X: The Rise And Fall Of An Asylum Star (a Journey Of Two Actresses)

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X: THE RISE AND FALL OF AN ASYLUM STAR:
A JOURNEY OF TWO ACTRESSES

by

ERIKA WILHITE
M.F.A University of Central Florida, 2009

A thesis submitted in partial fulfillment of the requirements
for the degree of Master of Fine Arts
in the Department of Theatre
in the College of Arts and Humanities
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ABSTRACT
The performance of X: The Rise and Fall of an Asylum Star, in conjunction with my thesis document, investigates the dichotomy of fantasy and reality for a performer. I compare the creative and emotional journey of Augustine, a young woman hospitalized for hysteria, to my own journey as an actress. Augustine was also performer, for her doctors led her in public demonstrations of the symptoms of hysteria. Her “talent” for hysteria earned her notoriety and celebrity. She was coached and directed from her doctors to enhance her demonstrations. As a result, the validity and authenticity of her state was disease questionable. I compare the performative qualities of hysteria with my own states of drama as a performer and draw parallels between us, looking specifically at states of experience, both imagined and real.
I dedicate this body of work to my mother, from whom I inherited the tenacity to pull off such a stunt.
ACKNOWLEDGMENTS

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CHAPTER ONE:
INTRODUCTION

In December of 2007 I read a script by Jill Dowse called *X: The Rise and Fall of an Asylum Star*. I had been reading scripts hoping to find the perfect play to perform in as a thesis role to satisfy my MFA requirements. The “perfect” play would have a compelling plot, contain dramatic challenges that test and measure my growth as an actor, and allow me to work primarily alone, due to my busy schedule as an acting intern. The play is about a teenage girl named Augustine who was institutionalized at the infamous Salpetriere in Paris during the latter part of the 19th Century. She was diagnosed with hysteria, a condition typically attributed to women and which was on the rise as a popular diagnosis for women prone to “excessive emotional excitability.” Augustine suffered from “grande hysteria”, the worst case of the condition, and was the subject of scientific research. Augustine’s doctor, J. M Charcot coined the term hysteria and was master curator of the strange menagerie of wild women. Augustine proved to be an exemplary case of a hysterical, for she demonstrated the qualities of hysteria clearly and consistently. Dr. Charcot introduced hysteria to the public and put Augustine and the other women on display at the infamous Tuesday Lectures. The lectures were very popular and Augustine’s performance gained the reputation of the must–see– event. She was everyone’s favorite hysterical woman. Augustine drew in crowds that ranged in diversity from actors, artists, authors and men of clergy. The bourgeoisie filled the seats and buzzed with gossip the following days about the mysterious and melodramatic Augustine.
During my process of developing $X$, I set out to discover the main differences and similarities between Augustine and myself. Did I have more control over my fits of high melodrama on the stage than Augustine in the theatrical arena of Tuesday Lectures, or are/were we both technicians who maintain awareness of our audiences in order to present the drama in the most effective way possible? Though I am not a hysteric, I have discovered during my acting training I am also a woman of excessive excitability. I am an actor and my ability to access my passions and emotions is my bread and butter—it is my job. And while emotional availability comes easily for me, it is not enough for a compelling performance. I must have control, so I use the tools I have learned in my training to keep me grounded and on task in a performance. Technique is an anchor that keeps me afloat, lest I be washed out to a sea of emotional self-indulgence.

Part of my development of the show included conceptualizing the production. Art is a representation of life. It is not a replacement for reality but a different way of seeing the world. I set out to represent the emotional and physical distress of hysteria through spectacle. In *Poetics*, Aristotle listed spectacle as the last element of tragedy. He recognized the emotional attraction of spectacle, but because he believed that a play is just as effective on the page as on stage, spectacle was not an essential element for theatre. (Bennett 46) I could not disagree more. I believe that spectacle, a visually and audibly striking performance or display of theatrical elements, provides a lens for seeing an old thing anew, and that theatre does not exist outside of performance. A spectacle engages the audience in a sensuous experience. In contrast to Aristotle, I found that the structure of $X$ resembled Antonin Artaud’s philosophy of Theatre of Cruelty. “It is in order to attack the spectator's sensibility on all sides that we advocate a revolving
spectacle which, instead of making the stage and auditorium two closed worlds, without possible communication, spreads its visual and sonorous outbursts over the entire mass of the spectators.” (Artaud 86) Augustine’s public demonstrations of hysteria were spectacles in this regard, and Dowse’s play connects two versions of the hysterical experience (fantasy and reality) by using stylized theatrical conventions. Augustine’s experience has been called a “spectacle of suffering” and I wanted to create a parallel for the event of her demonstrations through theatrical spectacle. In X, I discovered opportunities to break from true representation, or realism, and used spectacle in the way I staged the play. My definition of spectacle is not as cruel as Artaud’s, for I do not strive to “attack” my audience, but I do believe that nonrealistic choices and stylized abstractions, including song and dance, ignite the senses. In trying to make sense of nonrealistic performances, a reciprocal relationship can be forged with the audience. Dowse’s representation of hysteria contradicts the reality of Augustine’s grim and demented experience. She was as an object of exploitation and manipulation, but Dowse’s imagining of the event includes an accordion, witty songs and even a dance. Such merriment and expression was unlikely to be found in the insane asylum, at least I did not come across any documentation of such in my research. The moments of spectacle, as I have defined the term for this project, gave me an opportunity to explore the dichotomy of fantasy and reality, demonstration and real experience in which lies the paradox of acting.

For the past three years in my conservatory program, I have trained to be an actor. I have had my own successes, near successes and failures in my efforts to compel an audience. The conundrum is this: how do I make a performance interesting and not
expose the work in the attempt? “I can see you working, “ I would hear from my teachers and directors. “Stop trying so hard,” or “you’re muscling through” were typical sideline comments. My training provided tools and techniques to empower my intuitive choices in creating a character, but I still grapple with the paradox of acting: the preparation and craftsmanship of acting versus the actual experience during the moment of creation. As an actor, I attempt to balance the two states of awareness even during a performance. There seems to be an alternate state of reality into which we enter in a performance. It is not unlike a dream except that we can control it.

When I first read Dowse’s script, I was struck by the use of the word “demonstration”. In an actor’s vocabulary, the word has a negative connotation. It implies that you are not emotionally connected to the moment in which you are reacting and are indicating experience instead of having it. In other words, your dialogue is merely commentary on the character’s emotional life instead of a deeply felt experience in the moment. In the context of Augustine’s career, the word “demonstration” refers to the organic experience of hysteria while being viewed by an audience. The degree of authenticity is questionable; for she was coached beforehand and the symptoms were often induced in order to fully demonstrate the condition. Because of the coaching from the doctors, Augustine’s role as patient changed into actress who responded to the guidance of her directors. It is in the role of performer that I was able to draw a parallel. We both wanted to succeed, we wanted to please and impress our audiences and our mentors. And we wanted to be watched. I felt our psychology was similar, as was our artistry. I could compare my acting technique to her conditioned and structured demonstrations. And while Augustine didn’t choose a career, I felt on some level she
chose to be a good performer. As performers, we were both aware of how spectacle serves a story.

However, I did not approach the work with the presupposition that Augustine was not suffering and that the presentations were a theatrical trick. Instead I chose to examine the possibility that she may have had some physical and mental control over her demonstrations. And if had she did control her demonstrations before an audience, I wanted to understand her motivations.

I questioned the audience’s role in her demonstrations. How did they participate in the spectacle of her suffering? Did their expectation of her suffering contribute to her performance? That would cause her performances to be obligatory. She did not want to disappoint. Is my audience the same as Augustine’s, even on a basic level? Is there a collective social need for catharsis or is it morbid curiosity? These questions I continued to return to throughout my process of development.

Another parallel I wanted to draw between us was our solitude. Augustine did not share the stage and since I was to be completely alone on stage, I knew that in order to be successful I would have to make my audience my ensemble. Augustine did not have scene partners either. She had Dr. Charcot, which I liken to an actor/director relationship; and she had her public. I knew I had to allow myself to be the most vulnerable I had ever been in public, as Augustine had. And I was to share, on the most intimate level, my personal journey as a performer by sharing Augustine’s story. I knew that another ingredient for success in this undertaking was the willingness to examine my own inner-workings as an actor. I had to embrace our myriad of selves: a woman that may or not be crazy, consummate performer, bad actor, the patient and the star. The conundrum was
enough to make my head ache from the mere thought, but everything in me knew I had to attempt it. The attempt would redefine acting and theatre for me. It was beyond an academic study of my craft—this was the defining moment in my training as a theatre artist.
CHAPTER TWO
SYNOPSIS

She is usually called Augustine, sometimes Louise or L, for short, but often she is referred to as Patient X; and she was the darling of Tuesday Lectures. She was the pin-up girl of hysteria.

In X: The Rise and Fall of an Asylum Star, Augustine takes the stage alone to tell her story for the first time about her life and career at Salpetriere. She was the star performer at Tuesday Lectures, a public event of scientific lecture and demonstration of the mysterious and complex female condition known as hysteria. The play takes place in Augustine’s imagination and she recreates her memories through acting them out. In Augustine’s imagination, she replaces real events with fantasy versions of the events. She imagines particular past experiences—such as demonstrating at Tuesday Lectures—as spectacular moments of cabaret performance. Memory and fantasy intertwine in Augustine’s mind and she goes back and forth between the two. She is aware of her present audience and as a consummate performer, she uses the convention of song and dance to entertain, and to gain the love and approval from her audience—and ultimately, their attention.

When Augustine was fifteen she was hospitalized at Salpetriere and diagnosed as hysterical. Hysteria was an allusive feminine disease with no known cause or cure. After being violently raped by her mother’s suitor, she had numbness on the right side of her body, followed by seizures, which would wrack her body, leaving her helpless and vulnerable. She remembers her first seizure happening at a social gathering where she already felt out of place and awkward. She alarmed and embarrassed her mother, who
shortly after sent her away. After failed attempts by the nuns in the convent to exorcise the demons from her, Augustine’s mother finally sends her Salpetriere, where she abandons her totally.

Augustine had never heard the term hysteria, and after she meets Dr. Charcot he explains that she is not possessed by the devil, but by the incontrollable, physiological condition. She finds solace in knowing she is not to blame for her behavior and that a cure is a possibility. She is relieved and hopeful she will be saved by Dr. Charcot. She also feels comforted by his presence and flattered by his attention.

Augustine meets Lisette whose bed is next to hers in the ward. Lisette is an absolute ball of neuroses and mania, nothing like Augustine’s sensible and straightforward personality. Lisette represents the insanity with which Augustine does not want to be associated; and she resents Lisette for her late night songs and sobbing. The other version of hysteria, however, is present in Genevieve, Augustine’s other neighbor. Genevieve is beautiful, well coiffed and spends her days relaxing in bed with a magazine and applying lipstick. Augustine learns that Genevieve is the grand dame of the ward, for she is currently Charcot’s star performer at Tuesday Lectures. Genevieve assures Augustine in a late night fearful moment that all will be well once Augustine starts demonstrating herself.

Augustine doesn’t understand what the demonstrations are until it is her turn. In a moment where she starts to suffer from a fit, a doctor whisks her away to the lecture room. She is startled to see hundreds of people gathered in the auditorium watching Dr. Charcot hypnotizing Genevieve. Augustine watches while the doctor manipulates the
dazed girl through a series of acts, such as running from imaginary rat, brushing her hair with a shoe and recognizing a top hat as her baby she lost years ago, which she cradles.

When it is Augustine’s turn to demonstrate, the doctor leads her down stage where she experiences all stages of the hysteria. What is unique about Augustine’s demonstration is that she reenacts the past event of her rape by embodying positions of erotic supplication. Her fit has a beginning, middle and end and is the exemplification of melodrama. She is a huge success. Her audience adores her and she gains the reputation of being the most dramatic and alluring woman in Paris. Her audience grows, her notoriety spreads, and she becomes the talk of the town. Bourgeoisie, artists, musicians, and famous actors such as Sarah Bernhardt and Ellen Terry fill the seats.

Augustine goes from being utterly alone to being the toast of the town, and thoroughly enjoys this new attention. Genevieve, who has lost her place in the hierarchy of hysterics, warns Augustine not to get too comfortable, for “There is always some younger girl waiting in the wings.”

Augustine and the other hysterics are photographed extensively as well. Augustine, always the star, is photographed more than anyone else. She feels very pretty and sexy. Things are beginning to go to her head. She alludes to a love affair she might be having and confesses she is in love with Dr. Charcot.

As a result of all the photography, Augustine loses her ability to see color. This is her first reality check. She had been so caught up with the attention and the limelight, she did not notice the repercussions of the scientific research taking effect in her. She was also getting worse. Augustine, who adores her collection of brightly colored ribbons, could no longer see the world in its full vibrancy. She also realizes that Charcot did not
return her love and was using her to advance his research. In a fit of rebellion, she trashes the ward and is locked up in solitary confinement for forty-two days. In the cell, her clarity sharpens and she is once again reacquainted with her true self and her desire to be free grows stronger. The realization of her imprisonment settles in; the façade of fame wears away. It is in this moment of self-awareness that she finds the courage to make her escape.

In Augustine’s last moment with her audience, she shares a dream she had the night before. It was of a garden of grey flowers, for she was dreaming in black and white in her dreams also. In the garden she finds a stone and when she picks it up, it becomes a miniature version of Salpetriere and it bursts into flames. After that, she sees color. In a moment of inspiration, Augustine steals the clothing and keys of a doctor, and escapes the hospital. She sets herself free.
CHAPTER THREE
DRAMATURGY

Theatre has many functions. It is a mirror in which society is reflected as well as the frame that contains the mirror’s images, symbols that we might identify with and recognize ourselves through. It can also be a lens through which we examine the possibilities of human existence, and through which we can expand the definition of what it means to be alive. It also believed that theatre initiates a relationship between spectator and performer who collectively share the experience, providing catharsis for everyone involved. As a theatre artist and initiator of the experience, I carry the responsibility of looking, then seeing, and finally pointing articulately to the thing I see. I do this by putting on the clothes and context of another person—in actor’s work of characterization. As an actor, embarking on my artistic journey based on these principles, I began by looking at the layers of Augustine’s story through the dramatization of her experience in X: the Rise and Fall of an Asylum Star. Part of my responsibility of an actor is to research the facts, the given circumstances of the play and other resources available in order to understand the context of her experience. I needed to learn what it meant to be alive in her world. I knew very little about 19th Century France, and only understood the term hysteria in contemporary context.

During my process I asked many questions, but when I began my research, I started out with three: who was Augustine? What was hysteria? And what was the environment in which the events of hysteria played out? I set out to research her world in order to better understand the bigger picture, and the research informed how I developed
the role, conceived the theatrical concept of the production, and ultimately affected how I performed the role of Augustine. I focused on three areas of research: 1. hysteria as a medical condition 2. Augustine as a person, patient and performer 3. My instinct told me that Dowse’s play needed a theatrical anchor, a style that could lift the play to a level of spectacle that paralleled the extraordinary events of Tuesday Lectures, so I researched and borrowed from the popular forms of entertainment of 19th Century Paris. While this particular area of research inspired me in building the production aspects of the show, it also led me to the discovery of the audience’s role in performance. The apparent reciprocal relationship between Augustine and her spectators informed me of my own relationship as an actor to my audience, which I investigated further in my process of dramatization. I found insight into the psychology of Augustine’s audience at Tuesday Lecture’s by learning about popular forms of fun experienced in the streets, café cabarets and music halls of Paris. My goal was to work with an understanding of this context. My research on entertainment, in relation to the condition of hysteria, helped redefine the event of spectacle in respect to Tuesday Lectures, and was very valuable to me in my creative process.

I did not set out to disprove hysteria or to even fully understand it as a disease from a medical perspective, but to learn how to portray, as honestly as possible, an important character in the story of hysteria based on the body of research available to me. Context was key for me in understanding Augustine’s experience. And while I was concerned with the validity of the diagnosis of Augustine and the truthfulness of her demonstrations at Tuesday Lectures, I prepared for the role equipped with the
presupposition of the condition. My challenge was to remain objective with the resources, so as an actor, I could explore all possibilities that lead me to discovery.

**Versailles of Pain**

“It was another Bastille...with its debauched women...women of abnormal constitution confined all together... it was the general hospital for women, or the rather the feminine dregs of society.” (Didi- Huberman 13)

In 1656, twenty years after Salpetriere was built as an arsenal, King Louis XIV founded a general hospital in its place, keeping the same name, which is constituent of the word gunpowder. The hospital was designed to not only heal and nourish the ill, but to educate, employing doctors of medicine and research. But before it was a world famous psychiatric and teaching hospital, it was the dumping ground for the poor, the destitute, and the criminals of Paris. It was a holding place for the lowliest of citizens and the lowliest of the sexes- women. On the eve of the Revolution, it was the largest hospital in the world, housing over 10,000 patients. (Berlin)

One hundred years after the French Revolution, the city that had practically devoured itself in destruction and suspicion, made a comeback socially and culturally. The monarchy was overthrown and a republic installed in its place. After the blood had washed clean from the boulevard, the guillotine retired, Paris redefined itself as a city. “The city underwent a massive renovation under Napoleon III and his préfet Haussmann, who leveled entire districts of narrow, winding medieval streets to create the network of wide avenues and neo-classical façades of modern Paris. This programme of "Haussmannization" was designed to make the city both more beautiful and more sanitary for its inhabitants …” (Flonneau)
It was a time of rebirth of beauty and critical thinking. After Paris was renovated, it was called the City of Lights because it was one of the first cities in the world to install street lighting. But was also called that due its reputation as being the center of advanced thought and literature. The Industrial Revolution and the French Second Empire brought Paris into its greatest development period in the city’s history. But not all of Paris moved forward this way, for in the midst of the Belle Epoque, the Beautiful Era, Salpetriere, as a building and a mindset, remained in the shadow of advancement. The light of innovation had not yet penetrated through the walls of Salpetriere, where a darker Paris lived still. Since the hospital was so large and self-contained, it existed like a little city within itself; and its citizens were women.

The Curse of Femininity

The word hysteria is synonymous with woman. And while in extremely rare cases some men were listed as hysterical patients in Salpetriere, women dominated the area of interest. Hysteria, literally, “things of the uterus”, was inherently feminine. (Beizer 45) “The association of activity, mastery, and rationality with maleness transforms the investigation of hysteria into a mythic struggle with the mysteries of its female object.” (Noel Evans 3) Women are stereotyped to be more emotionally indulgent, but the hysterical woman explodes through the acceptable boundaries of woman’s emotional, physical and sexual expression. She was the rawest and most dangerous of people, because when she in the moment of hysteria, she was in communion with her own natural demons, conversing with and battling invisible opponents, empowering her with the exotic otherness which remains indefinable and mysterious. “She undergoes extraordinary contortions which evoke the descriptions of the convulsionaries possessed
by the devil. She cries out, she screams, she hurls invectives at imaginary people; she has a furious look; she is terrifying, like an unchained Fury.” (Evans 23) The physical manifestation of hysteria was unpredictable, not connected to an obvious cause or circumstance, which made it impossible to satisfy, appease or control this feminine voracity, in spite of how it was attempted.

In order to forgive the social deviancy of the delicate sex for acting with such indiscretion, the blame took on many, now seemingly ridiculous, forms of naiveté with a particular focus on menstruation and sexuality. “It is from the very moment that a woman begins to menstruate, becomes regulated, fixed in her female role, that her entire being is open to derangement…and more unruliness translated by hysteria.” (Beizer 40) The nature of femininity posed as a threat of derangement. More causes range from lukewarm baths, eating foods thought to be aphrodisiacs, falling in love, an overactive imagination, extreme temperatures, prolonged sun exposure and the reading of novels. (34) Sexual climax was also believed to be a dangerous portal into hysteria, but so were arguments with parents. (23) For the nineteenth century imagination, hysteria was a curse on woman’s body and mind, and when she went over the physical threshold into a hysterical attack, she entered a realm of eroticism that was beyond socially taboo- it was terrifying and defiantly unapologetic- and utterly feminine. The need to define the state of hysteria takes on an atheist-like resistance to the presence of mystery. If you can name a thing, it can be understood, managed and manipulated. A safe distance can be placed between oneself and the unknown.

Ultimately, the mystery of femininity was the culprit and the thing to be understood and tamed. “One might even say that hysterics are more womanly than other
women…they are described as impressionable, capricious, malleable, coquettish, seductive, lazy, untruthful, recalcitrant.” And their behavior interrupted the domestic structure. “With such a mental state, how can the hysteric bring happiness and calm to the conjugal hearth?” (Beizer 31)

Elaine Showalter, a scholar of hysteria and feminine exploitation in the psychiatric arena, believes hysteria to be an epidemic that peaks at the end of centuries when society meets social change with alarm and anxiety. In the late 19th century hysterics were the voices of social reaction and resistance. (Showalter 75) In 1866, an amazing one-third of Paris’ working class was women. Women of upper and middle class were isolated in their homes, but lower class women responded in increasing numbers to the need for cheap labor in industrial factories. Women from the surrounding rural areas of Paris migrated to the city in search of survival, but the conditions of the city and the dramatic gaps in the class structure, proved a discouraging task. “The labor movement, which might have provided support for young women workers, eventually betrayed them.” (Evans 11) While schools of thought were emerging onto the intellectual scene, and the nascent French feminist movement was making a dent on the art and literary scene, working- women were overlooked in the demand for equality; that entitlement was not extended to Augustine and her kind. “Poor women were thrust into a new and often disorienting freedom in urban centers. Alone, unsupported by the family groups they were accustomed to, often paid below subsistence wages, the faced a stressful lot. The astronomic increase of prostitutes in Paris at this time is a sad witness to the fate of these displaced, young working women.” (Evans 11)
Charcot’s Hysteria

“Behind those walls, a particular population drags itself around: old people, poor women, responates awaiting death on a bench, lunatics howling their fury or weeping their sorrow in the insanity ward or the solitude of cells. The thick gray walls of this citta dolorosa seem to retain, in their solemn dilapidation, the majestic qualities of Paris under the reign of Louis XIV, forgotten by the age of electric tramways. It was the Versailles of pain.” (Didi- Huberman 15)

The women of Salpetriere fell mainly into two categories: criminals and mentally ill patients. They were admitted and treated for Syphilis, epilepsy, and other types of general madness, social dysfunctions and other diseases. Many of the women were prostitutes, an essentially feminine profession, and most of the women, inmates or patients, were financially destitute. While it was not glamorous, and often uncomfortable and dreary, hospitalization ensured room and board. There was incentive to be there.

If Salpetriere was likened to Versailles, then Jean-Martin Charcot, like Louis XIV, was its Sun King. If science was moving forward in the field of mental illness, Dr. Charcot was the Napoleon of neuroses, leading medical troops out of the recesses of ignorance towards the light of psychological advancement. Charcot was a doctor and educator at Salpetriere for thirty-three years. His passion and specialty was neurology, the study of brain function, and he established the first clinic of neurology. But he is best known for his work with the women of Salpetriere and his role as ringleader in the circus that was Tuesday Lectures.

The first information I read about hysteria was in a Google search on the Internet. I learned that hysteria was coined by Hippocrates, who thought that suffocation and
madness arose in women whose uteri had become too light and dry from lack of sexual intercourse, and as a result, wandered upward, compressing the heart, lungs, and diaphragm.

I found this description vague and unsatisfying. It was too mysterious to be a tangible experience I could study and recreate. I trusted that more about the physical experience of hysteria would be discovered from other more specific and accredited sources, but almost all descriptions founded in further research waxed mysterious, even suggesting the supernatural. “A disease whose essential defining characteristic was time and again given as indefinability, whose causes and symptoms were too numerous to be circumscribed, and whose method of treatment were limited only by the imagination, hysteria in the nineteenth century was an accommodating vehicle for just about any idea or entity one wished to contain or displace.” (Beizer 34, 35)

The term hysteria in reference to mental illness is obsolete today. The American Psychiatric Association officially changed it to "conversion disorder” which symptoms include paralysis, numbness and seizures. (Maines)The symptoms are the same as hysteria, but still no physical or neurological explanation has been offered. It remains mysterious and elusive. It is a state of mind, one of unmanageable fear and emotion. The scholar, Elaine Showalter, rebuffs it ever existing as an isolated disease and states “what used to be called hysteria is now diagnosed as somatization isorder, conversion disorder, or dissasociative disorder.” (Showalter, Hystories:Hysterical Epedemics and Modern Media)

Charcot, who wrote abundantly on the subject of hysteria, wrote mainly of his observations of the behavior of the hysteric, but never officially diagnosed the cause. He
seemed to have more questions than answers. More like a philosopher than technician, Charcot mused over the possibilities. In *Invention of Hysteria*, Georges Didi-Huberman describes the way Charcot’s observed the patients,

“He sits down near a bare table, and immediately has the patient to be studied brought in. The patient is then completely stripped. The intern reads the ‘observation,’ while the Master listens attentively. There is a long silence during which he gazes; he gazes at the patient and drums his fingers on the table. The assistants are standing, crowded together, anxiously awaiting a word that will shed some light. Charcot remains silent. Then he instructs the patient to move in a certain way, makes her speak, asks for her reflexes to be measured, for her sensitivity to be examined. And again he falls silent, Charcot’s mysterious silence. Finally, he brings in a second patient, examines her like the first, calls for a third, and still without a word, compares them.” (22)

The “master” came to be the most influential component in the domain of hysteria, apparently, quite accidentally. When he came to residency at Salpetriere as chief of medical service, the hysterics and epileptics were housed with the psychotic and violent patients. Charcot saw need to clean house, so to speak, and organize the patients based on affliction, and in the effort, began to distinguish the hysterical women as a category of their own. (Evans 20) Thus began the rise of notoriety and novelty of the condition and heyday of hysteria.

Charcot validated the condition of hysteria through his clinical observation and rationalization, but did not make any substantial theories on condition. However, the quality of the attention he paid the women elevated the condition of hysteria to a level of medical validity. He mused, silently, but his work was focused on scientific discovery, not the feminine mystique and supernatural.

Shortly before the term hysteria entered medical vocabulary, and before Dr. Charcot redefined it and validated it in the arena of science, Augustine and other women
suffering from hysterical symptoms were vulnerable in a world that condemned their behavior. The public feared them because they did not understand them. In the public’s defense, the hysteric’s behavior was understandably perceived as threatening. “These attacks were doubly disturbing not only because of their frightening aspect, but also because they occurred at unpredictable times and seemed to have no apparent cause.” (Evans 23) A woman suffering publicly created a force to be dealt with. She was hard to ignore. A typical hysterical characteristic was erratic vocalization or “verbal incontinence”. “Patients cry involuntarily or bust into gales of laughter; sometimes they sing or speak… incoherently. “They speak nonsense words, make animal noises, scream vulgarities. They give free reign to their bodily sounds.” (Beizer 43) For the less articulate, some women would uncontrollably bark and hiccup. As a result, they were at risk of prejudice and often abuse. Many women were considered demonically possessed and often sent to convents for treatment. Exorcism was attempted by prayer, starvation and sometimes flogging. At the convent that Augustine stayed at for a short while, it is said that the nuns doused Augustine with ice-cold water at the onset of an attack. (Showalter, The Female Malady 76) In cases of treating the symptoms medically, a doctor would administer ovarian compression. It was a simple procedure where the index and middle finger was inserted into the woman’s vagina during the fit in order to grasp the ovary and put in back in place, as if a button could be pushed to turn the hysterical fit on and off. Later, Charcot administered a similar treatment, but it was in order to induce the seizure so that he could study his subject in full hysterical experience.

The 1870s and 1880s were the golden age of hysteria. (Beizer 6) The condition rose from obscurity and from its shameful status. Instead of ostracizing and punishing the
degenerates, Charcot forgave them and recognized their behavior as involuntary. He also found it very useful. Charcot saw an opportunity for scientific progress in the examining of women in the act of hysteria. By taking the time to look at the women instead of shutting them away, he saw something new. He shunned the classical interpretation of origination and changed the emphasis of study from the uterus to the brain. This notion was not even proposed until this point. He also disproved demonic influence. Ironically, Dr. Charcot came along as a savior for these women, for he challenged the medical arena with physiological justification for hysterical behavior. A pupil and disciple of Charcot, Sigmund Freud said of teacher’s preservation of the patients, “Charcot’s work restored dignity to the subject; gradually the sneering attitude which the hysterical could reckon meeting with when she told her story, was given up; she was no longer a malinger, since Charcot had thrown the weight of his authority on the side of reality and objectivity of hysterical phenomena.” (Showalter 148) The majority of his time with the women was spent watching, and as a result of medical voyeurism, the quality of life improved for Augustine and the other hysterics under the gaze of Charcot and his team. Not only were they empowered with a purpose and function in the world of science, they were paid attention to, perhaps for once in their disdainful and insignificant lives. But the new entitlement was not offered from a place of charity- the relationship was reciprocal. “These women tended to enter their physicians lives at intellectual formative times in the doctor’s careers, and they often serve as clinical models-founding cases- of the doctor’s theoretical work. The doctors needed hysterical women as muses; hysterical women needed doctors to speak for them.” (Showalter 19)
Only 9.72 per cent of the women were cured and the method of treatment was as ambiguous as the condition. (Didi-Huberman 34) Dr. Charcot not only pioneered for the validity of hysteria, he introduced hypnosis as a relief of symptoms and a means of investigating the disease. His public demonstrations of hypnosis gave weight and worth to this new medical voodoo. For the first time, the brain was seen as the culprit and separate from the womb, which was believed to be the source of passion; and importantly, it one could be controlled through hypnosis. I searched in vain for evidence of hypnosis improving a specific case of hysteria, and found that something greater than the well being of these women was at stake- knowledge.

Freud, still defending his mentor, said Charcot “had an artistically gifted temperament…he was a visuel, a seer…he was accustomed to look again and again at things that were incomprehensible to him, to deepen his impression of them day by day until suddenly understanding of them dawned upon him. (Showalter 150) Hysteria researcher and author Didi-Huberman expounds on the previous quote by Freud on Charcot’s philosophical approach to medicine,

“He would ask why it was that in medicine people only see what they have already learned to see. He would say that it was wonderful how one was able to see new things- new states of illness- which are likely as old as the human race.” (27) For me, this statement illuminates Charcot’s position as an artist. It is the artist’s obligation to question, to see new possibilities in familiar things, to stare into the face of the terrible and difficult, and to bring into excruciatingly close focus the details of human behavior. The hysterical condition, if believed to be the most uncontrollable urge of expression, was of mythic proportion. Like myth, the hysteric’s physical and emotional turmoil
represented a story that existed deep within, and perhaps, lay dormant in any person, waiting to be unleashed from depths of psyche. Hysteria, in this regard, was a physical narrative.

But a hysteric was incapable of explaining the story with words, for their language was intended for the senses and independent of speech. The hysteric’s language transcended text. In Ventriloquized Bodies, Janet Beizer describes the language of the seizure in communicating with her spectators, “the body (which is to say, the material condition of life) is the sentence: its scars, its graying hairs, its wrinkles are lexicons; its shiverings, its tremors, its death throes are the punctuation.”(26) It is through this language that the “other” is given voice and presence in the world. The hysteric, according to Charcot, displayed the possibility of human experience, and he watched with intrigue and awe for their ability to expand upon human potential. How “wonderful” to be communicated to from a deeply mysterious place. If it is to be believed her hysterical fit was a physical narrative then the hysteric was above subjugation. She was more than an exotic and dangerous animal caged for public gawking; she was a medium whose unintelligible rants contained cryptic truths. In the least, the hysteric represented the highest level of passion and the potential of our own. Charcot so delighted in this potential, he opened up his work to the public. And when he invited an audience to share in his intrigue, he created theatre.

Tuesday Lectures

“Ladies and Gentlemen! Is it possible to believe that the human eye can be thus mistaken? And that we may believe ourselves to be that which are not? That the mechanisms by which you and I understand and interpret the world are mutable, capable
of transforming the simplest everyday objects into a thousand hallucinations? Please, be amused! And learn through your amazement!” (Dowse)

In the quote above from X: The Rise and Fall of an Asylum Star, Charcot is center stage and speaks directly to his audience. He then proceeds to hypnotize a patient, Genevieve, and leads her through a charade of ridiculous stunts. She believes a glove to be a rat, a shoe to be a hairbrush, and after Charcot places his own top hat on the floor, she mistakes it as her long lost infant. Charcot played different roles in the myth of hysteria- the physician, the musing philosopher, the educator- but more importantly for my production of X, I found his showmanship to be the most fascinating and useful key into understanding the nature of spectacle inherent of hysteria as an event. By inviting an audience to view Augustine’s seizures, he redefined and shaped the event as theatre. And while the women were the premiere focus, Charcot was the master of ceremonies. He was also the master puppeteer. The amount of control he had over the women is argued.
Charcot worked with the women before the demonstration to encourage exemplary performances; therefore he transformed his work from scientific study to theatrical spectacle and substantiated his position as a theatre director. It is noted by Didi-Huberman in The Invention of Hysteria that the doctors would “pinch their skin, and excite them through various procedures” as means of inducing a fit. There was also quite a bit of role- playing, and in his opinion the doctors had a “voracious dramaturgical passion, a desire to have all the roles played.”(228) But the key to successful demonstrations at Tuesday Lectures is attributed to the repetition of actions made while under hypnosis.
Charcot discovered that “hypnotic suggestion allowed him to make, redo, or undo at will, in an absolutely equivalent and thus reversible fashion. Provoking a symptom, erasing it, reprovoking it—this was possible, but it called for absolutely identical procedures. It was an instrument to such an extent that it could be modulated: fugato, crescendo, stringendo…” (186) And it is in the repeated experiments that Augustine learned the most desirable and effective results.

Tuesday Lectures took place at Salpetriere in a semi-circle amphitheatre in the education wing of the hospital. The lectures and demonstrations were “spectacular shows with a meticulous dramaturgy, featuring hysterical stars in front of amused and thrilled audiences.” (Wald 30) The “amused and thrilled” were the who’s- who of Paris, for attendance was vogue. The list of attendees resembled a guest list from the fashionable Parisian literary and art salons of the time. Artists, musicians, philosophers and authors gathered to gaze and gawk. The hysterics became subject for painting and stories. During the reign of melodrama on the French stage, it was reported that legendary actress Sarah Bernhardt attended the lectures, and British actress, Ellen Terry, made the trip in order to study hysterical behavior while doing research for the role of Ophelia in Hamlet. (Showalter, The Female Malady 154) Tuesday Lectures were also popular with the upper class and started a peculiar fashion trend. In X, Augustine revels in the limelight of celebrity and boasts, “Last Tuesday there were seven ladies sitting in the lecture with their hair full of straw! They call it coiffure a la folle- madwoman’s style! It’s quite the thing!” (Dowse)

The “thing” that gained great popularity was, in fact, a spectacle of suffering. The audience, allegedly, was present to publicly witness a personal nightmare of emotional
and physical distress. But it was structured, as all good narrative, in segments that resembled the acts of a well-made play; it had a beginning, middle and an end. It had an inciting incident, a dramatic journey, a climax and resolution. The beginnings of the narrative were the first two phases of hysteria, coined by Charcot: the epileptoid and clownism stages. A violent seizure would wrack the woman on stage until she appeared to be helplessly consumed. Unseen hands threw her about while saliva foamed from her mouth. After her motor control appeared to be completely stolen, and it was clear she was at the mercy of an invisible perpetrator, she exhibited the clownism stage. She tossed about the space with acrobatic aptitude, doing somersaults and backbends, twisting into awkward and seemingly painful postures. The physical feat of the first two phases was followed by “passionate attitudes.” The woman, still apparently unaware of her behavior, proceeded to demonstrate a series of erotic postures of pornographic nature. In Augustine’s demonstration, she re-experienced the sexual assault of her past, but instead of reenacting the act of violence, she demonstrated pleasure. Augustine was famous for “Amorous supplication,” a specific pose within the phase of passionate attitudes, in which she reached and implored for sexual satisfaction. I found this to be a confusing contradiction to her actual memory of sexual abuse and explored it further in my creative process. After the series of sexual poses, the final phase, “delirium”, settled in and caused the hysteric to gurgle, hiss, cry or sing; all vocal releases leading to a cacophonic climax. In this phase, the hysteric returned to a calmer state, and eventually collapsed in exhaustion, marking the end of the show. As with most theatrical coups, the audience regained their breath, and erupted in applause.
The audience’s amusement was evident in the increasing popularity of Tuesday Lectures. But I do not believe they lacked empathy altogether. I believe that through the witness of the spectacle, they experienced a profound release themselves. Through someone else’s demonstration of emotion, they experienced catharsis.

In the *Poetics*, Aristotle describes catharsis through art, specifically, through music:

“For every feeling that affects some souls violently affects all souls more or less; the difference is only one of degree. Take pity or fear, for example, or again enthusiasm. Some people are liable to become possessed by the latter emotion, but we see that, when they have made use of the melodies which fill the soul with orgiastic feeling, they brought back these sacred melodies to a normal condition as if they had been medically treated or undergone a catharsis.” (Auslander 14)

In an attempt to relate catharsis to the audience’s experience at Tuesday Lectures, I looked to French theatre artists and theorists. Without referring specifically to Augustine’s experience, their definitions of the catharsis through the performative experience were valuable to me. I especially related the writings of early twentieth century French actor and theatre philosopher, Antonin Artaud. He saw theatre as a means to an end through the complete psychic upheaval he called Theatre of Cruelty. His philosophy is remarkably similar to my perception of the theatrical spectacles of Tuesday Lectures. “Artaud adopts the posture of a psychoanalyst in suggesting that if we can recognize and confront our dark impulses we can be free, or at least in control, of them. The process is horrifying and difficult; (theatre of cruelty) ‘unknots conflicts, releases forces, opens possibilities; and if these possibilities are dark, it is not the fault of the
plague nor of the theatre, but of life itself.” (Auslander 21) It was as if Artaud was referring directly to Tuesday Lectures. He also believed in a communal need for theatre which does not adhere to any specific form, and stated that theatre “has been created as an outlet for our repressions, the agonized poetry expressed in its bizarre corruptions of the facts of life demonstrates that life’s intensity is still intact and asks only to be better directed.” (Plunk 81) According to Artaud, hysteria was a possibility in everyone, and witnessing the demonstrations allowed freedom from the impulses demonstrated in the hysteric. They suffered as a service to their community.

Charcot craved knowledge and certainly had an intense desire to understand the mysterious nature of hysteria, but there was also a blatant presence of ego in his case studies. This is especially made evident in Tuesday Lectures. His scientific curiosity veered into voyeurism and the boundaries of doctor and patient blurred. He is quoted answering a patient who, imploring him for a cure, asked him to “be like God” in the role of healing. Charcot replied, “If I were God I should be eternal, I should have neither a beginning nor end and that would ultimately bore me. And as the Almighty, when everything has been done, what should I do afterward? I should amuse myself with undoing perhaps.” (Didi-Huberman 243)

J.M Charcot was not interested in curing hysteria. “Furthermore, there was a dramatic increase in the incidence of hysteria during Charcot’s tenure at Salpetriere. From only 1 percent in 1845, it rose to 17.3 percent of all diagnoses in 1883, the height of his experimentation with hysterical patients.” (Showalter 151) He amused himself and audiences by unraveling the tangle of mystery that hysteria was, but did not seek to find the means for an end of suffering. Regardless of the service the women provided the
world of science or audience catharsis, it was exploitation. Charcot and his audience peeled away the layers, looked closely, and examined with exuberant curiosity the enigma of the condition. Charcot actively participated in the undoing of his women, and it is in the experience of Augustine, I found testimony to this.

**Charming Augustine**

*“The Queen of Salpetriere!” (Dowse)*

She is usually called Augustine, sometimes Louise or L, for short, but often she is referred to as Patient X; and she was the darling of Tuesday Lectures. She was Charcot’s best girl. (Didi-Huberman 87)

Throughout my research of hysteria I struggled to find the personal experience of Augustine. Although her treatment at Salpetriere is extensively documented, it is the words of others that construct her story. I searched for the woman Augustine, but found only a shell, a blurred form that endures because of the myth of hysteria in which she played the main character. In order to undertake the responsibility of portraying her, I had to understand her, so I searched for the details of her person in the writings of others, the many photographs of her, and in Dowse’s dramatization of her experience *X: the Rise and Fall of an Asylum Star.*

“Augustine is blond, tall and broad for her age, and in all respects gives the impression of a pubescent girl. She is active, intelligent, affectionate and impressionable, but also capricious, and enjoys attracting attention. She is a coquette, taking great care in her toilette and in her arranging her thick hair now one way, now another. Ribbons, especially brightly colored, are her bliss.” (Didi-Huberman PL XXIV) Photographs of her reveal an attractive girl, but she appears to be much older than she is said to have been at
Salpetriere. She was voluptuous, not pubescent. She gazed at the camera with a seductive cunningness. She appeared to be a self possessed woman.

Augustine spent five years at Salpetriere from October 1875 to September 1880. She was the most popular and memorable of the ‘ladies of hysteria’, and due to an abundance of photographs of her, she was in a sense, the pin-up girl of the disease.

Evidently a bright child, she lived under the stairs of a bourgeois household where her mother worked as a housekeeper. It is on record that at a very young age she demonstrated the symptoms of psychological distress and was doused with ice water by nuns in an act of exorcism. Her mother took up sexual relations with the master of the house, who in turn, took up relations with the adolescent Augustine. After repeated violently sexual assaults by her mother’s lover, Augustine developed what was later diagnosed as Grande Hysterie. Her symptoms were paralysis on the right side of her body and seizures. Her mother took her to Salpetriere for treatment and never returned for her. Augustine lived there for five years until she escaped. According to written history, that is where her story ended. (Furse 76)

In X, Dowse imagined Augustine as a precocious girl, full of life and wit. Based on my own research, I found Dowse’s characterization to ring true. She is referred to as “charming” and her flirty smiles in her portraits reveal a girl who is confident and in control. She does not resemble the other photographs of women whose twisted faces and bodies grotesquely succumbed to the disease. The photographs contradict her state of illness, for she looks to be in robust health.

The question of Augustine’s truthfulness was at the heart of my journey in the character development. In my dramaturgy of her life, I relied on the photographs as clues,
breadcrumbs to lead me though the dark forest of ambiguity. The photographs not only aided in the physical reproduction of her condition, and inspired my staging choices of $X$, they clued me into the willingness of Augustine as a subject of scrutiny. And the more I gazed at her images, the more pronounced her control became to me.

**Hysterics Gone Wild**

Charcot’s original ambition was to be a painter, but his family insisted he go to medical school. At Salpetriere, he satisfied his creative urges and created studios where his subjects were immortalized through photography. And it is to the fetish-like recording of the women we owe the visual narrative of hysteria. (Furse 76)

The images of Augustine and other nameless women are available in a series of photographs taken at Salpetriere. I used those images to recreate Augustine’s seizures, but they provided more than a tool for mimicry- their mere existence posed the question of validity of the characteristic of hysteria, which was the inability to control behavior. The photographs are poses held for the duration of 19th century photographic exposure-moments that had to be held in stillness, else lost in the blur of movement. The images are artistic, and besides the clearly erotic elements of postures, they are as captivating as a muse caught in marble by her sculptor. The images of the hysterics are alluring and compelling. Great sculptors spend hours upon hours constructing from marble a human form into fleshiness in order to capture what seems to be an accidental moment caught by a spectator. The elegance and exactness of the postures of Augustine made me suspicious of the alleged spontaneity of the moment caught with a camera.

In his book *Invention of Hysteria*, Georges Didi-Huberman specifically interrogates the exploitation of the hysterics through photography. It was in his writings
of the rehearsals and staging of the photographs that I learned of the means of
reproducing a seizure and posture through physical inducement. Inducing was the act of
“leading a hysteric toward the plastic quintessence of the symptom, even more visibly.
For this, mediations, techniques, ingredients and strategies were escalated, always more
subtle: the art of making visible.” (Didi- Huberman 211) Charcot and his assistants would
hypnotize the women to “make, redo or undo at will, in an absolutely equivalent and thus
totally reversible fashion.” (186) He compares the hysterical body to an instrument that
could be manipulated into ”fugato and crescendo” all by the power of suggestion under
hypnosis. Like a director, Charcot would suggest given circumstances to the women,
leading them in imaginary situations. An assistant to Charcot admitted to pushing the
experiment further and abusing the control of hypnosis for his own amusement. He once
suggested to the patient she was a nun and she reenacted a prayer on her knees; then an
army general (the hysteric believed herself to be wounded, demanded for a telescope to
see the enemy better with) and a peasant woman who milked a cow.

In a photograph of Augustine demonstrating the posture “Catalepsy: Suggestion”,
her eyes are wide and full of mischief and her fingers are placed on her lips in the act of
blowing a kiss. She is also wearing the costume of a scullery maid. Regnard, the
principle photographer of the hysterical women, was particularly fond of Augustine as a
subject. She was the most responsive to suggestion and the most expressive of the
hysterical subjects. And she enjoyed being the center of attention. Didi-Huberman quotes
Regnard saying Augustine “has affectionate feelings for her experimenter, whoever he
may be, to the point that she would fall into hypnosis no matter where she encountered
me.” (Didi- Huberman 220) Augustine was a teenager, and X, Dowse imagines Augustine
to be in love with Charcot. Being young and impressionable, Augustine probably entertained many fantasies about the men who teased, probed and taunted her. And they, undoubtedly, reciprocated the affection.

Besides hypnosis, other means were applied when inducing hysteria. A tuning fork proved to provoke facial contractions and magnetic contacts were employed to encourage muscle tremors, ultimately, to draw out a full -blown convulsion. Metals were placed on problem areas, such as a paralyzed arm and would sometimes cause feeling to come back to the limb. Apparently, each hysteric “had her favorite metal, as she has her favorite color. Augustine had a predilection for gold! (part of her penchant for finery, obviously).” (Didi- Huberman 212)

Augustine was the most malleable, the prettiest and compelling of the hysterical subjects. I compared the graceful portraits of Augustine to the photographs of cross-eyed women collapsed and supported in the arms of assistants. Even though Augustine was diagnosed as the others, she is different. She is poised. She appears to be separate from the other subjects. She is above them. She is not a total victim, but was a collaborator of her own legacy.

But she was not always in control. Somebody retouched an image of Augustine while she was suffering from convulsions, because due to the erratic movement of the seizure, the image is blurred; but it was proof for me that in spite of the other portraits and the questions they raised of the validity of her condition, she had moments of real physical and emotional crisis. She is not wearing a costume but a straightjacket. Her mouth is not coyly upturned in a seductive smile but stuffed with a wooden block to prevent the biting off of her tongue. (Didi- Huberman 113) It is an image of suffering
and powerlessness. Her helplessness was captured in another photo and it also does not appear to be staged. Tetanus, a term for the frozen contracture, was the cause for her stillness. “The whole body became rigid; the arms stiffened, sometimes executing perfect circumduction; then they would often approach each other on the median line, the wrists touching each other on the dorsal side.” (Didi- Huberman 123) Augustine was photographed while demonstrating tetanus. It is a terrifying picture. Her eyes are rolled back, her teeth clenched, and her body twisted sideways on the bed she is strapped into. (cite image)The image is clear because she could not move during the exposure, due to tetanus. She did not have the control in this case, proving she was still, willing or not, the supermodel of hysteria. She took a compelling photograph either way.

Augustine looks to me like a woman in her photographs, but her eagerness to participate with such zeal and playfulness reminded me of the impressionable nature of a child. Like a child, she earnestly tried to please her elders. As a woman, she used her femininity to attract attention and win affection from her men. I do not believe Augustine was a faker. I do believe she learned at a young age the art of guile and used it to her benefit and gain. As a reward for her willingness, she was promoted in chores to the laundry room. She was also enticed with the attention of fame. The moments of voyeurism she allowed, and perhaps reveled in, provided brief relief from the real nightmares she suffered despite it.

**The Event**

*Augustine:* “I bet you are wondering just what I get up to in my little outbursts! *Demonstration!*” *(Dowse)*
The physical manifestation of hysteria was a seizure, or a fit, as it is often called. It is an involuntary experience of muscular contractions and loss of motor control. In a hysterical seizure, the physiological malfunction manifests in a series of gestures and shapes in space that occurs over a span of time. It has been called a dance when specifically referring to Augustine.

Charcot’s prime models of hysteria, or prima donnas, exemplified the quintessential seizure. Augustine’s gift for performance, contrived or involuntary, was her ability to clearly display her symptoms. She was able to “time and divide her hysterical performances into scenes, acts, tableaux, and intermission, to perform on cue…” (Showalter 154) Authentic or not, Augustine knew how to win over her audiences.

The aura is the first moment of the fit. In psychological language it is vaguely described and defined “as the moment of conception of a seizure. Epileptics and sufferers of migraines experience the aura as well. The aura sometimes sets in with an unpleasant smell that warns of the onset of a seizure. Auditory hallucinations are characteristics of the aura. For example, Augustine is said to have hummed during her seizures, and in Dowse’s play she sang the Claire du Lune unintelligibly before she had a full blown fit. In the hysteric, the aura is the threshold that ushers in the seizure. Although Charcot was a man of modern science, and later titled the Father of Neurology, he believed invested in a very antiquated belief—hysteria originated in the womb and traveled upward. It preceded all contractures and tremors that consumed the body. In the hysteric, it seemed to lift her to spiritual plane, for the exact meaning of hysterical aura eluded the doctors more than anything about the condition. (Beizer 87) In photographs, the aura is captured
on the faces of the women that seem to be seeing something no else can. In some photographs, especially of Augustine, the aura looked like a moment of realization on the woman’s face, as if she had a vision, a brief epiphany into the unknown.

Parapsychology defines the word *aura* as a spiritual and ethereal state. In fine art, such as paintings, it is visible as halo hanging around the subject. In the photographs of hysterics it is visible as well, but in the ethereal quality of their faces. One of the doctors at Salpetriere describes the aura, in a spiritual sense, as “something that weaves itself into the image. The aura is a strange weave of space and time: the unique semblance or appearance of distance, however close it may be.” (Didi-Huberman 90) Regnard captures the distance in his photograph of Augustine. If the aura is a level of consciousness intermingling simultaneously with this world and another, Augustine was a medium for her doctors, despite their inability to translate its meaning.

The convulsions follow the aura, which typically begin on the right side of the hysterics body. In Augustine, it caused the hand to curl up in a claw-shape. The spasm would move down the body to the feet, which made balance difficult. The hysteric, hobbled, was unable to walk with ease “Her contractures were unpredictable: her neck would suddenly twist so violently that her chin would pass her shoulder blade; her leg would suddenly stiffen, like a club foot, flexing until “the heel pressed against the perineum.” (Didi-Huberman 122)

The epileptoid and clownism stages followed the aura and then the show stopping number-passionate attitudes. In X, Augustine demonstrates for her audience while describing the meaning of the bizarre series of poses, “Expressive mimicry indicating the sentiments which move the patient, in a sense that is formerly experienced by the patient
and may have played a part with onset of the illness. (Dowse) Augustine, in her public
demonstration of hysteria, was reliving the event that caused her disease. And she gave a
compelling performance.

In the display of passionate attitudes I explored the relationship between the
spectacle and the spectator in terms of eroticism. Even though the term is typically used
in its sexual context, eroticism is simply the drawing towards a thing. It is a sensual
attraction. I propose that Augustine knew of, and fed into this spectator/spectacle
relationship through eroticism. Though the spectators of Augustine’s performance gazed
with the pretense of scientific objectivity, they became voyeurs of a sensual and personal
experience, and in the theatrical setting of Tuesday Lectures, they were her scene
partners.

Augustine was a willing character in the high drama. She did feel exploited, she
felt useful. The relationship between Charcot and Augustine was interpreted many ways,
but I made the choice to explore the possibility of reciprocal satisfaction. Elaine
Showalter in her extensive research of hysteria believed that their relationship was
destructive and was ultimately the ruin of Augustine. I agree with Showalter on the
possibility of psychosomatic effect Charcot’s studies had on the women. “Having started
with the intention of making objective scientific discoveries about hysteria, Charcot
ended with a rigid model, a theoretical cage into which he squeezed all his patients. In the
highly contagious environment of the hospital, hysteria took on an immense power of
suggestion. People came in with problems- with psychosomatic conversion symptoms,
post- traumatic stress disorders, and other emotional responses to their unhappy lives. “
Charcot diagnosed them all as hysterical and projected the disease unto them and if they
weren’t hysterical before, they became so. In return, he gave them a certain degree of legitimacy, and like Augustine, enjoyed a twisted sense of celebrity. “But they were pressed into mass conformity, put into solitary confinement, turned into chronic, even lifelong patients.” (Showalter, Hystories:Hysterical Epidemics and Modern Media 37)

I recognize the acts of exploitation, but I disagree with Showalter’s opinion on the matter of dignity. She strongly believes that the doctors stripped their patients of their worth through the photography and demonstrations of Tuesday Lectures. The issue of humility versus dignity was one I grappled with during my creative process, for it significantly affected how I portrayed Augustine. I had to make a decision: Was Augustine a victim or a willing participant? As a performer, I understand the risk of taking my place on stage in front of an audience and giving myself completely to complete strangers. But I also understand its payoff.
“Suspicions would return when they considered the following paradox, which did not fail to evoke the a certain paradox of the actress: hysterics speak and act their pain, abandoning themselves to the *coup of theatre* of auras and symptoms, though just a moment ago they were living, beautiful, free of all affect and anxiety; and a moment after the vile attack they return to you merry, free of all anxiety.” (Didi-Huberman, 101)

An artist makes a choice about what to create, decides why it must be created and then how to create it. As an actor producing my own one-person show as a thesis capstone, my biggest lesson was not in the craft of acting, but in harnessing the lessons I had received leading up to the project of $X$. My graduate acting training empowered me with choices on the *what, why* and *how* of a performance. I have always been the type of student who has had an enormous amount of trust in my teachers. I absorbed most lessons and techniques as if they were the end to all my questions and all obstacles in acting. At the beginning of my training, I accepted the methods that eluded me, and felt inadequate when a certain technique didn’t gel. I became frustrated when I was told there was a variety of ways to approach a role. “Why couldn’t there just be one right way?” I often wondered. I wanted a teacher to tell me what was right and wrong so I could do my best to learn the right way to act. Instead, they shared with me an abundance of tools and techniques, and encouraged me to embrace a method of working that included multiple ways. This complicated things for me. If there was more than one effective technique in acting, I had to *choose* which worked best for *me*. And it is in the act of choosing, that I
became an artist. This is how Augustine and I are most alike. Augustine was also an actress in this way, and she made choices on how to recreate authentic experiences on stage. I knew that a deeper investigation into my own experiences as an actress would draw a closer parallel between us, and the discovery of our similarities would enhance my portrayal of her character.

Acting is an extremely personal form of artistic expressions. The medium is the actor’s body, the substance is his or her personal experience and the performance of the play is an actor’s personal relationship to the story. Augustine’s personal experience was firsthand and most likely caused the illness, so her personal relationship to the event of hysteria was intimate and genuine. But like an actress, the medium of the storytelling was her body. Regardless of any uncertainty of whether she was having an authentic seizure or exaggerating for her audience, the medium of hysteria (the art) was her body.

Through my characterization of Augustine, I understand now what Constantin Stanislavski called “public solitude.” I may be performing for ten people or two hundred, but I am alone in my creativity on that stage. (Moore 30) Even the other actors are my inventions, for I have crafted who they are to me in the play. Augustine was alone in spite of her doctors and audiences. She was alone in the experience of hysteria. In her seizures, she saw the disease up close and her demonstrations were a report of her witness to the event. Like a diver going deep into the abyss, to bring back new information to the surface, Augustine went alone in the depths of hysteria.

I have learned that my choices make the performance of a character unique. The individual does not disappear in the character. An actor’s appearance is not the only unique contribution to a character. An actor’s personal background, emotional life, past
and present experience and dreams are unique contributions to a character. It is why one actor is cast in a role over another. And it is my individuality as an actor that connects with a role and makes choices on how to portray that role. This is the same in the casting of Tuesday Lectures. Augustine was the most popular of hysterics because her connection to illness was clearly personal. Her fits were often reenactments scenarios from her past. Watching her was like viewing a play. (Didi- Huberman 117)

In this regard, Augustine’s background influenced how she expressed herself through hysteria. Augustine’s world before Salpetriere was full of pain and disappointment. She knew what rejection and abandonment felt like. She experienced rape at an early age and could relate to sexual violence. She knew what sexuality looked like. She had a well of experiences to dip into for the moments of high hysteria, and as a result her expressions reflected the highly sexual and fearful moments from her past. Regardless of whether she was having a real or fake experience in a demonstration, she had an emotional life that was enhanced by a lifetime of pain and suffering.

Augustine learned drama from her life. For me, training was a starting point. It was through learned techniques that I could create deeply emotional and engaging moments. I learned several ways of working and became confident in making choices and committing to them. The role of the student is to receive guidance from those who have traveled before them. I have been extremely fortunate in my journey as a student to be led by strong artists. They taught from their own professional experience and their own personal revelations. In my lessons, they also reminded me that the techniques they offered were tools and not concrete answers. However, I struggled with the concept of having many truths in the beginning of my studies. I wanted one right answer and wanted
someone to provide it to me as a thing I could count on. I wanted facts. But art, especially theatre, is multidimensional and complex. It is the art of life and humans and there are many layers to it, not one. I was naïve and resistant to accepting multiple possibilities, because if I had to chose, what if I chose wrong? I did not yet trust my impulses. I did not trust my choices. Training is valuable for many reasons, but I found the most important one to be repetition. Repeated lessons increased my competence and eventually I learned to be responsible for my own creativity. Augustine learned precision with repetition as well. Repeated performances helped her demonstrate clearly and give a compelling performance. She allowed her doctors to induce and inspire seizures and trusted their guidance. She had complete faith in Charcot until the very end. As an artist, I value my unique ability to trust, because it allowed me to receive my lessons. I trusted my teachers when they assured me there were many ways to meet my craft. Augustine and I share the condition of vulnerability with our masters, and therefore we could be guided through the models of successful performance, until we could takeover the reigns ourselves. It is this background that prepared me to work independently on *X: the Rise and Fall of and Asylum Star*.

**Lessons in Presence**

>“Learning is movement from moment to moment.” J. Krishnamurti

In my attempt to draw the parallel between my experience as an actress and Augustine’s, I look deeper into my own lessons in acting. My biggest lesson was in presence. In a world where we are bombarded by stimuli from all directions it is difficult
to focus on one single thing in the present moment. Living in the present is constantly a challenge, but a personal goal in my art and in my life—paying attention to the tiny details. In learning presence, I learned specificity.

Painter Georgia O’Keefe knew how to hone in on the tiny details of a thing and enlarged a flower into an overwhelmingly large and singular object so as to see it better, and in turn, show the world its complex beauty. O’Keefe was competing with a deluge of stimuli of her environment. New York in the 1920’s was rapidly increasing in size-upwards and outwards. Skyscrapers were popping up everywhere and industry was large and booming, creating a raucous and exciting visual landscape. The city was bustling with distractions. She said about her huge scale paintings, “If I could paint that flower on a huge scale, then you could not ignore its beauty.” (Eisler 327) This is the responsibility of an artist—not only to point at a thing for the rest of us to see, but to articulate it clearly and deeply. Sometimes a larger scale is needed for better perspective. Theatre is one of the best art forms to enhance and expand the meaning of things that otherwise are seem ordinary and small. If theatre is a lens that magnifies, actors serve as specimens to be examined. Augustine demonstrated hysteria with an eye on her audience, always aware of being seen. In our performances, we both served a greater purpose. Didi-Hubermann, a supporter of the idea that Augustine was part actress and part patient, felt that “her body thus made a rigorous gift of itself.”(117)

As a student, I found acting lessons to be metaphors for how to be alive in my life. The greatest gift of my training was learning how to pay attention. Presence is a state of readiness that allows stimuli to be received and acted upon in the moment, and in acting, presence is key. American theatre director, Anne Bogart, calls this state of being,
“grace”. She says, “To receive grace, it is not enough to enter outer space or to step onto a stage. You have to arrive with a real curiosity and a need for the information, as well as a sensitive-enough perceptual organism to register the effect of the encounter and, for an actor, you need to be able to share these impressions with the audience.” (Bogart 97) She also says that this encounter requires an even simultaneous exchange of “feedforward” and “feedback.” She means that receptivity is to be active and even. “An actor with a lot of feedforward and not enough feedback comes across as aggressive and invulnerable…an actor with too little feedforward and excess in feedback merely seems narcissistic and lethargic…an effective actor extends out into the world and at the same time allows him-or herself to receive impressions back and be changed by the experience.” (Bogart 95)

In life and on stage, I struggle with maintaining the even reciprocity of this exchange. I am inclined to lean into a feedforward position, ready to go. In portraying Augustine, I had to practice being vulnerable and receptive, because she was being affected by many sources—her memories and the present, real time experience with her audience during X. I found feedforward and feedback to be the greatest challenge, especially since I did not have a physical scene partner, only my imagination. I had to be present or moments could be missed as a result of not allowing information to land and resonate within me.

Augustine was also eager to please her leaders and for some time, very enthusiastic about her work. I relate to her as a student of her own craft—hysteria. Through lessons of experience and staged demonstrations, she gained knowledge of what hysteria was, or at least what it was expected to be, and learned how to produce desired
results. When I was a student, I wanted to skip steps in order to get to the end quickly, so as to get on to the next lesson. This eagerness came from a place of earnest love for the work, but I needed to learn to slow down. It surfaced in my acting. My enthusiasm is valuable, but learning to slow down and let things happen is a lesson in acting and in life. It is necessary in order to pay attention to the small, but significant details of living.

Practicing presence was crucial in the process of developing X. Slowing down and playing the moment allowed me to focus on the process and not the product. In a world of mass consumption, it is difficult to allow art to be an experience and not a product. As one who creates and presents their work to an audience, I wanted to please. It is very easy to anticipate the actual performance. I kept wondering during my process, “Is this any good at all?” Or “How does this look?” I tried to stamp out the thought before it could infect my work. Ironically, I tried to not look for approval of my portrayal of Augustine who would ask her directors/doctors, “How did I do?” after a fit of hysteria. (Didi-Hubermann 78) This is an example of the many ways I am tested by the complicated nature of the role, and the more I focused on the conundrum, the more self-conscious I became. Just as in an acting moment with a scene partner on stage, I am at risk to anticipate the next moment by mentally readying myself with responses. This hinders authentic experience. Acting is a reaction to stimulus- environmental or verbal. It was extremely crucial for me have acute concentration while I was working alone, because my stimulus was coming from other sources than a scene partner. I imagine Augustine in her cell when she was not performing, probably concentrating on how to refine her next performance. Maybe she practiced the fits while she alone, marking out clear transitions
from one phase to another. The haunting image draws the parallel closer between us as artists.

In my training, I was introduced to different ways to practice presence, but the greatest lesson I received was during my mother’s illness and death. Her cancer swept her away quickly and did not afford me a moment to anticipate the outcome. I survived the loss by grounding myself physically and mentally—and this required extremely acute presence. I remember being incapable of anticipating even the next day, because the possibility of her death was too hard to conceive. I remained with her every moment and it was in my mother’s hospital room that I really paid attention. In that sharp state of awareness, the sound of electricity buzzed so loudly and I could hear every voice from down the hall. The slightest movement of her chest expanded the room, pushing past the walls of the hospital, past the physical boundaries of terrestrial, even exceeding universes. Her shallow breath slowed time down and I could see every detail of the day, her room, the chalk of her skin. The excruciating detail of the moment wove in and out of memories of her in health. I experienced the past as fabric of the present. Her life was closing down and my witness to it opened a level of consciousness. The concept of later did not exist because if it ever arrived my mother would not be a part of it. I understood the oxymoron sweet pain. Ironically, I felt the most alive during my mother’s death. The awareness was a gift, because it cultivated the courage to meet any challenge afterwards with clarity and strength.

I imagine Augustine trying to anticipate the next moment in her cloistered life. She could not have known what the next step to be. She had no guarantee that she would ever leave Salpetriere and lead a normal life. Her future was very uncertain. All she had
was the present moment. Life did not exit for her outside of the present, and her present was always in a state of high intensity. Nothing existed to her outside of the present. And then I imagine what made Augustine feel most alive. The presence of death made me feel alive, so perhaps Augustine came to life in hysteria.

A Personal Contract

X was the first time I had worked independently on a theatrical piece, but I felt ready to meet the work in this manner at this particular juncture in my life. I trained two years in a private studio setting with four other actors. My internship followed giving me many opportunities to apply my training in a professional environment over the duration of the 2007-2008 Season at Orlando Shakespeare Theater. The next lesson in line for me was to stand on my own and use the tools of grad school.

While Augustine had the instruction and guidance of Charcot, she was a solo artist. She came with the raw talent—hysteria. Charcot only helped shape the experiences to serve his agenda. Although I eventually had a director to work with me in every rehearsal, from the beginning I was in charge of the creative direction of the play. Since I was the only one in of the charge, I had to come up with the plan. I didn’t have a director to set artistic goals or a stage manager to make sure the project was on task until a couple of months before the first performance. I had to hold myself accountable for the work. While I have always been a hard worker, I have usually been under the guidance of at least one person in charge. I depended on that person, whether it was a teacher or director, for guidance affirmation of the work, so working alone was a brand new challenge and lesson unto itself.
Long before my first rehearsal, I set personal goals for myself. I knew right away that I needed to be physically capable of performing for forty-five minutes straight with no break. I had never done this before. In past plays, I could count on a break between scenes that afforded me a rest, or at least a chance to catch my breath. In $X$, I never left the stage, so I needed to be able to sustain my energy and control my breath. I was not in very good physical shape at the beginning of my process, so I hired a physical trainer to work with me twice a week and worked alone at the gym frequently. Aside from general weight loss, my goal was to strengthen my lower body. I knew that strong legs would ground me, and like the roots of tree, free my upper body for fluid and easy movement.

My graduate training empowered me with tools and methods of working. Some of the methods I connected with more than others and have pursued them further. For example, in the summer of 2007, I committed taking one method of working to a new level. I attended a month long intensive training session in upstate New York with the Saratoga International Theatre Institute (SITI Company). SITI was founded by Anne Bogart and Tadashi Suzuki to “redefine and revitalize contemporary theatre in the United States through an emphasis on international cultural exchange and collaboration” (Bogart and Landau, The Viewpoints Book 5) Part of the company’s mission is the training of young theatre artists. Sixty people were chosen from all over the world to train together with the SITI Company in Saratoga Springs, New York. It was there that I learned the Suzuki Method and the freedom of Viewpoints, which I used again during my preparation of $X$. I warmed up before rehearsals using Suzuki. Suzuki focuses on the lower body and the work helped me strengthen my physical connection to the stage and to the performance.
Suzuki’s methodology comes from a deep tradition of the Japanese theatre of martial discipline and physical control. Suzuki is not necessarily a way to perform, but a training method. It is preparation for the performance. Like a ballerina at her barre, the actor must also exercise control of his or her body so that performance is in control. “The Suzuki exercises are meant to be a means of discovery of a self consciousness of the body, and the actors success in doing them confirms his ability to make that discovery.” (Suzuki 12)

Warming up with Suzuki freed my upper body of most of its rigidness, and helped the physical transformations flow. I could easily shift energy centers for each character because my legs were connected firmly to the ground and my body loose and in a state of readiness. For example, I decided that Charcot’s energy center was in his chest and Augustine’s was in her groin. In the scene where I recreate a conversation between the two, I was challenged with the physical transition from each of them in a back and forth conversation. Warming up with Suzuki allowed me the agility practice the scene repeatedly. The Suzuki method is extremely physically challenging, but in a moment of physical duress, the body can find a state of release, which allows the voice to project from the body and to resonate fully and deeply. I learned from my graduate voice and movement studios other ways of doing this, but until Suzuki, I underestimated my physical and vocal potential. I also experienced an extremely deep state of presence through Suzuki stomping. Suzuki connects an actor to the earth through physical contact with the ground. “The actor composes himself on the basis of his sense of contact with the ground by the way in which his body makes contact with the floor.” (Suzuki 8)
each strike of the foot to the floor is a conversation with the body and a way to measure one’s self.

Learning Suzuki is another example of how trusting those that have gone before you in the journey pays off. I struggled at the beginning and didn’t understand the point of the exercises. And my body was exhausted and sore from the work. I had trouble walking the first week. I was miserable and felt I made a mistake in signing up for the training. But as usual, I trusted my teachers. At the beginning of the very first class, my teacher said, “Do not ask questions. Wait and receive the answers from yourself.” This was new for me. I was accustomed to talking about the work and usually insisted on doing so before I even tried doing it. But I trusted that he knew what he was talking about it. My commitment level to training was deepening and I made a personal contract with myself to meet the work with the intensity it was coming at me with. The day I received my answer I was struggling even more than usual. My legs were wobbly in the positions I had to hold and I fell over. It had been my tendency to feel embarrassed about my blunders, but something shifted in me in that moment. I realized that I can fall once, but because I did once, I don’t have to again. Curiosity took the place of embarrassment and I became fixed on finding a solution. I set out how to control the movement in spite of my exhaustion. In class my teacher would remind us to “Hold on tightly, let go lightly.” I understood that to stomp I had to strike straight down into the earth through my leg with the energy of my whole body. Each moment of impact on the floor can be a release, which is the opposite of what I had been doing. I was tensing up with each strike. I finally realized that the strength of the movement is also in the letting go the moment after you to strike the floor. After doing several repetitions like this, my periphery
expanded, I felt taller, and my breath was deep. I felt the world around me with expanded awareness. I began to grasp the real difference between movement and stillness. Each time I swiftly brought my leg up and then down into the ground, my body was in movement. That was not hard to perceive. But I finally felt movement in the stillness, which occurred after the strike of my foot into the ground. Each moment of stillness was a state of potential movement, like a car with the brakes on.

Suzuki, like many other vocal and movement techniques, puts the body in a state of discomfort, and it is in that tension that release is possible. I liken this experience to Augustine’s hysterical seizure. Her contractures, the stiffening and gyration of the muscles and vocal release in the positions resemble the “destructuring” vocal work of Catherine Fitzmaurice I became familiar with in graduate school. The following passage could be describing a hysterical fit.

“The Destructuring work consists of a deep exploration into the autonomic nervous system functions: the spontaneous, organic impulses which every actor aspires to incorporate into the acting process. The tendency of the body to vibrate involuntarily as a healing response to a perceived stimulus in the autonomic "fight or flight" mode (as in shivering with cold or fear, trembling with grief, anger, fatigue, or excitement) is replicated by applying induced tremor initially through hyper-extension of the body's extremities only, thus leaving the torso muscles free to respond with a heightened breathing pattern.” (Fitzmaurice)

In reflecting back on my training, I recognize that my lessons prepared me for what was to be the most challenging performance I had yet to give. But the biggest lesson of all was in my discovery that Augustine and I had more in common than I expected. The multidimensional aspects of Augustine’s life as a patient and performer resembled my own experiences as a student and performer. Looking back at specific techniques and
methods, I found more similarities than differences between us, and embracing those qualities helped enhance my portrayal of her character in my thesis production.
CHAPTER FIVE
CHARACTER ANALYSIS

The first time I read *X: The Rise and Fall of an Asylum Star* my heart raced and my palms sweated. When I got to the end, I flipped the script back to the first page and started reading it a second time. I had to make sure my first reaction to the story was the same as my second. When I finished the play for the second time, I knew something of which I was certain: I was meant to play Augustine.

When an actor approaches a role there are several ways to begin. An actor usually auditions for a role, and like a job interview, the role is given the actor whom the person believes to be best for the job. I have never before sought out a specific role by auditioning for it. I am lucky to be cast in very rewarding roles, but as far as “to-die-for parts,” I take what comes my way. It is my belief that every actor should be able to play any part convincingly. Acting is invention. If a personal connection isn’t made with the character, an actor must invent one. However, there are certain characters to which I personally relate and want the chance to portray. Alma from Tennessee Williams’ *Summer and Smoke* is especially familiar to me and I yearn to play her one-day. On a very personal level, I connect with unconditional yet unrequited love and her sincerity and tendency to seem ridiculous to people who haven’t scraped her surface. I want to redeem her. I want to give her another life through my portrayal of her.

This is just one example of the way an actor pines for certain roles. For me, I tend to pine for women who seem complex and confusing on that surface, but ultimately want something as simple and plain as love. When I read *X* for the first time, I felt that pang of
love for Augustine. I made an immediate personal connection. But in the context of Dowse’s theatrical version of Augustine’s life, she was even more complicated on the page as she was in her life. She was a myriad of emotions and personalities for she played all the roles of the people of her life. It took more time and work for me to understand Augustine, but I instantly knew that she and I were essentially the same in this way: we were performers. While our given circumstances are drastically different, we are similar in what we want from our audiences and our teachers. It took a lot of soul searching for me to make more specific connections, but the more I did, the more defined and specific my work became.

**The Given Circumstances**

A play is a map. It provides clues to who a person is, what they want and a way to attain what they want. Like breadcrumbs in a dark forest, the facts of the play are collected along the journey. For an actor, this often where we begin to piece a character together. Sonia Moore wrote a guide to the Stanislavski method and illustrates his philosophy and application of the given circumstances in a play. She describes it, “The given circumstances includes the plot of the play, the epoch, the time and place of action, the conditioning of life, the director’s and the actor’s interpretation, the setting, the properties, lighting, sound effects, all an actor encounters while he creates a role.” (Moore 26) So that is where I began with Augustine.

In *X: The Rise and Fall of an Asylum Star*, Augustine begins her journey with the audience by giving them permission to see her. This is an important moment for me, an actor investigating my character’s behavior. She was on display for years at Salpetriere, but she was held captive. Her situation at the time may have felt like the best alternative
to homelessness, so she allowed- even embraced- the role of object in a spectacle of voyeurism. To begin her story again in X is an act of giving permission to be seen again. But she drives the story this time.

Fact: She is fifteen years old and wears a nightgown for the whole play. She is in bed in a hospital and has been there several years. She has played the role of star performer in the spectacle of hysteria; she is proud of herself. She admires and loves Dr. Charcot. She loses her color vision. She escapes the hospital dressed in men’s clothing. Those are facts that I gleaned from the play and the research of her life. Augustine is very frank and direct with the information she shares about her life, but I found more of her emotional self from what she didn’t say. She never directly talks about hysteria, not like the doctors did in the books I read. Instead, she sings songs about it and tricks the audience in finding the fun in it. She doesn’t consider herself a victim. She is not attempting to elicit sympathy. She is trying to take back control of her story. She chooses her method, which is spectacle. Augustine doesn’t want the audience to know her as a victim, but a star. She carefully selects the information she presents. She puts on her best show.

Fact: she is in Paris in a hospital called Salpetriere. She describes the environment. She relives her experiences as acting scenes from her past. We meet the characters and get to know them through her impressions of them. She is in control of what we know and how we take in the information. In this manner, we learn that her mother’s lover had repeatedly raped her, and that act of violence probably induced her current condition. After alarming and embarrassing public displays of seizures, her mother sent her to a convent where the nuns tried to exorcise demons from her. Finally,
her mother dumped her at Salpetriere, a women’s mental hospital, where the famous neurologist Dr. Charcot studied her, and where she gained her reputation as the most melodramatic woman in Paris.

These are the facts within the structure of the play, X: The Rise and Fall of and Asylum Star. Augustine does not talk about how she feels. In one brief moment she shows us her fear of the strange noises of the hospital her first night there, but she moves so quickly from the experience so as to not let us dwell on her unhappiness. (Dowse) But I cannot ignore the information she chooses not to divulge to us: her feelings of loss and abandonment. She tells us her mother brought her to Salpetriere. She does not explain to us how it made her feel. So I sought out to understand how the events of her life, the fact of sexual abuse and abandonment, influenced her choices and behavior and made up her character.

I sought possible psychological reasons for her behavior. Aside from the seizures, today Augustine could be diagnosed with Borderline Personality Disorder, and that she suffered from abandonment anxiety. According to an article on BPD, the diagnosis of this mental condition is controversial, because according to the mental health experts, women are more likely to suffer from it than men. This sexual discrimination is akin to hysteria in its heyday. “People with the disorder often display labile (wildly fluctuating) sense of self worth, self image and affect (expressed emotions).” (Vankin 1) The song, “The Queen of Salpetriere” is an example of her inflated sense of self worth. She brags about her celebrity and all the attention she has received from her performances. Although she has received quite a bit of attention from her demonstrations at Tuesday Lectures, she branded herself a celebrity. The enormous amount of energy and effort Augustine gave
to her demonstrations resemble the eagerness to please typical in women with Borderline Personality Disorder. Augustine masterfully displayed the symptoms of hysteria and secured a place at the top. BPD stems from the anxiety of abandonment, and Augustine’s contribution to Dr. Charcot’s study was an attempt to “preempt or prevent abandonment…” (Vankin) Sufferers BPD may also use their sexuality to prevent abandonment. I believe Augustine did so to an extent. She posed seductively for photographs and assumed the role of temptress for the knowledge-craving doctors. She had a better chance of survival with Dr. Charcot. Her willingness to participate in the bizarre act of exploitation that was hysteria was actually an act of self-preservation, neurotic as it was (Vankin). She played the woman, despite her youth. She assumed the role of the sensual feminine, which was the product or the cause of hysteria. It was in this way she co-invented the mystique of hysteria that would eventually lose its allure for her.

I did not attempt to diagnose Augustine through my research, but I hoped to be led to better sense of Augustine as a person, not just a medical oddity. I hoped to be led to the truth and meaning of her life. If I was going to portray her, I had to understand the reasons for her behavior. I continued to search and found an emotional disorder that fit her and most people in the world: codependence. Codependents depend on other people for their emotional gratification and the performance of both inconsequential and crucial daily and psychological functions.” “(Codependents) are needy, demanding and submissive. They suffer from abandonment anxiety…” (Vankin) I believed this description fit Augustine perfectly. But it fit a lot of people. Apparently it is not unusual to have these feelings and behavior. I discovered another piece of information that supported what I knew from my instinct of her character. The article implies that the act
of submission by a codependent person is an act of manipulation. Manipulation is control, and Augustine had so very little control over life, it makes sense that she exercised what little she had. In addition to trying to understand Augustine’s emotional and motivations, my research on codependence gave me, as an actress, information as to what Augustine needs from her present audience. She wants love. She wants to be watched so that there is evidence left that she existed. She wanted her life to have meaning.

I got a better understanding of the inner workings of Augustine through learning about emotional disorders; I still had trouble finding a circumstantial parallel between Augustine and me. In terms of understanding her on a deeper level, I was headed in the right direction. So I continued digging and went to other sources in the fields of emotional disorders. On a website for Borderline Personality Disorder, I found a list of situations that caused Abandonment Anxiety. Out of a list of twenty-three scenarios, Augustine had experienced nine. The most profound and undeniably influential experiences of her past: a mother leaving her child, a father leaving his child, moving, being rejected, being emotionally and sexually abused. (web cite) I know that her mother left her, and though her father is not mentioned in the documentation of her life or in X, the lack of his presence is evidence of abandonment, for whatever unknown reasons. Her mother’s lover raped her and she was moved from her mother’s home and protection to Salpetriere. People rejected her outside of the hospital walls. She arrived at Salpetriere with very heavy emotional baggage.

I do not think Augustine dwelled on her sufferings, but adapted to them. I related to her ability to do this. Personally, I am not one to wallow in self-pity, although I have
had my share of loss and abandonment. I make the most of my situation and have a talent for turning obstacles into opportunities. Augustine saw her opportunity through the novelty of her condition; if she had a specialty, her chances of abandonment were less likely. In *X: The Rise and Fall of an Asylum Star*, she introduces this talent at the top of the play. Augustine pulls out a vibrant red ribbon out of the darkness into the light, and as if with magic, she summons her memories. She doesn’t say, “Let me tell you about my life,” but boldly beckons the audience with color. It is an act of bravado that sets the mood for the evening. She sets the stage on her terms. In the top moment of the play, she acknowledges the audience’s presence and makes a decision. She gives permission, perhaps for what is the final time, to be viewed by strangers. This is the first time she has spoken of her career as a hysterical woman and she makes the choice to speak about it now. I believe Augustine, in her life, had the power of choice in as a patient/performer within the theatrical arena of Tuesday Lectures, and this is where I drew an even and strong parallel between us. We are both entertainers. We both exploit ourselves publicly for strangers. Being on stage means not being alone. There will always be someone else in the room. I do not have abandonment anxiety, but I do want to always have relationships, and on stage I have them with an audience, a cast, and a production team. I am never alone.

**The Imaginative Investigator**

I disagree with the idea of *becoming* a character. I am not mentally ill; therefore I will never believe I am anybody but myself. And it is not possible to be two people. Stanislavski agrees. “An experience of the actor in stage is different from an experience in life. The difference lies in the fact that the actor lives on stage as the character and also
as the actor who creates the character.” (Moore 41) Acting is more like a controlled schizophrenia. In my most connected acting moments, I am both aware of the technique of acing and equally aware of my imagined world and relationships on stage. I agree to believe in a set of given circumstances, like playing a game by specific rules. A set of given circumstances changes the way that, Erika the actor, behaves. Again, Stanislavski sums up the actors experience on a psychological level. “In his creation is to interpret the past, future, or an imaginary epoch, he has either to reconstruct or to recreate something out of his imagination.” (Moore 96) I played by Augustine’s rules, which were based on the information within the play and outside extended research. I invented answers for some of the mysteries. In his method of acting, Stanislavski calls this the “magic if”. I did not believe that I was Augustine and living her life, but I did believe in each emotional and physical moment that I engaged in. I believed in the present, but the layers of Augustine’s given circumstances informed me of how to play each moment.

While information on Borderline Personality Disorder, Abandonment Anxiety, and Codependence was extremely insightful, I have always found that the key to character is in the information and the gaps of information in the play. I imagine Augustine’s mother raised her alone. In the harsh reality of single parenthood for the lower classes, it can be seen as sensible that her mother left her at Salpetriere. She was powerless over Augustine’s mysterious illness. She was also having an affair with her boss, the man that molested Augustine. Getting rid of Augustine was an act of survival for both of them. I know that Augustine lived for several years in a hospital full of lunatic women. I imagined she was grateful for every chance she got to leave the ward and enjoy the attention of the doctors, even if they were projecting an illness. I imagine she
felt this to be her saving grace. If she was not a star of hysteria, then what would she be? Forgotten and abandoned with the rest of the loonies?

A question I lived with during this process was why was Augustine so willing to demonstrate? Plenty of other women demonstrated for Charcot at Tuesday Lectures, so what did Augustine do to make her so popular? And why did she go above and beyond? What exactly was wrong with her? According to some experts of personality disorders, Augustine suffered from abandonment issues and displayed the classic symptoms of codependence, the result of that anxiety. Her own mother dumped Augustine, so she did everything she could to please her doctors, her new guardians, to prevent abandonment again. “Dependents typically go around eliciting constant and repeated reassurances and advice from a myriad sources. This recurrent solicitation of succor is proof that the codependent seeks to transfer responsibility for his or her life to others, whether they have agreed to assume it or not.” (cite article) Augustine was rewarded for her supplication with colorful ribbons, which were her bliss, and the attention she received took the place for love. In the same article the author seems to again describe Augustine, “The codependent molds himself/herself and bends over backward to cater to the needs of his nearest and dearest and satisfy their every whim, wish, expectation, and demand. Nothing is too unpleasant or unacceptable if it serves to secure the uninterrupted presence of the codependent's family and friends and the emotional sustenance s/he can extract (or extort) from them.” I do not believe that Augustine felt exploited or degraded. She maintained a certain amount of dignity throughout. The photographs of her reveal a woman in control. I believe that she submitted because the payoff was worth it. She found satisfaction in her reciprocal relationship with Charcot. If she invented his love and
approval of her, it was enough for her at the time. As a codependent in fear of being abandoned, her demonstrations were acts of love and loyalty to her doctors. After Augustine gained some success and was promoted to top performer of Salpetriere, her love for Charcot began to resemble romantic love. “Did you hear? I am in love!” (Dowse) Augustine used Charcot as a substitution for her parents and a romantic lover. He filled a role and satisfied Augustine’s need for love and attention.

Augustine gives us a few facts of her life, but she says much more about her experience through her decisive use of spectacle. I understand that Dowse invented X, but I must see all structural choices as Augustine’s creation. Her theatrical choices in telling us her story was just as informative of her inner life as was the research.

Working Contrapuntally

According to her written history and to Dowse’s interpretation of it, Augustine was a complex personality who played various roles. She was a scientific specimen, a servant of science for her doctors, as well as object of intrigue and source of entertainment for public audiences. In X, her roles are similar, but on heightened theatrical level. Because Augustine is many people and things at once, I chose to work contrapuntally within the script. Contrapuntal is a musical term. It means the “combination of two or more independent melodies into a single harmonic texture in which each retains its linear character.” (Belkon) The texture is the body of Augustine. The different layers of Augustine’s character were so distinguishable, they could exist separately. I wanted to explore the layers and their contrasts since Augustine is full of contradictions. Contrapuntal also means the use of contrast or interplay of elements in a work of art (as a drama.) Two opposites I wanted to work with were truth and
embellishment, real experience and performance. Working with both is working contrapuntally, for the combination of two or more melodic lines played against one another created and tension and texture in the performance. It is also the texture of our lives. Our environment is full of competing melodies- stimuli that, layer upon layer create a beautiful cacophonic harmony. I felt I could create a compelling performance by working on stage with the contrasting layers separately.

In the script *X: the Rise and Fall of an Asylum Star*, Dowse imagined Augustine’s performative nature to resemble popular entertainment of nineteenth century Paris, so she gave her an accordion and songs. The songs and dances are acting contrapuntally to the melodrama inherent in the circumstances. Dowse’s version of Augustine’s story seems to contradict the subject matter. I made more discoveries about the inner life of Augustine through exploring the performative possibilities of the entire show as equivalence to realistic hysterical behavior. For example, Augustine demonstrates the hysterical fit for the audience. Instead of attempting to recreate a realistic demonstration, she breaks it down by components and gives the gestures a circus like quality. She does cartwheels and somersaults instead of having a full-blown seizure. I underscored the segment with recognizable circus music to enhance the big top quality of the demonstration. I looked for every opportunity to heighten moments in the play in this way so as to really commit to the coexisting reality of spectacle and melodrama. I also looked for the humor. Her doctors called her “charming Augustine” and Dowse’s depiction of her character supports that description. The Augustine in X is silly, sexy, naïve, precocious, and earnest.
I felt that Augustine used the specific performance style in X for two reasons: 1. So that she could emotionally disconnect from the reality of her suffering, and 2. She understood on some level that the demonstrations of her condition, in her life and in the retelling of her life, were parallel performances. I believe the playwright understood the irony of her theatrical choices. As the performer of X, I chose to expand on Dowse’s theatrical conceits. In the script, Dowse does not explain the style of the play. It is evident in the songs. Augustine sings about Salpetriere:

“Oh yes, its Government-funded, you’ll be impressed!
It’s the new improved, in the groove, place to convalesce!
It’s the avant-garde, winning-card, home of distress!
It’s Salpetriere!” (Dowse)

And in “The Queen of the Asylum”, she suggests with humor that she was a seductress:

“Let me make eyes at you
Let me make you bill and coo
Let me do my little thing for you
And you! And you! And you!
Queen of the Asylum- they say I beguile them
I’m totally loopy for you!” (Dowse)

I do not believe she entirely tongue and cheek, but that the ironic humor of the songs did not escape some one as perspicacious as Augustine.

Contrapuntally, the accordion served as an outlet of emotion, in spite of its festivity and humor. Accordion music is an instrument of the common people. (cite wie) It is considered to be a one-man band since it doesn’t need accompanist, because it contains both bass and melody. (fix fact) It is the perfect instrument for Augustine performing in X, a one-woman show about her singular experience as a performer at Salpetriere. I relate the significance of the independent accordion to Augustine’s personality. It is symbolic. The style of music Dowse wrote for X is also a metaphor for
the entertainment quality of Tuesday Lectures. The café concert quality of the music is
deceptive and contradicts the macabre reality. It is in opposites that truth and meaning
rise from. It served as a counterpoint to the real events of her life and worked
contrapuntally.

I knew this was the way to develop the play and decided to go further with the
contrapuntal method. For example, the first song in the show is “Salpetriere” which is
Augustine’s recollection and fantasy of the place that was to become her home and my
first introduction to the conceit of the play. All the songs in X are opportunities to expand
the razzle-dazzle show quality of the real experience. The accordion became a mask for
me as the actor playing Augustine. Each time I put it on my body, I changed and felt bold
and connected. I also felt unembarrassed of my lack of skill. I practiced the accordion for
three months, so I was not by any means skilled- but I changed every time I strapped the
instrument to my body, and was able to tap into a sensuality and bawdiness that
Augustine does not otherwise possess.

All musical numbers were windows into Augustine’s complex character; but they
also had a theatrical function. The splashy musical numbers of X have a simple
objective- to entertain. The objective of the songs are to entice the audience which pulls
them in so that Augustine can meet the super-objective of the play- to take back her story,
her dignity and her soul. She manipulates with music. The accordion is also a mask for
Augustine. With a mask, the performer can transform with the simple act of putting it on.
But is also creates a safe emotional distance between performer and audience. The
Augustine who sings and dances with an accordion doesn’t feel the pain that might get in
the way of her objective. It allows her to get the job done.
Another component of the popular entertainment that I added to my contrapuntal concept was the dance called the can-can. It was a popular form of dance in Paris at the time and I decided to insert the dance into my first song. I attempted to match the hysterical convulsions and seizures with an equally energetic and exhausting action-dancing. Like the songs, the can-can served two actions: to entice through subversive entertainment and to build a barrier that keeps Augustine at a safe emotional distance.

I do the same thing as an actor. My actions on stage can deepen my emotional state, but at the same time, guard me from overexposure. I do this by concentrating on my actions. In a play, everyone wants something and makes an attempt to gain it. If I play my objective, I can ride the waves of an emotion instead of drowning in its depth. I can change someone and be changed by focusing on actions, and that is point of a play.

Through song and dance, cartwheels and somersaults, Augustine gains control over her personal experience as well as the audience’s. But, in contrast, I attempted to find every possible moment of real experience in X. One of the first moments in the play, she suffers from a seizure at a tea party. There is no song and dance to veil the real experience. Another moment I attempted to magnify by contrast was immediately after what I refer to as the “circus section.” Augustine has just finished her silly interpretation of the hysterical seizure. She attempts to demonstrate for the audience the individual components of the seizure. I underscored with circus-music, slide-whistle and cymbal. I wanted to pose the question of her sincerity by the stunt, because she is then led, in her memory, to her first demonstration of Tuesday Lecture. In Augustine’s career at Salpetriere, she maintained a level of control of her life by playing the game, but I do not think she was always in control. In this moment in the play, I knew the experience had to
be sincere with total loss of control. She learned later to reproduce the desired results for her doctors, but her experience is pure and organic when she was in front of an audience for the first time. It was terrifying for her, but it was worth it. After her suffering was exploited publicly for the first time, she tasted the gratification of an impressive demonstration-applause.

The Voices in Her Head

Augustine performs each character of X herself, which added another layer of performance to my portrayal of her. I wanted her impressions to be clear characters, since I had to differentiate between Augustine’s character and her scene partners. As an actor, I naturally want to convince the audience of who I am, at least enough to suspend disbelief. But Augustine’s impressions of the other characters had to be more specific due to the multiple dimensions of the play. I, the actor, playing Augustine who is playing a doctor need to be extremely clear or the lines get blurred. It can be confusing for the audience. Besides, if Augustine were a consummate performer, her impressions of people would have been excellent. Again, many layers of reason, actions, and intentions affect my performance.

Augustine goes in and out of characters to show the audience scenes as she remembers them. She plays a scene and steps out of it to comment on it. One memory reminds her of another. She is also led through the maze of her mind. This maneuver became another possibility for contrapuntal awareness in working. Stepping in and out of present and past, if clearly acted, could be played as point and counterpoint. The contrast in the dual performances illustrate her multiple realities, and could be theatrically compelling.
Most of my character discoveries were from the world of the play that Dowse created. I was inspired by research and facts, but it was the world Dowse created in the text of her play that my imagination and intuition reacted to while crafting Augustine’s character. I expanded the playwright’s theatrical conventions and developed a performance that embraced the complexity of Augustine’s character and multiple layers of reality within the play.
In search of a director! Of course, I must have a director. I entertained the idea of working alone and have a friend come in toward for an outside perspective, but realize it is a foolish thought to do it alone. I need a director. I am reminded by a quote by Anne Bogart regarding the relationship with between the Actor and Director. She likens it to the function of a control tower to astronaut. “The astronaut experiences disorientation, giddiness, glimpses a spectacle of the universe that no one has ever seen. In return, the control tower instructs, ‘Try a little to the left!’ The astronaut makes the adjustment and reports back on the effect of the action.” (Bogart 97) I needed to find a director to work with that could share and influence my discoveries. I asked my friend and former classmate, Aradhana, and she said immediately said she was interested, she can’t commit to anything yet. Must ask Stephen Patterson how he worked on his solo show. Did he do it alone? Should I ask Stephen to look at it while he is in town for Macbeth? He is the one that gave me the show and he has directed it before. At this point, until Aradhana agrees, I will need him to look at it, and maybe get other directors to visit my rehearsals. Chris will have to see a couple of rehearsals. I must have an outside perspective. But if I have to rely on a several opinions, won’t that be hindering instead of helpful? Too many cooks in the kitchen, so to speak? No, I feel I need one director and he or she needs to take ownership of this project as I have. A visionary. Yes, I can dream of results- I see the show in my head- but I need a capable, experienced, passionate person who will create the work with me. I envision X. I need someone to envision me within that world and
help me through it. How do performance artists work alone? Must read Karen Finley and look to other examples- but still they write their text, I am working with something that has already been written. I also need help articulating elemental issues, design issues. I don’t know how to tie everything together. That doesn’t mean I won’t be able to learn. I always learn best when I am faced with something I must do and don’t feel ready yet for. I need someone to look at me during the process. Really, ultimately, I am working on a piece that will be watched while I am present. Theatre is ultimate voyeurism. I need someone to watch me while I work. When someone looks at a thing it changes the molecular make up. A gaze affects an object.

12-08-07

Something Aradhana said the other day is haunting me. “You just need an eye.” She said this and it bothers me because the word “just” is a disqualifier. It detracts meaning from the subject. It discounts anything else in the statement because it takes away the worth. It is apologetic. No, I don’t “just” need an eye. I need a visionary to see the work with me and to see it through. I need another an artist to collaborate with. I need someone who will also invest a high level of quality of attention. And I am reminded that you must choose your words well. Words are powerful. Words are labels and definitions. You must be careful how you define a thing.
Research list:

Vaudeville: anything at all there? My instinct says yes, especially the short scenes, the musical numbers. A sort of razzle-dazzle quality could be there. I am looking for a structure, a frame. The play cannot be too melodramatic. It wants to be showy. It wants o a show in the classic sense. I must read more about Vaudeville. Was there a French Vaudeville movement? Or is it only American? What was the French equivalent? Something is there that I can borrow from for the style of my play.

Burlesque: Although Augustine is a young girl there wants to be sexiness, especially with the musical numbers. A wise cracking, edgy maturity is in her words and songs. I feel that the show wants to go in that direction sometimes. The contrast could be great to go between clinical reality and a burlesque show—for a sexy siren song, colorful and playful and light to be about being hospitalized in an insane asylum. Again, don’t play the darkness. It puts the brain to sleep. The brain wants novelty and color.

Hysteria: What in the world is it anyway? I associate it with humor. “It was hysterical!” Knee slapping guffaw. Maybe there is something in that, as well. Find the humor. Always look for the humor.

Salpetriere: Find out its history.

Paris: Its important to know the environment. If I understand Augustine’s world better, I might be clued in on so many questions I have about her. Why did she willingly participate in the demonstrations? Also, were the people of Paris a different kind of audience? Is it a French thing to be attracted to this kind of spectacle of suffering?
I saw my friend Janet’s one woman show, *The Belle of Amherst*. The experience was very informative to my own endeavor. I have spoken with her previously and she shared with me her challenges. She did not have a director in the room with her during the rehearsal period. She said she put stuffed animals in the audience so she could establish points of contact. Maybe I should do something like that. I really hope I do not end up alone though.

I was reminded by Janet’s show to know my audience. Who am I telling this story to? Her venue was a senior citizen’s retirement home. Rodney and I were the youngest people in the audience. Her crowd was hard of hearing so she performed with a hand held microphone. I really admire her ability to adapt to her present environment in the moment. Also, her show was very meaningful for her group, for those who too old hear and weren’t asleep- it was a tough crowd! This makes me think of my show and who will be in the seats. Since it will be my thesis show, it will most likely be people who know and care about me. Then there will be my committee who will want me to succeed, but will be watching with a critical eye. I don’t think I want to push the show on the public. How does one market a show anyway? That part of the deal eludes me. For now I want to focus on artistic integrity. But I also think of who is in Augustine’s audience. What is her need in the present and what was her need in the past performances at Tuesday Lectures? Why did give so much of herself? Another thing I need to decide- how willing was she? Was she a victim? How interesting to think she wasn’t, in fact, she was a conspirator and cause of her demise, her fall from stardom.
Finding a venue. Finding performance dates. I contacted UCF about using the black box. I have to be aware of dates on their calendar, such as the one act festival, finals, etc. The space is free, but how in the world will I work over there if I am always at the Shakespeare Theater? I bet I could do it here, but then I lose a bunch of audience. Who is going to drive out here to see it?

I need to start learning my lines now so I can be free to work on other things. Also working on the IPA now for the French accent. I am still on the fence about the accent. Augustine herself doesn’t need one. I feel that in my gut— but her impressions of other people do. She is the only non-caricature. That’s another question— are they impressions or are they transformations? Is it Augustine acting like these people or is Erika the actor stepping into their actual skin and portraying them as she does Augustine. Or they living characters in the play or are they Augustine’s memories, her ghosts? I need to decide soon, because that is a significant point of view. It will lead the direction of the show, actually. But Augustine is the storyteller of the show, the connection between the past and present, the purveyor of spectacle. She is the presenter of the spectacle and needs to stay grounded and feel familiar and “normal” to the audience. Is she trying to prove her sanity by playing straight man or is she trying to impress upon her audience her dazzling insane streak as she goes in and out of characters. But I do not believe her to be schizophrenic. I believe her to be…troubled. I still don’t quite understand her state of
mind. Is hysteria a legitimate medical condition? Must get books and dig up resources. Can I visit an asylum? Also should maybe contact someone in women’s studies. Would be a neat alliance.

Should I get a stage manager? It will hard to coordinate rehearsals with anyone else. Maybe an apprentice here at OST can help. But who has the time here?

12-19-07

Who do I look at as a model? I have only seen three solo shows. I saw one in New York several years ago about Sylvia Plath called Edge. I recently I saw Shylock at OST with Stephen Patterson. And then I saw Janet’s the other day. I have to admit, Janet’s didn’t have a trajectory. One moment didn’t connect to the other- granted there were lovely moments, but I recognized the challenge of connecting those moments as steps through the play. Steps you use for travel through the journey of the play. Or perhaps it’s more like train tracks, laying each track as you plow through. That image is too aggressive. More like pick up sticks— a gathering and collecting of information, bread crumbs in a dark forest to lead us through. An appropriate analogy eludes me. Anyhow, Janet’s show had so many factors that affected outcome. Her environment was a brightly lit space in a retirement home. I believe it was a clubhouse. The dining room was next door, so the clinking of dishes being cleared was loud. She had to use a microphone because the audience was hard of hearing. It was a bit surreal and my heart went out to her, but I must admit, once it got started, the environment became apart of the show and I accepted it as that and I adapted.

When I saw Edge in New York in March 2003 at a workshop performance at the Actors Studio. The production was very basic and was technically was closed to the public. My
friend was a student of their acting program and shared the privilege of watching the performance with us. I think she actually snuck us in. The Actor’s studio is famous! Strasberg introduced his version of Stanislavski’s system here! The American Method, which I later became more familiar with later, was legendary as a cornerstone of American Theatre and film acting. The environment alone, with its icons attached and its historical significance put me in a place of anticipation. I believe it colored the way I received the show. I expected greatness so I got it. As a memory, it exists as a monumental moment in my life, because I was a young student of acting and the experience was mystical for me. There were no set or costumes, not a scenic element except basic lighting - just a chair and a woman. The playwright watched from the audience with us. Estelle Parsons was present as she was for everything at the studio. Al Pacino was rumored to be in the audience. And then…I remember it to be brilliant. I can’t remember how successful the play was a theatrical storytelling vehicle, but the actress was amazing. The actress was Angelica Torn, Geraldine Page’s daughter. She wasn’t famous enough to slant my bias toward her, as I wasn’t as familiar with the names of stage actresses in New York. But she was incredible. The lesson in this experience for me now as I approach my own show is in how she connected the dots. She led us through the dark. Her performance was herculean as the only person on stage with the weight of the play on her back. But it looked effortless and natural. I think back on Sylvia’s pressing need to tell us the story. She felt the world didn’t know her real experience and this play was her chance to clear things up. I think of Augustine and her pressing need to clear to tell her story. Why does she need to? I think her story has belonged to the doctors of science for so long that she is finally taking it back as her won.
12-20-07

What is the historical context of X? If we are products of our environment then how did Augustine’s affect her behavior and her situation? Looking at hyperhistory.com. Vandy showed us this website which gives greater understanding of the bigger picture with all kinds of interactive timelines. I want to understand where Augustine’s audience is coming from in regards to Tuesday Lectures. What events prepared them for her? Ordered books on Paris. Also ordered a book on the actual event of hysteria in Salpetriere, which will be invaluable, I am sure.

12-21-07

Stephen Patterson has been so generous! He sent me a recording of his version of X when he directed it a few years ago. He has also sent articles on hysteria and Augustine. I have to admit I did not watch the DVD. I turned it on and shut it off almost immediately. It freaked me out. I do not want subconsciously copy his work. And I saw right away a very different show than what I had in mind. I want to explore more my intuition on how the show should be done. I feel that Augustine is like a cabaret act—sexy and bawdy and self-aware. She exploits herself with a song and a dance, but she is in control…until she loses control. That is the thing. She seems to be on top for a while. When does she lose her position as star? Why does she lose it? And when is she finally fed up with living that life? Anyway, I will come back to Stephen’s DVD later after I feel more sure of my direction. Speaking of directors, none yet.
01-01-08

A New Year! Got home yesterday from holiday with family. My books arrived! *Invention of Hysteria: The Iconographie of Salpetriere* and *Blanche and Marie*, and they look to be two completely genres but on the same exact subject, which should be interesting. The first book I believe will be my major resource, my go-to book for most things. It is full of all the photographs of the ladies of hysteria- mostly pictures of Augustine. It is so haunting to see her dressed up in a maid’s costume as she coquettishly poses for the camera. *This* is a scientific demonstration of hysteria? Some of these photographs are pornographic in nature. They are sexy and grotesque. It is so bizarre. I am very grateful because the photos do illustrate contractures and other postures of hysteria, which I will work to recreate in the show. Oh, my, the ideas!

1-15-08

Aradhana is in! I am not alone. I am so glad. I do not know her that well, but I have an idea where she is coming from as a theatre person. We have had classes together and she always seemed very smart and extremely intuitive. I have a gut feeling that she is the one. I remember our aesthetic being similar. I also remember her playing devils advocate about everything in our group discussions and I know with my heart that the best thing for me in this process is to have someone challenge my ideas and exercise them. I don’t need someone agreeing with me the entire time.
2-5-08

Just finished *As You Like It*. I am so relieved to be done, not because I don’t love the show, but because I can now live and breathe only $X$!

2-06-08

I got into a discussion with a few actors about one-person plays. The general opinion of the group is that one-person shows are self-indulgent and boring. It seems that these types of plays have the reputation of being showcases of actor aerobics—only impressive on a level of an actor’s talent, but not usually captivating storytelling. I find this fascinating and a little intimidating myself. A) Can one person tell a compelling story in a dramatic structure alone? B) Do I have the actor’s chops to pull it off?

2-09-08

An observation I made of myself during *As You Like It*, and I think this is key: I gave a different performance when I knew in advance I had friends in the audience. The performance was self-conscious, inhibited, not as pure and organic as when I was ignorant of who was out there. Perhaps this didn’t show in the performance, but I was still in my head. The reason I am even pondering this is because when I perform $X$, my audience will be friends and family. I will know most of everyone in the audience. How do I forge this “new” relationship with people I already have relationships with? How do I stay on task? Part of the problem is part of my task as Augustine is to win over her audience, to befriend them, to seduce them. These people are already on my side! How to I make each encounter new?
02-10-08

Started personal training at the gym and still meeting with Corky every week for accordion lessons. Next week we will start on my songs! About training: I want to be physically stronger for the show. I keep imagining the show as a huge boulder that I must carry. I am focusing on my legs. I am reminded of my training in Suzuki. After weeks of training at Skidmore with the SITI Company, I felt so strong and grounded. In the “basic three position”, my teacher couldn’t push me over. I was so solid, but it wasn’t just the muscular strength, I was so focused and centered. While Suzuki kept me strong and vertical, Viewpoints trained me to exist horizontally, seeing spatial possibilities in response to where my body was or could be while on stage. Suzuki gave me strength. Viewpoints gave me freedom. In addition to getting more fit, I plan on training alone in Suzuki alone. I have to admit I am intimidated to meet the space alone. Stomping is so powerful and I am afraid I will summon the dead! Or maybe I will summon my own ghosts and that is really terrifying.

2-11-08

I have been very busy at the theatre, but PlayFest is almost over and that means $X$ rehearsals begin. I will train at least twice a week and rehearse three times a week as a beginning start place. The training so far has been the accordion, the gym, the script (memorizing lines) and learning the French accent. That’s what I have been working on before the rehearsals start. Starting next week I will train Suzuki and Viewpoints alone in the evenings. This will be a pure test of discipline. I know I have it in me. I trained so hard last summer, but in a large group, never alone. But I can do this. I know I can make
myself accountable. My director won’t hold me accountable for the training - it is a goal I set myself so that I can reach a higher goal - performing a show that requires the strength and focus of a circus performer. I need to approach it as a trapeze artist would. She trains every day for she could slip to her death if she lacked focus and the abdominal strength to hold her steady and still.

2-12-08

I’ve always been apart of an ensemble. It was my original joy, the reason I chose theatre. Being a part of a bigger thing that functions and thrives because of each person works for the well being of the group - with the group and for the group. When I trained in Viewpoints it became clear to me how not alone I am on the stage, and each body on stage with me influenced my body in time and space. Viewpoints training increased my awareness of ensemble to an almost hyper-awareness. I take more risks now on stage because of the possibilities working with Viewpoints opens up. I am more sensitive to my environment - internal and external. Before the training, I was a text dependent actor. The best way I can explain it: even in my most connected acting moments, I was one step ahead or one step behind the text. After Viewpoints, my best moments are sublime, because if there are words to say they spring from me in a response to a change in my environment, internal and external. Viewpoints increased my ability to respond. Since X is a one person show, and I won’t have an ensemble to work with, I have to find a way to work alone, but still focusing on the same Viewpoints: tempo, duration, kinesthetic response, repetition, topography, shape, gesture and architecture. The challenging ones will be those that are response to another person, such as kinesthetic response and
repetition. I will have to respond to myself. What will help, and mot likely be a fascinating process, is to respond to the many characters in Augustine’s reality as its happening as if there were actually other people on the stage. How does Charcot’s rhythm of speaking affect Augustine’s rhythm of movement, for example? Wow. This will be tough to do, but I have a feeling it will be valuable stuff. But I also have a director in the room to respond to and eventually I will have an audience. I also have the architecture of my playing space and my thoughts and imagination to play off of. I have the molecular structure that makes up my environment, and maybe if I listen and see deeply enough, I can also be changed by that.

2-13-08

I am so grateful to have Aradhana as a director. We absolutely see eye-to-eye and heart-to-heart. We share the same working philosophy, aesthetic, and agree on most aspects of the show. The show wants to be a spectacle. It needs showmanship and an old world entertainment feel. I have researched popular entertainment of the time. Paris was teeming with all kinds of performers of bawdy common venues. The can-can was making a comeback so dance halls were full, café concerts the rage, and Moulin Rouge opened ten years after Augustine’s documented life at Salpetriere. My sound and lighting designer is also enthusiastic about the show. He has some great ideas. I just hope he doesn’t resist the collaborative effort. I hope I am articulating what I want clear enough for him. Thank God Aradhana and I have the same brain on this project.
I saw the one woman show “Unfortunates” today. It was a Play Fest workshop, so it was a staged reading. It was phenomenal. Anne Hering played a prostitute(s) in London during the Jack the Ripper scare. She was incredible. I paid close attention to her performance, making mental notes about her physical transformations and character transitions. She went in and out of past and present, as I will. Her present-tense experience, which is the anchor of the play, is a conversation between she and an unseen person supposedly behind the audience. As she made conversation with the unseen stranger, she stepped in and of past experience and reenacted the scenes. Her character work was very clear, because she made specific choices about the details that made each character unique; for example, a character’s energy center in their body was different from the next. I can’t wait to experiment with that. I need to start thinking about the different energy centers for my different characters. Charcot seems to lead with his chest. He is confident, controlled and presentational. I imagine him having a broad chest and a booming voice, like a circus ringleader. If he moves being led from the chest, what does that look and feel like?

I am musing over the word demonstration and what it means for an actor. What I must make clear is the difference between Augustine demonstrating (showing in a false presentational way) and Augustine having an actual experience. The added layer for me is that as an actor, the word is the same, but used often to distinguish false and real moments on stage. This is usually a conundrum for me and other performers. To act is to
pretend. But can one pretend and trick oneself into believing in the given circumstances of the play? When I was a child, I would lie on my belly and play “sock babies.” My imagination was so strong that I could take a sock and tie it in a knot and pretend that it was a woman, a doll. I would invent the circumstances and play within them with my “doll”. I would get so swept away by the power of my imagination that I could move myself to tears when my character was suffering gigantic loss or unrequited love. Of course, since I have always had a great sense of melodrama, my circumstances would be of epic and devastating proportions, even for a sock. And I would truly experience my play and believe without a doubt in the worlds I created. I believe Augustine, even in her presentational moments, was engaged and committed to a world of imagination that made the experience authentic for her. As a grown up, it is harder, but as an artist, it is possible for me to go back to that place of an open heart and mind. But it is a challenge.

Augustine demonstrates for an audience. While her condition isn’t a complete put-on, she still must turn it on for a good show. The doctors try to induce it with their tricks, lights, certain sounds, and psychological manipulations to coax out a good “performance.” And don’t I do that as an actor? There are certain techniques to “get me there” emotionally. I remember learning the techniques of Stanislavski, such as “emotional recall”, where you remember a situation in which you might have had a similar emotion. And “sense memory” takes it farther because you try to imagine the tiny environmental details of that situation, such as the sounds and smells. Or in Meisner’s “daydream” where you invent and imagine a situation and glean from the emotions that the daydream evokes from you. I have to admit, none of these have been helpful for me as an actor. While my imagination is still very strong and I can “go there” emotionally, I
haven’t been successful using it actively on stage. When I learned the Method of Physical Actions, a technique that came to Stanislavski later in his life, I had my real breakthrough as an actor. In my second semester we took an Acting Realism class, which focused on aforementioned techniques. I was using one of these techniques, which required remembering everything about a certain experience. I went into the scene afterwards and cried the entire time. I did not accomplish anything in the scene my teacher told me I shouldn’t worry about my emotion. I have always been able to easily tap into my emotion. When I focus on emotion, my acting becomes general and inactive. It was when we finally got to the technique of applying verbs to all my lines, and I learned to focus on what I was trying to do instead of what I was feeling, my acting got better. Later in my movement class we focused on physical acting, such as Commedia and Clowning and other physical techniques and I grew even more. I learned from the last two years of training, I work best from the outside in. So does Augustine. I continue to explore that connection.

3-10-08

To play the accordion or not to play the accordion: I wrestle with this question during many recent sleepless nights. I have been taking lessons since January so that I can accompany my own songs. Sometimes I think I am too ambitious. The playwright is an accomplished accordion player and she wrote three gorgeous and fierce songs for the show. The play is not a musical, but the songs express emotions too great for words alone and represent the genre and time period of the world in which she lives. The songs serve as a device through which I can draw the parallels between the literal performance on a stage and the public demonstrations at Tuesday Lectures. The songs have to stay, but do I
play along? I am freaking. So far, my accordion playing is very elementary, basic. The songs need flourish, pizzazz. I also need to act the hell out of those songs. I am also not a singer, at least not in the musical theatre sense. I am an actor who can sing. I am an actor who will attempt anything if the work requires it. So, I must ask myself: does this piece require me to play the instrument while singing, while storytelling? The accordion is a symbol of her world of entertainment. It smack of atmosphere. But Augustine being an accordion player doesn’t serve the story necessarily. It is just freaky and cool. I am learning one of the three songs. It is the first one in the show and must set the stage for the rest. The second song is Lisette, her nutty neighbor, and I have taken liberties with it. I am using the lyrics as a spoken word type rap over a base line which I play on the accordion—which I can play easily. The adaptation serves the story still, and I think it sounds pretty cool—characteristically maniacal for Lisette! The third song is a ballad, a little torchy, and I planned on singing it a cappella, or maybe with a recorded accompaniment. It is an intimate moment in the play in which Augustine woos her audience. She is enough, no accordion required. My alternative to playing the accordion from the get-go is having a live accompanist either onstage or off. But is that strange for a one-woman show? Will I be adding another character? Maybe I can put the accordion player behind the screen. The director and I have talked of having this screen as passage from reality through Augustine’s imagination to her reality. There she finds the tools and props for her storytelling. What if the screen is still her imagination and it from that source that her music plays from—the music in her imagination! I kind of love that idea. I simply cannot have recorded music. It must be live, organic and raw.
3-12-08

Already meeting the challenge of self-motivation and discipline. One of my goals for this project was to rain in Suzuki as a means of strengthening my focus and precision. I feel like it is as necessary as learning lines and practicing the accordion. Like a ballerina at my barre, Suzuki is a pre-rehearsal training that keeps me strong and focused. It helps me sustain the stamina to perform. When I trained last summer in Skidmore, I faced many challenges and worked through so many of them. But I was in a group of twenty and under the gaze and guidance of several teachers I feared and admired. I had no choice but to show up every morning and push myself beyond my limitations. The results were phenomenal and I felt like a super-hero! SITI Company gave me the tools and I am prepared to use the. But showing up is the challenge I face now. I am scared. I anticipate being lonely. I make excuses, like I don’t have the music for Suzuki stomping, or stomping is so loud and I don’t want to disturb the rest of the theatre, I don’t want to feel sore. These are excuses to not meet the demands of the work. I need to get out of my head and get into the space. I have to schedule these solo training sessions like I would if someone else was expecting me to be there, waiting for me to see me work. I have a session scheduled for tomorrow morning. I must go.

3-13-08

I just watched the first part of the DVD Stephen sent me. He directed the show in 2002. I put off watching it until I had a clear vision of how I saw the show and Augustine’s character. Turns out, we have different ideas. Especially on who Augustine is. While the woman playing Augustine in this production is a fine actress, she portrayed her as a
victim. And, well, she is in a way, but you can’t feel sorry for yourself. You can’t play
the sadness. On the contrary, play the joy (for few lives are without it completely) and let
the contrast of your behavior and the circumstances affect the audience. Work against
expectation! Surprise them! The music of the show was so serious and moody. My show
is fun! Augustine has fun! Or maybe she pretends to have fun. She is putting on a show!
And that, I believe is written into the piece—showmanship and fun. Anyway, I am
relieved that I won’t be tempted to replicate Stephen’s production. I am using a different
lens to examine the issue present in the show. But watching the DVD paid off, because
the other actress found a beautiful solution to playing the accordion fully (for this actress
did not play either). She played the base and chords only, no keyboard. It was fabulous.
Called Corky to see if we might try that! I may have a solution!

3-15-08
So I finally went to the rehearsal space alone. It wasn’t my living room, it wasn’t my car,
it was the sacred meeting space—the rehearsal hall. Of course, any space can be
christened as sacred, but this studio had seen many works in progress, as well as many
performances. I was intimidated, nervous and shy. There was a performance of the
children’s show nearby, so I used that as an excuse to not vocalize the Suzuki work. I put
on my tabi socks and started going through the basic Suzuki position, and Ouch! They
still hurt. I didn’t stomp. I used the excuse that I don’t have the music. But I feel like I
had a good practice, a refresher. My legs are still sturdy. I was holding tension in my
shoulders. My arms, however, felt nice and loose and full of possibility. And something
happened. The space changed. I existed in it differently than before. The air changed. For
one thing, I was breathing deeper than before due to the accelerated heartbeat, but I also felt a shift in my focus. It became sharper, deeper, like my breathing. It felt as though I had a relationship with the space. I remember having the same feeling with the SITI Company while training. They spoke of stomping as an attempt to wake your dead ancestors and communicate with them. It did feel like a metaphysical experience. And today, I had that feeling again. It was a little spooky, especially being alone, but this is my journey—me and the gods and the ghosts. I’m glad I finally met myself in the space. I am looking forward to doing again tomorrow and for longer.

3-18-08

Just got through being sick for the past three days. Didn’t pick up the accordion, script, journal, nothing. I did train again today. Just a bit. Still shy to be heard. Studio B is not that private. I need to get over that. It’s so funny that I am a performer, but I don’t want anyone eavesdropping on my process. Picked up the accordion again today to discover that my little finger is finally finding the G base chord! I retained the work from last week! Corky the accordion teacher had the fantastic idea of putting white out on the key, because I was having trouble fingerling it due to its use in respect to where the other three chords live. It’s a weird jump. But the white out helps. I am looking forward to meeting with Corky tomorrow and see if she has any new ideas about the song after giving her Stephen’s DVD. I hope it’s genius and easy!

Oh, and having space issues due to Macbeth rehearsals being the worlds biggest ordeal. Their rehearsals take up the entire theatre almost. Have to rethink times so we don’t count
on space they will be using. The theatre has been wonderful to me, but *Macbeth* has priority, of course.

3-25-08

I had my first rehearsal today! It is so wonderful to finally embody physically this role I have been living with ion my head. We blocked the first couple of pages, but thankfully, it was so much more than blocking. I am off book, something I never do, but this show is so physical, I just didn’t want to struggle with a paper in my hand while I trying to focus on my relationship with the space. Also the specificity of whom I am speaking to and where they are is already a challenge. We worked on “stations.” We want to give the allusion of moving through time and location. The play jumps in an out the present reality, the past, and Augustine’s fantasy of the past and present. It will be a challenge to make those shifts clear and specific, but if I am not, the play can easily get muddled and confusing.

3-26-08

This is what I live for! I love working. Again, so grateful I am off book for this portion. Must work on memorization of the second act (I have to call it that, it helps me think of the journey as having a beginning, middle and end.) Instead of taking our plowing through, we are taking our time polishing what we have done. I am grateful for that, because since I am not writing all the blocking down till later, I can seal in my mind the choices we are making.
3-28-08

We worked the phases of the seizure circus today. I have given it a lot of thought beforehand, and sort of blocked and worked it myself already. Aradhana is happy with what I prepared for rehearsal. Glad I was on the right track. A challenge I have right now is making the physical shift from Charcot to Augustine and vice versa. It must be clear. It is an issue of shifting energy centers, stature and making that shift fluid, like a morphing of objects. I am really disjointed and going into every change with too much of the same energy. And I am leading with my head. I think because I have this image of diving into the next body. Often I am moving literally from one spot to another. We also talked about Charcot and his physicality. He wears a top hat and he gestures grandly. We think we should stick to straight direct lines in his gestures and movements. Genevieve, the sexy “roommate” is legato, all round and languid lines. Lisette is staccato and manic and sped up. I have to think about everyone’s rhythm and tempo. I watched the first part of the DVD again (Stephen’s production) and one of the things that were missing was the distinction of different characters. And when she did attempt the transformation, she took too much time with the transition. If we are going to wait that long for a transformation, it better be worth the wait! Anyway, I am so glad to have the DVD as a resource because I see the traps, the trips, the tricks, and the possibilities.

3-29-08

I am reading through two books by Jacques Lecoq: *Theatre Movement and Gesture* and *The Moving Body: Teaching Creative Theatre*. Lecoq was a teacher of mask, mime and clown. The book is a wonderful resource and inspiration for my physical work. In
movement class, we worked on his techniques and principles and I am revisting them as I work on character and transformation shifts in the play. Although I am finding the “demonstrative” moments and “real” moments and the paradox of performing each type of being, I still feel that the frame of this show is late 19th Century Paris popular entertainment. So an actor approaching this role, I ask myself, “What can I do exemplify this?” I am inclined to embrace the absurdity completely.

When realism doesn’t serve, when the mater is cruel and unusual, I must accept that realism is too heavy. The reality is hard to take. What is absurd? Playing the accordion and tumbling about the place is absurd. The real Augustine obviously didn’t do that. I am not commenting on what I may think she did in her spare time as a hobby. I am finding a different language, a different way of being and expressing her reality.

What if Augustine in X is a clown? She is certainly doing a lot of clowning around in my version of the show. So what are the rules of the clown? What is she failing out that so clear to us, but not her? This is a very new angle for me. I never thought of her as failing. But she does in the middle when she gets wrapped up in the glamour, the attention and she gets a little big for her britches. But what does this look like? These are just musings.

3-30-08

I am struggling with Charcot. Not just the characterization of him but the transition from him to Augustine in a back and forth conversation. Aradhana is great at not settling for anything that doesn’t match our vision. She is the play’s warrior and protector. While I know that these graceful and energized transitions must be clear and clean (and that means done with careful choreography) it is hard to remember everything all at once. I
am just so busy “acting” that I’m trampling all over these little moments that are so important and specific. I must practice at home. Part of the problem is that since I am off book, I haven’t been writing the blocking down until after the rehearsal and then I’m forgetting little specificities, partly due to the fact that we try something and often change it. I feel free without the script, but this is a tiny hurdle.

I am exhausted. I need to learn to pace myself. I also need to work on breath control. I can utilize my voice work from class. If I am out of breath due to the aerobic nature of the show, I can pull the breath deeper into my belly and tap into that as vocal energy. I have been keeping my breath in my chest, which is causing me to pant. I will begin my next rehearsal with vocal warm ups. Tremoring will help me with breath control. I’ll see how it helps tomorrow.

4-01-08

Still looking for a bed. Producing and acting in a show and working in an internship is a starting to wipe me out. I feel that I will take so much from this experience though.

Made an image board with copies of photos from my books of Augustine and the other ladies to use as a visual reference as I recreate the poses and stages of the seizure. The one pose that haunts me is Augustine with a leg stretched out and her nightgown hiked up. It looks like she is posing and trying to be sexy. I am going to attempt to find all the sexy put-on moments and hopefully resemble the hysterical poses of the photographs.
Questions.

Christopher Niess, my Committee Chair, came to see tonight’s rehearsal. He brought up so many wonderful questions. We all talked for about an hour about it. His first question was about Augustine’s point of view. He also asked if she was lying. He said that my extreme way of demonstrating for the audience makes one wonder if she is a pathological liar. He only saw the beginning, but I think it’s interesting if one wonders that right away. No, she isn’t lying. No, she’s not embellishing, but she is using an exaggerated device of storytelling, which is song and dance. He also asked what she needed from the audience. Why is she telling this story to this particular audience and why now? I hadn’t thought of it until now. I think Augustine needs approval. She was abandoned at the hospital until she started performing at the lectures. This form of attention is taking the place of love—romantic and familial. Are the memories of the other characters in the play and her relationships with them within $X$ triggered by moments leading up to the scenes? Is one moment causing another, like as in a person’s memory when one memory reminds one of another memory, so on and so forth? What is the association? And if I am playing the sexuality of Augustine, I must ask: Is there something in the horrific and perverse that excites her? The molestation. Maybe the only way she deals is to go with it. Enjoy the sex of it to avoid the reality of the subjugation?

Does she ever feel the audience isn’t responding? Does she check in? How does she keep a hold of them? Stay aware of my hold on them and recognize when it is slipping? What tactic does she use next? How does she compete, prove, do her characters do her tactics? How is she affected? Show moments of vulnerability.
I need to choose when Augustine is in control and when she is not. Does she enjoy being in control? Does she enjoy not being in control? Is it thrilling to not be in control? When does it scare her?

Explore celebrity.

How much of the spectacle is fueled by the public?

What do I want from any given moment? Mark script.

Think child performer- song and dance machine.

4-18-08

Today is another tech, or rather a tech finally. Yesterday was a fiasco. Justin, my sound guy, spent four hours loading cues in FX and then had to go to Macbeth so there really wasn’t much a tech. I am annoyed that he didn’t come prepared. He was doing prep work during our work time. Today will be better. My goal today is to maintain patience with the process and to maintain a focus on each moment that will enable me to find specificity with each moment. To remain emotionally and physically connected to each moment, and open to direction. I must let ego go at the door or it will get in the way of progress.

4-19-08

The run through with tech was weird. I was so off and frantic. My energy was everywhere. Aradhana is gone after today. She releases the show to us. And that is scary, but also empowering. We meet in the morning for two more runs. My notes from Aradhana were helpful. Rodney came after tech and we ran the show again. I finally
connected back to the show. In the tech run I was missing beats and my transitions were sloppy. I need to remember why Augustine chooses to be Charcot. Her memories propel her into these personifications of the people in her past. She loved Charcot. In X, she goes into a dark memory of her molestation and is jolted from it by another memory involving Charcot. In a sense, Charcot, or the memory of him, protects her from the molester memory. This is a deeper issue. Augustine’s hospitalization at Salpetriere protected her from the outside world and its potential danger. Charcot played many roles for Augustine: father, imagined lover, and protector. Augustine is a roller coaster of emotions and ideas. She is a child of fourteen or fifteen, and her emotions are underdeveloped and frenetic. She is not schizophrenic or manic or hysterical. She is melodramatic because she is a child. She does have personality disorder and it is called adolescence.
Actors often refer to their work as their craft. The New Oxford American Dictionary gives several definitions for that word. The first: “an activity involving skill in making things by hand,” such as bookbinding and pewter craft. The next defines craft as a skilled profession, such as a historian. The third defines it as a skill in carrying out one's work, and the last description is a “skill used in deceiving others.” In all these ways, acting is a craft. We create original characters from the material of our selves—by hand, so to speak. It is our livelihood, for we often make a living by acting. And we are liars, or rather, we manipulate reality. While there is an understood agreement between an audience and an actor that suspends disbelief for the event of theatre, acting is still a pretense, a falsification of circumstances and person. And if an actor is good at her craft, she can trick the heart and mind of those watching into believing and investing emotionally in the imagined moment of the play.

Augustine and I are craftsmen. I am an actor, she was performer of hysteria at Tuesday Lectures. A craft is a skill, and just as the bookbinder or the pewter-maker learns and refines their trade through mentored relationships, such as the teacher and student, master and apprentice, so does the performer. Although Augustine and I came to our craft from extremely different circumstances, I found more similarities than differences in our craft. I learned the skill of acting through my mentors; she absorbed the skill of delivering awe-inspiring demonstration of her disease from her doctors. Her body was the
page on which the legend of hysteria was written. My body is also the means of narrative for legends. We both refined our craft through repetition, and we both received satisfaction on many levels from performing. Examining Augustine’s life and career caused me to look more deeply into my own experiences as a performer. As a result of comparing our paths, I learned that I too, on some levels, am a hysterical woman with profoundly deep emotions. Without control, my emotions might overcome me. With control and with skill, they can be manipulated and channeled into dynamic storytelling, and it is the story that the performance is for.

The story of hysteria was necessary for nineteenth century Parisians. The unbridled passion of Augustine spoke to their inner hysteria. She felt deeply and openly so that her audience could be allowed to feel deeply. Augustine’s performance was a spectacle of pain and sexuality. The spectacle was compelling visually and emotionally. As a result of effective narration of hysteria, Augustine and her audience reached catharsis. Theatre still exists today for the same reason—audiences still need a social and collective emotional release. An audience connects to the story and its characters because there is a personal recognition of them within it. And it is the story that a performer serves.

In her life, Augustine served many people. After a childhood of domestic service, she entered the hospital where she was a servant to science. The doctors, to whom she gave herself completely, exploited and used her for their own gain. They used her body for the benefit of scientific advancement and her audiences used her for novelty and catharsis. Others defined Augustine. In X: The Rise and Fall of an Asylum Star, Augustine takes her story back and reinvents the spectacle of her disease. Through my
portrayal of her complex character, I expanded my own definitions of performance, attained a higher level of artistry and an increased awareness of the nature of performance itself.
LIST OF REFERENCES


