## CHANSKY, DOROTHY. LOSING IT. STAGING THE CULTURAL CONUNDRUM OF DEMENTIA AND DECLINE IN AMERICAN THEATRE. PALGRAVE MACMILLAN, 2023. 328 PP. E-BOOK ISBN 978-3-031-20902-4

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The twenty-first century has witnessed the proliferation of books dealing with the intersection between Theatre and Medicine, including more general approaches, such as Shepherd-Barr's *Cambridge Companion to Theatre and Science* (2020), Mermikidis and Bouchard's *Performance and the Medical Body* (2019) or Garner's *Theatre and Medicine* (2023), and volumes dealing with more specific health issues, such as Wald's *Hysteria. Trauma and Melancholia. Performative Maladies in Contemporary Anglophone Drama*, Walsh's *Theatres of Contagion* (2019) and Lobel's *Theatre and Cancer* (2019). *Losing It. Staging the Cultural Conundrum of Dementia and Decline in American Theatre* appears as a necessary contribution to this growing intersection.

Losing It is an inspiring book on the representation of cognitive impairment in an excellent selection of plays, staged between 1909 and the present. Its author, well-known theatre historian Dorothy Chansky, has succeeded in articulating a book that combines medical terminology and research (made accessible for neophytes), with archival work and performance and textual analyses. Significantly, the solid theoretical framework departs from aseptic medical approaches to the plays in a very personal way. Early in the book, Chansky announces this book was prompted by her husband's condition, which gave her a first-hand experience not only with her husband's cognitive impairment itself, but also with those satellites orbiting the condition, from the financial, legal, emotional, and religious nuances to the foremost importance of proper healthcare minding. Writing from a position that brings together personal and professional authority to discuss dementia on the stage, the result is this comprehensive, engaging and evocative volume.

Besides her own personal inspiration to write this book, Chansky's study bears witness to the increasing presence of dementia on the American stage, be it through minor and secondary characters or through protagonists. Besides historical approaches to the works, for which Chansky supplies summaries of the plays and of critical reception of major productions, Chansky provides her book with a political dimension. For *Losing It* considers the social, medical, legal, and cultural conditions that have given rise in the United States to an interest in plays depicting dementia, decline, and caregiving. Moreover, both in her selection of plays and in her discussions, there is a "call for action," a hope that the mainstream audience of these plays, which is depicted, quoted and addressed throughout the book, will understand that dementia is not a condition to feel pity for, but a condition to be lived, and to be lived in the best circumstances. Political action is mandatory, Chansky rightly suggests.

The book is divided into four sections. The first section, "Orientation," includes an Introduction and three chapters which provide contextualization as regards scientific approaches to dementia. The first two chapters define and sketch the trajectory of dementia research and popular awareness in the United States until the end of the twentieth century, and a third one deals with the intersections between bodies on the stage and bodies in the audience, advancing concepts such as kinesthetic empathy to be later discussed as regards some of the plays. Section 2, "Social Insecurity," includes the analyses of plays up to 1949. The highlight of this section is Chansky's rereading of an American classic, Arthur's Miller's Death of a Salesman (1949). Here Chansky historicizes representations of dementia and decline in decades' worth of productions of *Death of a* Salesman, underlining their link to medical and social aspects of health and care that have made them legible and of interest to theatergoers. Under these lenses, Willy is seen as going through all the symptoms of senile dementia, probably provoked by a stroke, Chansky proposes. More significant in terms of original approaches to the play

is Chansky's revision of Linda: "But if Linda is unusual for her willingness to stand up for Willy at all costs, her providing home care for a family member who may have dementia was not unusual for its time, nor is it wholly unusual now" (120), to which she adds that, "Linda is a piece of the dementia care and the capitalist Mosaic" (121). This analysis provides Linda with a value long denied in criticism of the play and makes it more contemporary than ever.

Section 3, "Taking It Personally," deals with plays produced after 1970s, and once Alzheimer has come to wider public attention. Chansky focuses on staged renditions of the experience of cognitive loss from the inside, discussing three plays that aim to make spectators experience what characters go through. Arthur Kopit's Wings (1978), based on research conducted by the playwright in a rehabilitation facility, and which involved extensive interviewing and observation of real patients and medical personnel, is selected as an early example of a play that does not consider dementia a way of losing selfhood, but a reformulation of the self. The second play, *Ruff* (2013), authored and performed by LaMaMa cofounder Peggy Shaw, is presented as a powerful autopathography, that is, as a narrative of one's own illness. The piece, prompted by Ruff's stroke, is not only didactic in showing that "There is life beyond brain damage" (150), but it also reveals "a loyal, longtime, and invested following of women willing to face our own mortality" (150). The last play discussed in this section is Florian Zeller's The Father (2012), included as part of the "American stage" due to its popularity in the US. Chansky approaches The Father through what Rebecca Bitenc calls "imaginative phenomenology," which allows the audience to come closer to what the protagonist feels. Through her discussions of different performances and the 2020 movie version with Anthony Hopkins, together with her own reading of the text, Chansky argues that The Father is unjustly read as tale of loss that provokes that fear of one day "losing it." In her view, The Father also invites audiences to consider there is life with dementia.

Section IV, "Human. Resources," treats five twenty-firstcentury plays. The first three plays, Colman Domingo's *Dot* (2016), Richard Greenberg's *Our Mother's Brief Affair* (2016) and Jordan Harrison's *Marjorie Prime* (2014) pose questions about memory that are philosophical, social, psychological, and existential rather than

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medical or neurological, transcending the representation of memory loss as a mere personal disgrace that dilutes the self and burdens relatives. The analyses of these three plays and their reviews paves the way for Chansky's affirmation that

> At the start of the twenty-first century, incongruent dyads remained representative of America regarding dementia. From a religious and cultural heritage perspective, there is a "psychological conflict between 'our' contempt for the 'weak elderly,' who violate Protestant and capitalist work ethic values, and our Judeo-Christian mandate to respect the 'wise elderly," resulting in a conflated "condescending pity." From a policy perspective, the "health politics of anguish" still fails to win financial support for caregivers, continuing to favor, as it does, the hope for a cure. (232)

These opposed viewpoints are further discussed in relation to the last two plays of Chansky's selection: Kenneth Lonergan's The Waverly Gallery (2001, revived in 2018) and Stephen Karam's The Humans (2014). Chansky approaches The Waverly Gallery to criticize, above all, what critics saw as the optimistic ending of the play, when Gladys' grandson, after her demise following two years of severe dementia, addresses the audience in a celebratory reminder that living means struggling. In her analysis of this address, Chansky rightly questions who cared for Gladys. In the play, hiring a minder no one checked or cared about either seems to be taken as enough. Chansky, in a very personal approach, compares her own life experience to that in the play, making it even more compelling to see, understand and question the vital importance that caregivers have, not to release relatives from the "burden," but to make those cared for happy. In the case of the popular play by Karam, which can be regarded as an updated *Death* of a Salesman, Chansky underlines the political implications of the play and how the play demands action from the spectators who, like the characters in the play, are probably resourceless to face the costs of taking proper care of a person with dementia when Medicare is not enough.

In her final chapter, Chansky reminds readers of aging in the US and the urgency there is to pass legislations that will provide both for those suffering cognitive impairment and their minders. Chansky's hope is that theatre, through its centuries-long social function, will help imagine a future where this happens. To do so, she sketches the beginning of a new play that puts a female nurse center stage, taking care of an elderly woman, and gives the floor to any playwright willing to imagine the rest of a play that praises the efforts and claims for due respect (social, financial and political) to present-day caregivers of those with dementia.

As a whole, the plays discussed in *Losing It* offer a snapshot of how contemporary American theatregoers and critics understand and are willing to engage with representations of dementia. In her journey through the twentieth and twenty-first century American stage to discuss dementia, Chansky has made use of an interdisciplinary approach, ranging from psychology to theatre history, archival work, performativity, medical humanities, and gender and ageism studies. Her simple approach to complex terminology is an asset that would make this book good reading for those interested in Theatre (especially for those in theatre history, performativity, and applied theatre), and in Medicine, and specifically for anyone interested in the growing field of the Medical Humanities.

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