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### **Staging Crip Time in Lisa Kron's *Well***

Lisa Kron's 2006 "theatrical exploration" *Well* begins by confronting the audience with its central exploratory questions: why do some people get sick and then get well? Why do some people get sick and stay sick for years? This question seemingly locks the narrative into a binary discussion of illness/wellness, ability/disability, but the staging conceits and narrative structure work against the play's initial binary question, embracing storytelling and performance modalities that reflect crip temporalities and crip geographies. Alison Kafer describes crip time as a way of being that reverses our ableist (and capitalist) understandings of time itself. "Rather than bend disabled bodies and minds to meet the clock," she writes in *Feminist Crip Queer*, "time bends the clock to meet disabled bodies and minds." Ellen Samuels adds, "Crip time is time travel. Disability and illness have the power to extract us from linear, progressive time . . . and cast us into a wormhole of backward and forward acceleration, jerky stops and starts, tedious intervals and abrupt endings." What Samuels and Kafer describe are lived modalities for persons with disabilities and are reflected in Lisa's observation about her family's own lived experiences. "The presumption of illness is so strong in my family that it's the way we keep time," she says.

I want to add another research question to the playwright's own inquiries: How do we stage crip time, chronic illness, and crip geographies? How does theatre help us do the work of imagining a world where time bends to disabled bodies and minds? This presentation analyzes how Kron, writing from the perspective of chronic illness, generates ways to stage and perform crip time. Since Kron is also a character in her own play, from this point forward I will refer to

Lisa as the character and Kron as the playwright. While Lisa narrates her experiences with the allergy clinic in her youth, reflects on her mother's community building work in the past, and converses with her chronically ill mother in the present, characters cross in and out of spaces, times, and performance/non-performance modes. Though Lisa, who begins the play from the perspective of someone who has "recovered" from chronic illness, tries to hold together some narrative, temporal, and spatial coherence throughout the 100ish minute running time of *Well*, her position as the keeper of able-bodied narrative integrity is routinely challenged by the structures of a staging written by crip temporalities. Although the text itself is rich enough to illustrate *Well*'s inherently chronic temporality, I will also include and describe some production photographs from the 2017 Seattle Repertory Theatre production of Kron's *Well* to articulate how staging and performing crip time productively disrupt ableist temporalities and geographies of theatre and the world at large.

To begin, let me set the stage. Kron's "theatrical exploration" has several competing temporal signatures that adhere to theatrical conventions, and which also map on to geographic locations on the stage. First, there are Lisa's monologues, which adhere to the conceit of the solo show. Geographically, Lisa's monologues occur on a slice of center stage which, in Seattle Rep's production, was thrust forward into the audience by a few feet, jutting out over where the orchestra pit might be if the show were a musical. (It is not.) Lisa's monologues occur "in the moment" of the play itself, but often reflect on moments in her past, which are in turn literalized in "scenes" performed by the actors. All past action occurs on stage right in a setting that transitions between the neighborhood of East Lansing, MI and the Allergy Unit. Then, there are the temporal and structural disruptions: Lisa's mother Ann, and Lori, Lisa's childhood bully. Ann, whose living room occupies the entirety of stage left, poses frequent disruptions to Lisa's

monologues and to the scenes – sometimes simply through her embodied presence as a person with chronic illness and chronic pain, and sometimes to correct information, offer the actors and audience snacks, or add commentary to Lisa and the actors’ actions, as in this exchange:

ANN: What? I just wanted to introduce myself while we’re stopped for a minute.

LISA: We’re not stopped.

ANN: We seem to be in some sort of a pause here.

LISA: Because you’re talking over the scene. (31)

**[SLIDE DESCRIPTION: Ann in her recliner with Lisa looking on from the edge of her monologue spot at center stage. The slide contains an image of the dialogue exchange above and a photo credit.]**

Like Lisa’s monologues, Ann occupies the play’s present, commenting on the past. She never enters scenes that take place in the past, as Lisa does, nor does she cross out of the living room set and into Lisa’s center monologue “special” or to the stage right quadrant. She remains geographically isolated, unlike Lisa, who occupies each of these spaces at various moments in the text, and the actor-characters, who eventually enter Ann’s living room.

Kron’s writing does not map neatly into the supposed dichotomy of sickness and wellness. Although the audience first meets Lisa when she is “well,” she quickly slides from her present-moment monologues into reenacting scenes from her “sick” period during she narrates her stay in the Allergy Clinic at age 19. The very movement between narration and reenactment embodies sickness and wellness as chronic temporalities, showing through the actor’s body that a person can be both at once or shift from one state to another at any time. The text further breaks down clear delineations between sickness and wellness by highlighting and blurring the line

between actor and character. As Lisa begins her “multicharacter theatrical exploration,” four actors playing figures from Lisa’s past appear on the stage right quadrant. In the script, these characters are referred to as A, B, C, and D, which are replaced by the names of the actual actors hired in each production. They take on the roles of members of the Kron family’s Michigan hometown, patients and doctors at the Allergy Unit, and themselves – actors hired to participate in the Lisa’s “theatrical exploration.” As the actors transform between and among these roles, they shift between the “past” of the play text and the “present” of the moment they embody as performers, triggered, most often, by interruptions to the supposed diegesis by Kron’s mother, Ann. As Lisa enters a scene in the Allergy Clinic on stage left, her mother Ann snoozes in her recliner on stage right. Until:

*(On the other side of the stage, Ann tries, not successfully, to get up quietly.)*

ANN *(To Lisa)*: Sorry. Is it okay if I run up . . . ?

*(A, who plays Joy, and B, who plays Kay, hang suspended mid-scene, not sure what to do.)*

LISA: Yeah, it’s fine.

ANN: Damn diuretic.

*(Ann goes upstairs. A and B are momentarily flummoxed, but Lisa gives a very slight, willful nod, indicating that they are to continue with the scene.)* (Kron 28)

**[SLIDE: Contains the above dialogue.]**

In her introduction to the published script, Kron makes clear that all of the structural elements of *Well* are intended to “generate an authentic sense of commotion and disorientation” (x). Her stage directions further implicate that the actors, A and B, and the action of the scene

they share with Lisa, are disrupted by Ann's presence. The action of the play, however, continues to move forward in time thanks to the "willful nod" of the playwright-as-character. But while the characters/actors seem "flummoxed," I am unconvinced the audience is able to read this moment as a true disruption because the logic of the play itself is laden with the logic of chronic illness.

**[SLIDE: Lisa in her hospital bed at the allergy clinic, with a doctor sitting beside her holding her arm.]**

Ann's attempt to quietly leave the stage to go to the bathroom forces the action of the scene to stop, which supposes that Ann Kron is a "flare up" within the narrative and temporal structures of Lisa's play. Ann, the chronically ill character who never "got well" like her daughter Lisa, asserts a crisp temporality over the script that remakes the entire structure of *Well's* theatrical world into one that bends to the will of the disabled or chronically ill body. The progression of the scene must stop to accommodate Ann's bodily needs. As the play progresses, the actors begin to adhere to Ann's timelines, stopping their prescribed scenes to help Ann move boxes from the shelves in her living room, talk to her about the real people they are playing, or learn more about her allergies. Actor A, outside of her character roles, even takes advice from Ann about her own environmental illnesses:

*A (reading the article):* "Nausea . . . headaches . . . disorientation . . ." "This is exactly what happens to me every time I go into a mall. My friends are like, you're such a drag, A, get it together. I can't believe this. I have always assumed it was just me.

ANN: Well, yeah, that's what happens. You blame yourself. Wasn't it Susan Sontag who pointed out that whenever the cause of an illness is mysterious, it's assumed to come from psychological problems or a moral weakness. And once science finally figures out

the medical root of the illness, that assumption disappears. That's why it's so important that more people know about the allergies. (44)

**[SLIDE: Contains the above dialogue.]**

What I find particularly interesting about this exchange between A and Ann is that not only does it effectively put the action of the play on pause, supposedly ignoring the playwright's chronological design and the geographic design of the set, but in doing so bends time to meet the needs of A, who needs her environmental illness to be taken seriously, and Ann – two chronically/environmentally ill people who might otherwise be forced to continue marching toward the play's temporal progress. A literally stops doing her job as an actor to have this moment of community building around chronic illness with Ann. Lisa, likewise, shuttles between her solo-performer/playwright monologues, conversations with her mother, and “performing” in her own memories of the Allergy Unit, inhabiting the roles of actor, playwright, and daughter as part of *Well*'s structural logic. Even Jayne, the actress who originated the role of Ann, breaks through her character at the end to question Lisa's thesis.

LISA: I don't have any idea what you're trying to get at and I don't know why you're doing this, Jayne. I worked really hard on this. It took me a really long time to figure out how to make all the parts of this fit together and make it work.

JAYNE: But it doesn't work. (74)

**[SLIDE: Contains the above dialogue.]**

Jayne insists that the idea of a narrative about illness and wellness that exists in such binary forms cannot work, reminding Lisa that is unfair to expect Ann to act any way other than who she is. Lisa continues to protest that her mother's inability to become a well person doesn't make

sense. Lisa knows recovery is possible because she herself became well. To Lisa, the narrative of *Well* should map on to the diagnostic/prognostic if/then logics of the Allergy Unit she spent time in as a young woman. To Lisa, her narrative of illness should be everyone else's narrative, too. To Lisa, this is the only narrative trajectory that makes sense.

LISA: No, Jayne, she doesn't. She's so sick. And she's so well. I can't make her make sense.

JAYNE: That's what I'm saying. It's not about why you got better and she didn't. You keep drawing this line and putting the sick people over here and the healthy people over there. This whole play, you've been drawing a line and making sure we see that you're on one side and your mother is on the other. You're so afraid. (75)

**[SLIDE: Contains the above dialogue.]**

Lisa's exchanges with Jayne reveal the play's underlying structural logic. It is not feasible to draw clear spatial or temporal delineations between sickness and wellness, especially regarding chronic illness. Chronic conditions do not play by the temporal logics of playwrighting that demand adherence to traditional, Aristotelian unities of time, space, and action. Lisa's "curative imaginary," colored by her own experiences with cure, demands that all other ill bodies within the world of the play also adhere to the medical interventions she experienced. Sick bodies must get well. Sick bodies must be cured. Kafer argues that the curative imaginary of futurity "casts disabled people (as) out of time or as obstacles to the arc of progress," which indeed describes the work of characters like Ann who "flare up" and disrupt the progressive temporality of Lisa's intended play.

**[SLIDE: Lisa stands at center stage, while her mother Ann sits in her recliner on stage right in dark lighting. Lisa looks out toward the audience, while 4 actors dance out behind her in colorful lighting, heading directly toward Lisa's center spotlight.]**

I argue, however, that Lisa's intended play is not the same as what Kron actually provides the audience with *Well*. Kron's "multicharacter theatrical exploration" avoids the traditional diegetic structures of playwrighting and stagecraft quite deliberately, making use of the heightened reality and inventive structures of theatre to literally bend time to meet the needs of the *Well*'s chronically ill characters. In doing so, Lisa becomes the ableist villain in her own story as her carefully constructed narrative about the health of people and the health of communities collides with her mother's presence and the presence of other chronically ill bodies, both as actors and characters within the play text. While any narrative medium could also take up these concerns, theatre offers a particularly rich avenue through which to articulate and stage crip temporalities and crip geographies. Because it can express time signatures visually within the single geographic space of the stage, theatrical audiences are more readily able to imagine how crip time is embodied. And by embodying the same temporal space as the chronically ill characters of *Well*, the audience's geographic proximity to crip time places them within it, allowing both disabled and non-disabled audience members to more readily understand and accept crip time as a way of being and experiencing the world. In Lisa's words, the theatrical experience is what integrates crip time and progressive linear time in ways that generate empathy, even if they make things more complex. To quote her final monologue:

LISA: This is the purpose of integration. This is what integration means. It means weaving into the whole even the parts that are uncomfortable or don't seem to fit. Even

the parts that are complicated and painful. What is more worthy of our time and our love than this? (76)

**[SLIDE: Contains the above quote.]**