of empathy, Philip Barnard's (2004) 'Interacting Cognitive Subsystems,' and John Lutterbie's appropriation of Dynamical Systems. By exploring how the effects of performance, and the effects of madness, emerge *between* categories of analysis, rather than directly *from* them, this thesis has suggested an approach to the representations of madness in the examples discussed which refuses to finally categorise their intent or effect, but rather maps out the terrain in which they operate.

The most crucial element of contemporary stagings of madness, however, is *identity*. The question of identity underpins both (in)visibility and fluidity, since, at bottom, it has to do with exactly what we think madness *is*. In the introduction to this thesis, I noted a shared concern with identity both in the history of psychiatry since the eighteenth century, and in the development of British theatre since the nineteen-sixties. In both these histories, individual identity becomes more and more fragmentary: theatre challenges Enlightenment constructions of identity ever-more stridently, while psychiatry, despite its claims to be better able to isolate the identities of the disease entities associated with 'madness,' has also done its part in destabilising absolute concepts of identity.

Over the course of this thesis, the destabilisation of identity, and the intimate connection between categories of identity and concepts of madness, have been repeatedly demonstrated. The modes of surveillance, both penal and clinical, which form part of the matrix which produces the stage-spaces in which madness occurs, aim to identify the kind of madness being

experienced, but at the expense of the identity of the individual. The dialectic between transparency and substantiality calls the identity of space itself into question. The practice of acting, the questions that practice raises about Cartesian constructions of selfhood, and the cultural association between acting and madness, demonstrate the centrality of identity to all theatre, and especially that which involves taking playing a role involving madness. Conceptualising intercorporeal experience in the terms of phenomenology, and of Levinas's ethics, helps to provide a way to take identity into account while avoiding seeing identity as something essential, immutable or purely individual.

Contribution to the literature

This thesis engages with a broader interest in the intersection between theatre and mental illness. Previous studies relating to this have included Russell Davis (2002) and Oyeboade (2012) from the psychiatric profession, and Bartleet (2003), Fenwick (2000), Fensham (1998), Harpin (2013), Johnston (2004), and Kaplan (2005) from theatre and performance studies. A recent volume (Harpin and Foster, 2014) draws together essays on madness and performance by a variety of scholars and practitioners.

My work contributes to these literatures, and the broader field of theatre and performance studies, in a number of ways. The primary contribution is the attempt at a synthetic understanding of the representation of madness in British theatre. By considering the effects of different approaches to space and to the body, and placing these approaches in dialogue with psychiatric and theatre history, I have been able to offer an account of how the representation of mad bodies in performance space might *work*. Both the experience of *performing* madness, and the experience of *spectating* at a performance of madness involve a number of inter-related processes, related to what I have called (in)visibility, fluidity, and identity. It is only by taking into account the fluid interactions out of which a particular performance's construction of the identity and (in)visibility of madness emerges that we can fully assess that performance.

This thesis engages in the interdisciplinary conversation about the representation of madness evidenced in the work of Russell Davis, Oyeboade and others. The intersection between theatre and the study of the brain is proving to be a rich seam, both for theatre and performance scholars, and scientists interested in cognitive and neuroscience. My project contributes to this by drawing attention to the polyvalence of the performance situation, and approaching it from the point of view of performance studies and psychiatric history, drawing on both continental philosophy and the cognitive and neurosciences and demonstrating that these discourses are not (as Hart (2006) and McConachie (2008b) suggest) incompatible, but rather provide mutually

illuminating perspectives. These perspectives meet and interact in the fluid 'in between' space, a space also inhabited, as I have demonstrated above, by performances of madness.

In addition to its project of synthesis, this thesis also contributes by extending the *range* of discussion about madness in theatre. In choosing case studies, I deliberately gave sustained attention to both mainstream, canonical performances of madness (the three productions of *Marat/Sade*, Sarah Kane's plays), and lesser-known productions (*Head Hand Head*, *The Fantacist*). Engaging with more canonical performances, performances about which much has already been written, enabled me to draw attention to those aspects which, although central to the effect of the productions, have been previously overlooked, or at least only briefly addressed.

Much has been written, in relation to *Marat/Sade*, about the importance of the interaction with the audience (Parham 1977), about the importance of philosophy (Beggs 2013), about its political project (Kowsar 1984). What has received less study is how the *space* of the asylum affects the philosophical, political, and interpersonal performances of madness, and how the play's performance history reflects broader cultural concerns about madness, especially in the British context. The feminist plays of the late 1980s and early 1990s have formed important jumping off points for scholarly discussions of the role of abuse in mental illness (Debling, 2008; Griffin 2000). However, although Bartleet (2010) and Godiwala (2003, 119-154) make brief reference to Daniels' use of space in relation to queerness, the effect of her use of space in relation to madness has not previously been examined in detail.

While it cannot be said that the theme of madness has not been discussed in relation to Sarah Kane's work (indeed, the question is almost *too* well trodden), approaches such as those of Ken Urban (2001, 2004) and Ellen Kaplan (2005) continue to draw their readings of Kane back to the biographical details of her life. Even those authors who seek to conceptualise Kane's work as having a broader significance have had, necessarily, to justify their decision to shift their focus in this way. In the wake of the 'ground clearing' achieved by Alicia Tycer (2008, 35) in arguing that audience responses 'are not limited by Kane's personal narrative or their own' my treatment of Kane's work attempts to move beyond the questions of whether or not the plays should be seen as autobiographical which have formed the basis of much existing work.

Especially in the final chapter, I also pay scholarly attention to more recent and lesser-known work, specifically *Head Hand Head* and *The Fantacist*. These particular performances were chosen both because they encapsulate broader trends in performances of madness, and because they are extremely effective in their own right. In the specific context of my argument, they help to illustrate my suggestion that there is no straightforward formula for an 'ethical' performance

of madness, but that such an ethics emerges in the interactions between subject and object, between audience and performer. More broadly, however, I hope that, by discussing them in this context, I will also bring them to the attention of the community of scholars interested in madness and performance, in the hope that others may see other possibilities in them, and indeed may subject my readings to critique.

As suggested above, this thesis does not contribute solely to the study of madness in theatre, but also to broader discussions of ethics in theatre and performance. In his recent short book, *Theatre and Ethics*, Nicholas Ridout (2009), traces the history of theatre's interaction with ethical reflection. The question of ethics is also implicit in the 'liveness' debate between Peggy Phelan (1993) and Philip Auslander (1999), a debate which was, at bottom, about the nature of theatre and the possibility of encountering the 'Other' in performance. While the question of encounter is vexed in relation to 'traditional' theatre and performance, James Thompson's (2010) appeal to Levinas's concept of the 'face to face' in his discussion of applied theatre reveals that the idea remains central across widely divergent performance contexts. Each of these authors engages with Levinas to some extent, and Phelan (2004) also makes a direct appeal to Levinas's discussion of the 'face-to-face' in *Totality and Infinity* (1979).

Engaging with these questions from the perspective of the representation of madness, this thesis offers a challenge to many of the assumptions which underpin the popular reception of Levinas in discussions of performance. Phelan and Thompson see the 'face-to-face' as important (if not central) to the ontology of performance, while Auslander sees it as impossible in an increasingly mediatised cultural landscape. By contrast, my approach builds on Ridout's reading of Levinas, and his suggestion that a truly ethical theatre is one which requires 'a labour of critical thought' (2009, 69). I argue that theatre and performance scholars should avoid the lure of the 'face-to-face,' however relevant it appears to the situation of the stage. Instead, the value of Levinas's philosophy lies in his central project of making ethics, rather than ontology, the foundation of philosophy. If philosophy is based on recognising the Other as infinitely unknowable, rather than on creating a logical scheme which allows the Self to define and delimit, 'Being,' then a truly ethical theatre is impossible unless both performer and spectator recognise their own *inability* to know the Other with whom they are faced. Thus, an ethical theatre is not a theatre which attempts to *be* ethical, but rather a situation which emerges between a representation which is aware of its own limitations, and an ethical spectator willing to recognise that their own understanding will always be partial.

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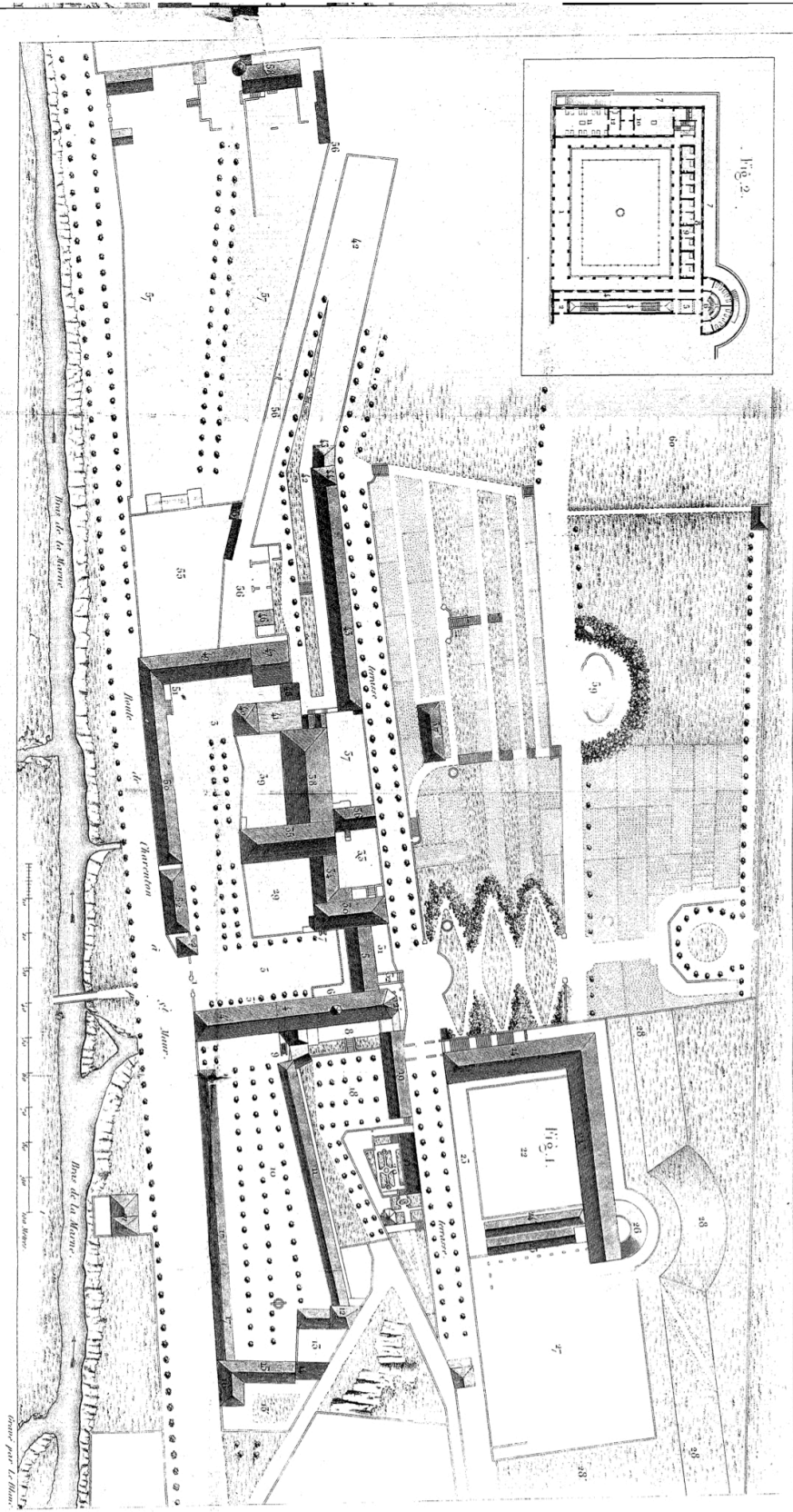
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Appendix 1: Diagram of Charenton

Source: Esquirol 1838b, pl. XXVII



Appendix 2: Interview with Laura Jane Dean (*Head Hand Head*)

17/09/2013, Barbican Centre, London

LJD: So obviously my solo show, *Head Hand Head*, which is based on my experiences of living with Obsessive Compulsive Disorder and anxiety and really kind of pre diagnosis and pre kind of fully understanding what it is, cause obviously a lot of childhood and growing up, and yeah, so I started writing it about two years ago now, and didn't really want to start writing because I was worried that it would be kind of self-indulgent and no-one would really care and they'd just sort of feel like, well, why aren't you saying this all to a therapist rather than saying it to an audience.

But then I kept writing and then sort of tried it out in front of a few people and then did like a scratch show, down at the Tom Thumb, and kind of had a really good response, and then it was a bit like coming out of the closet, with lots of people who'd known me for a long time but not really known about it, and then just carried on writing and doing it.

CDJ: So where did the impulse come from, the idea to go "I'm going to write about this", where did that come from?

LJD: At the time I really wanted to make a new show, I wanted to make something, and, I think it just kind of kept rattling around in my head, and also just that thing of "well, if I'm going to write something then I should just write about what I know," and obviously this is what I know. And I think I remember one afternoon I was like, I'll just sit down, and I'll just start writing, you know, what is as it is in my head, and then kind of got a bit...like I started it and I wanted to keep writing.

And so it was kind of a bit of both, like, because at the time as well I was getting to the point where I was actually understanding what it actually was, and also realising that I needed to be referred and I needed a proper diagnosis and I needed proper treatment, so I think I was trying to understand it, because I'd not been diagnosed before and I was, well basically I had very severe anxiety, and then all the kind of routines I would do, and I never kind of put the two together, and no kind of counselor or therapist that I saw put the two together either. And then I started to read about OCD, like, just online and Googling stuff and reading stuff, and being like "oh my God, why has nobody told me that this is what I have", because it just makes perfect sense, and it's not that I'm, you know, completely losing my mind, it's that it's this thing and there's a reason for it and so, yeah, I think it all sort of came at the same time, of wanting to make a show, of kind of discovering the OCD, and yeah, just writing things down.

CDJ: And did you, kind of, research it beyond your own experience, or was it just, kind of, completely from where you were? Did you kind of go off and say "right, I'm going to read about -", I mean obviously you were doing research anyway cause you were reading about OCD, but how did that, kind of, work [alongside writing the show]?

LJD: Yeah, it's kind of tricky because, I was doing a lot of research on the internet, but, what was happening was that as I was reading other peoples' experiences of having OCD, it was having a bit of a negative impact, so I was reading about their obsession, and then being like 'oh God, what if I...' or "Why am I not worrying about that? I should be worrying about that!" And so, I kind of had to stop, because otherwise it would have been – It just kind of felt "right, I've done enough", and there were a few stories that, kind of, didn't particularly, that were kind of quite similar to what I was, to my particular obsessions at the time, so they kind of stuck in my head, and you know, when we went into rehearsals they kind of, we talked about them and stuff, so it was kind of there, but I think I always knew that this show would be, you know, just basically

everything that had been in my head, so yeah, it was kind of, you want to know more, but, you know, the more you read, and then, just, maybe it's not the healthiest situation to be in.

CDJ: And when you went into rehearsal, what were the kind of influences on your dramaturgy, on your approach to making things, and more general influences?

LJD: I think, because I worked obviously with Daisy Orton, we've worked together before, so we understand each other and we know how each other work, and because I'd done a few scratch performances where it was just me kind of sitting on a chair, and mostly just kind of reading it, so I know that it wasn't going to be a big show, it was going to be a small show, and because mostly the writing was kind of there. And then we worked with Chris Goode, who came in and spent some time with us in rehearsal, and his role was to just really look, I guess he was kind of dramaturge, in a way, because he really looked at the text and he looked at the structure, and he looked, basically just taking everything that I'd written and worked with us to give it a shape, because it didn't have a shape, it was just, you know, this, all these bits.

And the way he worked was, I'd not worked in that way before, and looking at it really as more of a score, and because it's more lyrical anyway and because there are different speeds and different tones at different points, and so, you know, and I think because he's done a lot of solo work and like solo autobiographical work as well, and he said that his role really was being the audience's friend, because he also didn't know me at all, so he was a really good objective outside eye, and I think that really helped with the text, because he was able to say "well, for me, that bit really isn't kind of, earning it's keep, that bit isn't quite...but this bit is really..." and I think because obviously it's so personal to me, and it had been in my head so much, and obviously I'd written it, that that was quite a difficult job for me to do, so having him come in, and then also Daisy, who's more kind of looking out of like, not necessarily from a director point of view, but just kind of like, bringing in other movement and bringing in action, and, you know, what else is there in it, apart from me sat on a chair. So, it was collaborative, and I think because I'd not made a show like this before, that it was really important to have, you know, that kind of outside eye, and basically structuring it into a show, rather than just, so and in a way I just had to kind of let go of it a bit, and let it, like, be kind of...and there was that argument where it's like [inaudible] might want to alter something, and I'd be a bit like, well, I don't want to alter that because like, the way I've written it is true, and it's like, but for dramatic purposes, perhaps we need to, you know, think about could it actually be written a little bit like this, or ever so slightly like this, and so, there was that sort of...

CDJ: Yeah, that makes sense. So, do you think there's something particularly powerful about the structure you used, about the very simple approach to staging and the very small amount of movement, that kind of ties with the subject matter, do you think there's something particular about that way of doing it?

LJD: Umm, yeah, I mean I think it always felt like, ultimately, it just needed to be a conversation between me and the audience, because of what it was about, and I think that, yeah, because I think that when I first started off doing it and I was doing a couple of scratch shows, and I was doing it for kind of bigger audiences, and I think it was working, but I think there was a bit of, there just wasn't quite the intimacy, and the eye contact, and really, kind of, me, sort of, taking people through it, and being able to smile and look at them, and be like, you know, I'm telling you all this, and it's ok, and I think that that's...and then I did a scratch of it where I only did it for ten people, in a semicircle, and that definitely worked, 'cause all of a sudden it kind of, you know, was actually 'we're all in this together,' it's not kind of me over here and I've got this problem, and I'm trying to talk to you about it, and then there's a bit of a distance because you're in the audience, it's like, well, actually, bringing them into it, at the same time as saying, you know, it's ok, it's fine, we can sit here and I can tell you about this. And so I think that because it was so personal and obviously about the OCD and about the anxiety that, yeah, it needed the

intimacy, and it needed to be simple. Me and Daisy [Orton] talked a lot about, you know, does it need more, and I think as we went along it was always like, no, I think, it just needs me to be sharing something with the audience.

CDJ: How did you decide which bits to emphasise with movement?

LJD: I think we tried a lot out, and then I think there were some bits, when we made the decision to have the two, there were two recorded bits of text, which were both kind of running through routines really and what was going on in my head, and I think there's kind of, yeah, in that way for the audience to kind of experience it more I guess, it was kind of separated, so it wasn't me telling you something it was you listening, you're basically sort of being in my head whilst I was doing things, so when I would tap the chair and tap the lamp and set the water bottles out, so I think it was kind of separating out, and I think that's when it started feeling more, kind of, theatrical, and I didn't want there to be too much of that. But I think probably Daisy and Chris were a bit more pro there being, not necessarily more to it but it not just being sitting on the chair, and even to the point where I was very reluctant for there to be any music in it or any kind of, or what would happen with the lights, and so I was very much hesitant, and more like, you know, just because I didn't want to take anything away from it. So, yeah, I hope that we sort of got the balance right.

CDJ: Well, I thought you did when I saw it. That was *way* back. Can you say any more about the rehearsal process?

LJD: Yeah. It felt a bit like, it was quite therapeutic in a way, it felt a bit like, I dunno, I think I got about half way through the rehearsals and kind of freaked out a bit and, you know, was a bit kind of overwhelmed by what I was doing and whether I was going to be able to actually do it, it was a bit like 'Oh my God, like, why, why am I doing this, maybe it's too much, maybe I'll get caught up in it or I'll lose myself in it or, you know, I won't be able to, kind of, separate it out.' Because obviously talking about obsessions that had past, and also some stuff that is still current, and that kind of thing of not wanting to kind of be...reconnecting it in a way that could potentially trigger stuff again. So I think I kind of went into the beginning of rehearsals being really excited and then about half way through kind of, you know, was like 'oh, actually perhaps I need to be, you know, a little bit careful' but it was an experiment, I didn't know how I was going to feel. And I think also something that I had a lot of conversations about in rehearsals was my anxiety and not showing my anxiety when I'm performing, or not necessarily feeling it, but then also I dunno, that kind of tension between me as me and me as performer and how that was going to sit with what I was talking about, because I'm talking about being very very anxious, and being fearful, but whilst sat, you know, on stage, talking to an audience, and basically kind of holding everything together, so...and also, you know, about the kind of self indulgent side, and whether there's a nod to that, or...so yeah, the whole rehearsal period was, you know, obviously quite intense.

CDJ: That kind of leads onto another question I wanted to ask. Could you say something about the experience of performing it?

LJD: Yeah, I always think that when I'm performing I'm at my least anxious, and the OCD kind of goes away. Having said that, before I perform, I get incredibly, incredibly anxious, and I think what I kind of felt, especially in the first few shows that I did was the...kind of, obviously in the show, as I was just saying, kind of acknowledging it and saying to the audience that, kind of 'If I need to then I can leave' and 'If anyone else needs to, you can all leave' and then before going on stage kind of saying that to myself, 'well, if I do feel really bad, or if I suddenly have a massive panic attack, then I can leave,' but then being in it, and then of course not wanting to leave, because I was in it, but then also kind of feeling the pressure of having to, because it's just me on stage, and so, of having to hold it together really, and it was a bit like, how much do I show of the

anxiety, how much do I kind of control, and I think that has always shifted, like, every single time I've done it because obviously if I'm having a good day or a bad day, or, it's always shifted. And people who've seen it a number of times have sort of said that, and I know myself that I probably, when I'm feeling more, kind of, assured, and when I'm feeling, you know, quite calm, then actually the show still kind of works, but... I dunno, I guess if I'm a bit more on edge then it kind of, I don't know whether it kind of gives something else to it. But then I don't want to be, it's not that I'm acting, being anxious and being... yeah, so that's very rambly and complicated, I don't know, I still don't know how to pick it apart, I don't know what bits of it is me on stage, you know and what bit of it is normal pre-show nerves, and what bit of it is the OCD and what bit of it is the anxiety and what bit of it is the audience, and you know.

CDJ: Yeah, I mean that's one of the central tensions in autobiographical work full stop. Like, where are you in that, it's pre-scripted, but it's about you, and that kind of balance. The last kind of thing is, could you talk about the use of space, and the way the space is set up, and how that interacts?

LJD: Yeah. So, yeah, like I was saying, I wanted it to be intimate, and therefore have kind of a limited audience, and to kind of have the audience ideally in a bit of a horse shoe, so not necessarily to feel like we're in a group therapy session, but to kind of, you know, we are, like I was saying, we're all in this together, and you know, we're close enough. And I think, because we did work with a designer as well, so felt that there needed to be like a focal point for me, and really I guess kind of like a safe point for me on stage. And then obviously the image of the little chair, which was in my childhood bedroom, that kind of comes up a couple of times, and so, yeah, taking that and making it an adult chair and that being, kind of, the place where I'm sat talking to you and it's ok, and then I think, really, to kind of encourage the kind of intimate nature with the, and also to take into consideration that it wasn't necessarily going to be in studios, it was going to be in non theatre spaces as well, so then obviously like the lamps, kind of came in, and then really kind of wanting to fill the space between me and the audience with something, we didn't start out thinking 'we need a symbol,' it was more kind of, well, the water and the water bottles keep reoccurring [At this point we were interrupted by a woman searching for the Barbican ticket office].

Yeah, so, I think the water bottles in the space became, and I think it was, I'm trying to think how it all came about. There was a decision between, it can either only be one water bottle or it needs to be like, 40, and so we went with lots. And I think then to kind of, with the water bottles, and with the audience being so close, and when I'm laying the water bottles out, and if they're right by peoples' feet, and between their legs, then again you know the audience are implicated in it, and that kind of, I'm kind of bringing you into it. But then in that it being important to have the 'you can leave.' It's not, yes it's quite intense and, but there is a space. And not wanting the space to feel clinical in any way, or alien, or unfamiliar, or kind of scary or uncomfortable and not really like a place where you want to be, and so I think you know with the chairs and with the lamps, and, you know, even with the water bottle, you know, it's an everyday object not, kind of, filling the floor with knives or anything. So, yeah, I think there was a very conscious decision for the space to feel, I don't like the word 'safe,' safe space, but you know, so people feel ok, you know, because of what I'm saying, for people not to feel uncomfortable.

CDJ: There's been quite a lot about protecting the audience, in what you've said.

LJD: Not very much about protecting me!

CDJ: That's all I've got to ask, if there's anything else that's popped into your head say that, but other than that I'm happy.

LJD: I don't know, I think from some conversations I've had with people who've seen it, just that they kind of felt that it was, they were kind of helping in some way. And I think again, you know, the intimacy and the space, and you know obviously the direct address, there's a lot of questions to the audience, and the references to the, I think that was another important bit, you know, with rehearsals, just teasing out those bits where it was, you know, the ambiguity between the 'you,' you know, the 'you' of the audience, or the 'you' of whoever it is in the story or in my life. So, and I think I remember us kind of pinpointing the moments, you know, where the audience were really, hopefully would be really drawn into it, and you know, rather than it just being a barrage of me being just 'blahlah, this is everything in my head, like, take it and deal with it. So, yeah, I think that was an important part. Yeah.

CDJ: That's great, thanks.

Appendix 3: Interview with Julia Yevnine [*The Fantacist*]

23/8/2013, Edinburgh

CDJ: You mentioned a bit about where the piece came from last night,⁷⁰ could you say a bit more about that?

JY: The way we proceed, we're a devising company so everything we do we start with ideas and we improvise, and the way we started with this project actually had nothing to do with mental health, we just had this idea we wanted to work on the tale of Bluebeard, which is very well known in France, but less in the UK, the story of this guy killing his wives because they opened the forbidden chamber, you know the story?

CDJ: Yes

JY: I was working with another deviser and she suggested that we use puppets and I was like, 'fine,' I didn't know anything about puppetry, but she knows, and so we started working on this story, with puppets, with this idea of like manipulation of the mind, because this man, in the story of Bluebeard, manipulates the women somehow make them open the bloody chamber, and I was interested because this story has different layers, so many layers, you know?

And so we started working, playing around this theme, but then suddenly, through the process of devising, this theme of mental health raised up, and it happened that myself and the other performer, we both had mothers with mental health problems, and it came as something, I don't know, like an evidence, to work, but the puppetry helped us finding the subject, and we thought, quite naturally, ok, this man, who is a puppet, manipulating this woman, it's really like a projection of the mind somehow, so it was, yes, it was like an evidence it was not a decision that we took, but it made so much sense, so we thought, ok, that's our theme, and we still worked on the theme of Bluebeard until a point where we found that the structure of the tale itself was restraining us from developing more about the mental health issue, so we said, ok, we're going to leave, now, the story of Bluebeard, but the main puppet is still called Bluebeard(!)

And that was great because, for myself, my mum has been struggling with bipolar for 24 years now, and I'm really close to her, since a very young age I was supporting her, like, trying to help, but I got no support myself and I could see her having no support either so, for years and years I kind of struggled with psychiatrists, like, against them and, like, something has to be done, and I came across also a lot of, like, strange reactions from the society, even from the family and the friends, they all left, you know, and that got me quite upset, and I thought 'ok, this is an opportunity with this show to say everything, not only to say but to change something,' because I'm aware that I can't change my mother's life straight, like, you know, in this kind of way as myself, but with this show I can contribute to talk about her life, you know, honour her battle and also break the taboos because a lot of people, yeah, that's what I was saying last night, a lot of people are concerned but there is not much talk about it, you know?

So that was both, at the same time, for me to really...It's, because, it's not my mum that I'm representing in the show, I mean nothing I show, nothing that happens is her own story, it's just a transposition of everything that I could observe, but it's a way to say, 'look, she's not responsible,' because that's also something I came across so much, it's like 'she's responsible, that's her problem, she's mad and we don't want to deal with that, we don't understand and

⁷⁰ Comments throughout about 'last night' refer to the Arts, Ethics and Society Symposium, hosted by Edinburgh University's Mason Institute, 22/8/2013.

that's her fault, and, you know, push her away,' and so through the show that was a way to say 'we all can fall into that, the battle is really difficult, and she can't solve it on her own, because it's impossible, I mean, like, in the show, I think, it's really clear that because she's manipulated by characters, puppets, it's not in her power to stop it, she needs to be supported, and I think, for me this is the main thing, it's like, trying to show that...the only way, like...that's what I was trying to say yesterday it's like the medical aspect is one thing, but the only way to really stabilise, or, like, get through it, is by having a lot of support on the other side from the family and from the social workers and all that stuff.

CDJ: So, what was your process of researching, or preparing?

JY: Of course, we all read a lot because, with the team that we're working now with, I'm the only one who have really close experience of that, and so of course I shared with them a lot of, you know, what happens when my mum is in crisis, a lot of my relatives. But, I didn't want to be only that, only about her experience and I'm aware that for every person the condition is different, the crises are different, the problems are different, so we all did a lot of research by reading a lot of things, documentaries, and we also went, we worked with NEFLT,⁷¹ North London Trusts, oh, I can't remember, well it's like NHS in North London, and with a psychiatric institution, so we organised quite a few workshops with nurses and bipolar people, which was amazing. But it was not like, we were not like talking with them and blah blah blah, we did theatre workshops with them, but through that they opened, and, I don't know, we also could see, and it was great because nurses and patients were at the same level, and then, I don't know, they communicate a lot with us and we also interviewed the nurses to know more about, like, what is their position, what is their job, like, how do they deal themselves with the situation when it becomes really tricky, and so yeah, that's how we did that.

CDJ: That's great. I like the fact that, yeah, that idea of kind of getting everybody involved is brilliant. And tends to be done...I mean it's tried quite a lot, I mean, but it seems like that was a very, kind of, in depth process.

So what influenced your dramaturgy, the structure of it, the use of puppets? How did that...you've already talked a bit about how it came about, but, talk a bit about your background in training, and then this specific piece.

JY: So, like, we all studied physical theatre, so it's a lot about creating images. For me, it's like, the poetry is really important, so it's about creating images that touch people, not only, you know, the brain, but really like invoke something so they *feel*. And, yeah, this idea of transposition is really important for me, I'm not interested in like showing like, realistic aspect, I think transposing is more interesting, so we tend to do that, and that's what the company does in general, and with this show particularly, I mean the process of creating was fantastic, we had so much fun, because basically, we considered because we chose the puppetry, everything became a puppet, so we use every object in the room, so at first it was just playing, discovering all the possibilities we had, you know, and we discovered it was so much fun, because puppets, they are surprising, even for ourselves, like, at first you don't know, but like, yeah, this ash-tray can become something totally different [*she brings the ash-tray to life, shuffling across the table*], and so the process was fantastic, really fun for us.

And at the same time we always tried to keep in mind, you know, the ups and downs of what we want to say, and how do we show that, you know, and also because bipolar people, when they are high, they are so incredible, they feel so incredible, so you feel incredible as well, and they have a

⁷¹ Actually NELFT, North East London Foundation Trust.

sense of humour, you know, the brain, they are super wit and they are, it goes *fast* and it's fun and we wanted to show that, also this sense of humour, that is very important, and if you interview people who are bipolar they would tell you that these are the best moments of their lives, you know, until it goes too far. So yes, there is always a moment where this energy, this like, how do you say it, enthusiasm, then they're not in control any more so that's where it becomes dangerous, so we wanted to show that through, yeah, the images that we create, they are nice at first and then it becomes kind of nightmarish.

But the puppetry, I found, like the puppetry was perfect because puppets can show you everything, like, can be extremely fun and extremely dark, puppets can die and it doesn't matter, you know what I mean? And also because this idea of manipulation, so the puppets are manipulated, and that's how they exist, and you, as an audience member, you see, you know that they don't exist for real, but still, there is a magic to that, and that was interesting because for this character in the story, they exist for her as well, you know, it's like really entering her own logic and world where things exist, and you as an audience you appreciate that, so you feel them existing also for yourself so for me that was important to put the audience in this same aspect of like 'yeah, these characters they are real' and then it's understanding when they disappear and for her it still, it was real, and so the audience can connect with this idea of like 'but that existed, but it's not any more, it's like...' you know what I mean?

CDJ: What do you think puppetry adds, what are the advantages of puppetry over, kind of, more naturalistic approaches, in your opinion?

JY: Well, yeah, this sense of poetry, this sense of, like, they defy, is that a word, defying, they go against, you know, the law of gravity or the law of, you know, and they bring something, yeah, projection of the mind, so they can talk to the audience, to another level of their brain than just intellectual, because there is a lot of reference, because, like, by reference I mean they suggest much more than a real person somehow. Because we know that they don't exist but we accept that they exist so we enter another world, and that's interesting.

CDJ: Yeah, and I think that's really important. What's it like to perform? I know it's quite a wide question, but I'm just interested in what the experience of performing the piece is.

JY: It's really fun, I mean it's a challenge because it's very physical, but emotionally, because everything is based on images it is not my personal emotion that I'm, you know, if I'm on stage sometimes it happens that I really cry, but it's not my real emotions, it's the character and it's, if that comes, I mean sometimes I don't cry sometimes I cry, but if it comes, it's because of the rhythm of the play, you know, and that opens something in the character, but that's not my personal emotion, so I feel totally safe.

And I have a lot of fun, when, like the few times when it was really hard is during the touring we did in May and June in the UK we performed in a few psychiatric institutions around the country, in front of nurses and inpatients, and that was much more difficult for me, just the fact to be in a psychiatric hospital for me, you know, because I know this place and I know what's going on there and that touched me, so it was much harder also because you know we performed in a random hall with no light, no curtains, in the middle of the day so I could see the people and I spend so much time facing the audience, but then I could see them and they could see each other so I think there was something a bit awkward, and I could see their reaction as well, you know, people crying because they identify so much with the character.

And that was more difficult for me because then that was more me as a person in my own history, you know, performing. And also it was tricky because me, I'm not bipolar, I don't know, I mean, like, it's my idea of what it is, you know, my observations but I haven't been there, and I'm performing a character who is going through, in front of people who are going through, and I was

like am I, is that legitimate, like, what am I doing? At first I felt very bizarre about that, but then we had a lot of Q and A after and most of the people came to thank us to say 'what you're showing, I'm going through at the moment, or like' so it's really important, but like the emotions were different for me, it was more, it was tricky.

CDJ: Could you say something about the relationship between mental illness and creativity and how you think that works? I mean its an age old question, but...

JY: Yeah, well, from what I've read, you know, I've read a lot, you know, like what's her name, Kay...

CDJ: Redfield Jamison?

JY: Yeah, exactly yeah, she wrote fantastic books, like very interesting, so of her own experience but also of like all these artists in the world who have like changed the world and they were actually bipolar but they were not able to name the problem, like Einstein, Newton, not Einstein, Newton, Beethoven, van Gogh, and all that. So I think that some people who have natural skills for creativity, if they are bipolar, it will be even more, you know, for sure, when they are in these phases. Some people, for example my mum, is not an artist at all, but when she's in a crisis, when she starts going up she has a lot of, yeah, needs to do, so her creativity will be something else, she doesn't write or paint or anything but, it will be something, yeah, like her imagination is so full of things like she's living in such a dream so she's going to start a lot of projects, of course, you know, so I think, like, for people who have this, like talent already it will just be multiplied. But not all artists are, you know, you don't need to be bipolar to have a lot of creativity, that's for sure, I mean hopefully, otherwise it would be terrible!

CDJ: And what about the use of music and sound in the piece?

JY: Yeah, so we asked a French composer to compose all the tracks for the show, she's originally like a singer-songwriter, doesn't do anything like the music usually, but she was interested in like starting something new, and she was away while we started developing the play, so we communicated through emails, and I didn't want to tell her too much about the show, so I just gave her impressions like, you know, the things that inspired me, some words or some like a sentence something just to provoke and see what she, it would do, for her. And she took it and it happened to be perfect, and it was incredible because as she was sending us some of the tracks, we were devising so nothing was ready, and actually, sometimes that was the music, because it's so beautiful and powerful and the atmosphere's so great so sometimes that, the music who helped us to be, to go where we wanted to go, because she got it spot on, you know?

CDJ: I remember being especially struck by the white noise at the beginning, the way you've got this kind of intrusion of something, I thought that was, yeah....

JY: Yeah, because we have that, no? When sometimes, I mean, when we, everybody has insomnia at some point, and we all have these disturbing ideas that come across your head and you can't stop them and they keep coming, so I think she really got it perfectly well, yeah.

CDJ: If I remember rightly there was some involvement with mental health charities last year?

JY: Yeah, I mean we worked, we had, that was this year in May and June, we were in touch with Time to Change events, so we tried to be more in touch with MIND but never got to meet anybody, but then at some point time to change we had them and they had an event in Derby, in, the end of May, I think, and it was great, so we performed in front, like they had a whole day of like conferences with a lot of people around the country from the mental health environment, and that was amazing, and like, yeah, but we didn't really work...but we're willing to develop

more these relationships but, yeah, I think we were really happy and planning on performing in other mental health places but, yeah, we never got, I don't know why, just because, you know, when you have to produce your own company there are so many things to do and you know it's difficult to be everywhere all the time!

CDJ: Yeah, very much so, I mean it's incredibly difficult. But yeah, I don't know, is there anything else that you think might be interesting?

JY: Well, I mean, I don't know, it seems, like, from my experience, a lot of shows where I've seen a lot of shows talking about 'madness' easily they fall into something, you know, quite dogmatic, or different, but I think that this show really touches people because there is a real observations made on something really true and we're not saying it's bad or good or we don't give any answers and I think, the intention is just to say, ok, let's just talk about this subject, and we're not trying to like, romanticising the madness, at all, we're just trying to show the difficulty, like the struggle of a person who is dealing with that.

And, we've had a lot of questions about the ending, because the ending also is symbolic, people, they're not sure of what's going on, and I like it, because it's up to everyone to understand what's going on after, but for me what, we're aware that it's a very strong last image but what I would like, what I hope is that, leaving people with this strong image then it will make them think about, yeah, the necessity of being more aware, of the pain, or, yeah, the pain of the people who are going through it, and that there is a risk if we're not aware of that to leave them isolated and not being able to go through, you know, so it's like our responsibility all, you know, to just talk about it more and more, and it's been great because often after the show a lot of people come and see us and they just share their own stories, and that's wonderful because they don't know us, but they feel that they can and they feel like they need to talk about it and I have even like this woman, who came to see the show twice, and she crossed the country to see it the second time, and the first time she came, and she was amazed and she brought her husband the second time because she was bipolar herself, and she sent me an email saying that after the show they were able to talk, and it took the whole night long and she was able to say things that she had never said to her husband before, you know, and it's like these kind of things for me, that's the accomplishment that I want, like the ability to people just to break the ice, like the silence around it. So for me it's like nothing more than that, like, it touched me to know that, yes, it affects people's life in the best way, that they are able to talk about it.

CDJ: It's what we were talking about last night about there being, obviously a risk, in creating something like that and the risk, you know, obviously you're not coddling the audience, what you're putting out there's very raw, and so there is, you take that risk but it's that risk that can open up the space for dialogue, rather than something that's much more, kind of, safe and, it's a more kind of, what's the word, kind of culturally normative representation that doesn't actually challenge anything, because you know what it's going to be like, there's going to be straitjackets it's going to be rocking, you know.

JY: Yeah, yeah, it's always a risk, I think it's important to try to provoke, like to tease a little but the audience, you know, and that's for sure we don't know, we never know if, like, what the reaction will be, but I think it's also in this show it was also important for us to make it fun, like with Theatre Témoin that's our main thing is like, trying to talk about like, heavy, difficult issues but bring a sense of humour because I think that with humour you can treat any subject, you know, in a safe way, so we try to do that, to give space also for laughing, and yeah, and I think it works fine, I think people feel that they can, yeah, set them laugh and then think. We never had any bad reaction...so far, so I hope, I don't want to shock people or like, it's not my point, like,

you know, this guy was telling about this artist who goes in the street with like, blood⁷² and, I don't want to, it's like this is not my point like, theatre, I don't want to put people, to shock them, I want to spread love as well, you know.

CDJ: That's great. Thank you very much!

JY: You're very welcome.

[...some unrecorded, chat, then the recorder goes back on for a bit...]

JY: I when I was younger didn't know anything about bipolar, nobody helped me to, I had to search myself. I was really left alone with that, and so I bought this book, from Emil Krappelin, do you know?

CDJ: Yes.

JY: Yeah, so this whole book about like, it was called like, it's not bipolar at the time it was manic depression. And it does like a [unintelligible] describes a lot of things, you know, and that's terrible and that's fascinating and that also shows you how it was treated before, you know, but it's also like, it gives so much testimonies, you know, writings and that's also very, I don't know, that's, inspired me a lot, and it's like scary but also made me understand a lot of things about what was going on in my mum's mind, and yeah, so that's because you were asking me about the research I did, so that was a big, big thing for me, like I searched in that.

And the other thing I wanted to say is that, a few years ago, I got a job, I got to perform, to devise a play about bipolar illness with a company in Sheffield, Point Blank Theatre, and the artistic director wanted to talk about it because he went through a crisis itself, and he took me because of my own experience. But it was a terrible experience for me, it was terrible, because it was something really dodgy, you know, I don't know, something, ach, yeah, and so I left before the end of the project, and I thought 'OK, never again I will talk about something that is so personal to me' because it was, it's too raw, it's too violent, and then this show came, and as I said it was not a decision, but I decided ok, if that's the point I have make sure that it's not going to involve, you know, I have to make sure that, yeah, it's also safe for me, and that I'm not going to like blergh, like, you know, I don't know how to explain, but it was very difficult experiment, and I think that's the problem with these sort of issues that, it goes so deep, that we have this tendency.

But we had to go through, like for us performing, because we're, even though we're not playing our emotions we're still trying to understand, so we, each of us in the company had different moments, had to go through, like, deep, personal issues, because I think when you treat a subject there is always a reflection in your life somehow. It raises things that you don't necessarily want to see straight away, and sometimes you don't do it for that, but that appears anyway so it's like 'OK, how do we deal with that' and how we make sure that we can use it positively and, you know, that we can construct and not show something that is not appropriate or something, I don't know if that makes sense?

CDJ: Yeah, it does, it's containment, it's about...it's the ethics thing again, though, it's all about risk management and managing risk for yourself, managing risk for other people, and you're, you

⁷² At the Arts, Ethics and Society symposium, Simon Biggs from the Edinburgh College of Art talked about Australian performance artist Stellac's suspension piece, in which he was hung by meat hooks through his back over a pedestrian street.

know, it's almost like you're using dangerous chemicals and if you're using dangerous chemicals you need to make sure that they're in the right boxes.

JY: Exactly, yeah, yeah, that's right, that's why it's so, yeah.

CDJ: And labeled! But no, that's really great, thanks so much. It's been great.

JY: No, thank you, it's a real pleasure.