The Cherub’s Mask: Utilizing Personal Experience Within Dramatic Work

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Abstract

Through playwriting, writers can utilize autobiographical elements to create a piece that feels authentic. However, simply staging someone’s life does not always yield the strongest artistic choices. Through this balance of using autobiographical elements and fictionalizing aspects for artistic expression, the work has greater artistic impact. The first section provides a case study of how playwrights, such as Tennessee Williams, employ their lived experience, but also create deliberately fictionalized and artistically interesting narratives. The second section details the writing and staging of an original theatrical, *The Cherub’s Mask*, that I wrote with student Jack Lindberg. Through the analysis of the writing, staging, and directing processes, I detail how making artistic choices that deviate from the autobiographical events helps the piece become artistically successful in the tradition of classic 20th century American playwrights.
Part I: Elements of Self: Examining Tennessee Williams

Tennessee Williams was one of the seminal playwrights of the first half of the 20th century. His plays reflected the post-war tensions that existed in America, from the preservation of the family unit to the assertion of racial and sexual dominance. Williams wrote plays that resonated with his own life and reflected his past turmoil.1 He often said that his life was one of his biggest influences for his work, citing a history of alcohol abuse and mental instability in his household.2 In his work *A Streetcar Named Desire*, Williams draws on the oppressive and abusive nature of his father, as well as toxic masculinity in general, particularly through the character of Stanley Kowalski.3 Alcoholism permeates throughout Williams’ work and reflects a loss of control that existed within his family, as well as his own struggles with addiction. In *Cat on a Hot Tin Roof*, the young husband Brick Pollitt turns to alcohol to drown in the shadow of his former glory.4

This loss of control of the family unit is also a reflection of the period shortly after the war. The United States now stood as a super-power, and the family unit wished to reflect this shift. Women went back into the home after their husbands returned from war, and men took their place once again in the workplace. Williams offers critiques of what contemporary feminist have called “fragile masculinity.” This notion points to the societal expectations for men to be strong and emotionless, without vulnerability and compassion. The fragility comes

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1 Tony Fong, "'I look into their myriad eyes': The Queer Gaze of Tennessee Williams's Memoirs," *University of Toronto Quarterly* 84, no. 1 (Winter 2015): 34-54, Academic Search Complete, EBSCOhost (accessed February 8, 2016).
from the sensitivity of men needing to be on the defensive when it seems like their masculinity is being threatened or questioned. Post-war effects revealed the fragility of masculinity for many American men; there was a definite need to reassert themselves in the domestic sphere after being in hell for so long. Williams creates men that convey this fragile masculinity and constantly initiate the war over dominance at home, always struggling to keep their place. Through Stanley, Williams creates a brutish example of a man displaced. He is increasingly displeased with his wife’s sister, Blanche, taking all of the attention and energy away from Stella. He exudes dominance and tension, inserting Huey Long’s proclamation that “Every Man is a King!” Williams uses Stanley to reflect on this inherent fear of men being displaced and illegitimated in their own homes, the kingdoms that they cultivated after the war.

In the depictions of homosexuality in these plays as well as the moment they were written, Williams was writing about a new America, one full of paranoia and the desire for the reinstalment of masculine order after the war. The time after the Second World War proved to be tumultuous for people that were significantly marginalized, whether by race, gender, or sexual orientation. Homosexuality existed in a place of extreme taboo in American society, with many men wishing to stay in the closet rather than be harassed and attacked. Many artists had to hide their sexuality from the public in order to preserve their image and credibility, including Williams. He achieved great success on the stage for several decades, with his greatest achievements coming in the years just after the Second World War.

Williams included themes of latent homosexuality in his work, most notably in *A Streetcar*...

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8 David Savran, *Communists, Cowboys, and Queers*, 1-19.
Named Desire and Cat on a Hot Tin Roof. These plays are offset by the depictions of heightened masculinity, from Stanley Kowalski and Brick Pollitt respectively.

Homosexuality finds its way into Williams’s plays, often as an accusation against a fragile man. For Cat on a Hot Tin Roof’s Brick, he lives his life in the shadow of his past, after a friendship with his close friend and teammate Skipper ends in Skipper’s death. Throughout conversation with Brick and his wife, Maggie, Williams reveals that there was more than just platonic friendship at work between Brick and Skipper; there was also romantic love. Brick claims that this is inconceivable, stating that Maggie is taking his friendship and “naming it dirty.” The ensuing argument and Brick’s threat of violence against his wife, highlight all too well the visceral nature of masculinity in this time. In the conclusion of Act One, Maggie reveals to Brick that she knew about him and Skipper’s relationship, and Brick proceeds to chase Maggie around with his crutch trying to strike her with it. This showcases what Williams was observing in American society, the intolerable quest for homosexual men to preserve their place in the household by staying far into the closet. In other words, as stated by John Bak, men struggled to survive in “an American society that, in reaction to rapid immigration and the resultant fears of the cultural "Other," constructs a masculine existential identity as one of opposition.” The “opposition” he refers to comes from native born, white men opposing all forms of counterculture (i.e. immigrants, different sexual orientations, gender identities, etc). This is highlighted in Brick, as he is a man who fights to keep himself from being cast out and forgotten. Throughout the play, Brick’s sexuality is put in question in regards to his relationship with Skipper, with Maggie’s

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9 Tennessee Williams, Cat on a Hot Tin Roof, 910-911.
10 Tennessee Williams, Cat on a Hot Tin Roof, 910-912.
confrontation and Brick’s violent reaction. As John Bak also argues, Williams placed these internal struggles about sexuality to make a larger statement about society. He argues:

Williams produce texts that not only expose the heteromasculinist bias within twentieth-century American constructions of masculinity, but also perpetuate those selfsame biases by withholding information concerning their characters' sexuality and so creating a desire in readers and audience members for "definitive" proof.12

Williams depicts sex in terms of gamesmanship, with all of the characters using sex to attain dominance or to manipulate each other. This is a fairly radical depiction of sexuality, as Williams is not afraid to display sex out in the open to draw the audience into the domestic lives of these very flawed people. Stanley makes his sexual desires and intimate details common knowledge, using his house as his domain. All of this reflects the fundamental need for transparency in the years after the war, and America was intrigued by the inherent voyeurism that came from watching these people unveil their most intimate desires. Williams intentionally added characters in his world that perform their gender in an open place, with Blanche using her femininity to highlight dated ideas of womanhood and Stanley asserting his hyper-sexualized masculinity in order to maintain dominance.13

Though the play is open about sexuality, it still treats homosexuality in a very closeted way. The only reference to homosexuality in the play comes from Blanche’s story about her deceased husband. Blanche characterizes her husband as hesitant, with a “nervousness, a softness and tenderness” about him, which she attributed to his young age. When she finds him in bed with another man, her response is to proclaim her disgust for him, which ultimately led to his suicide.14 Williams highlights the profound societal disgust for homosexual men and the many reasons why they remained in the closet, particularly during

13 Anne Fleche, "When a Door Is a Jar, or Out in the Theatre: Tennessee Williams and Queer Space," Theatre Journal 47 (2), (Johns Hopkins University Press, 1995), 255.
14 Tennessee Williams, A Streetcar Named Desire, 527-528.
this era. It is a profound part of *Streetcar*’s narrative, as it is another example of Williams making a commentary about his own life and struggles. Williams was open about his sexuality, but in certain spaces that were safe for him to be himself.\textsuperscript{15} This notion not only reflects the societal context in which Williams resided, but his personal struggle as a gay man as well.

Williams showcases the role of the family unit in establishing gender identity in the post-war years through the struggle over sexuality that Brick faces in regards to his family. As a man, Brick is expected to be the head of the household, much like his father. Instead, he is without children and a mere shadow of his former self.\textsuperscript{16} The family unit also acts to define each other’s identity, something that Brick refuses to allow. No one is able to fully define Brick as homosexual or heterosexual; Brick will not allow anyone to define who he is. Williams conveys the struggle that many gay men face, especially if they professed denial about their sexuality. In other words, men could not be open about their inner conflict; they had to only be strong and masculine. They had to be Stanley, something that Williams also shows is not the greatest thing to be either.

Throughout Tennessee Williams’ work, he highlights the inherent struggles that men outside of the heteronormative realm faced in the years after the Second World War. By examining his seminal works, *A Streetcar Named Desire* and *Cat on a Hot Tin Roof*, it can be seen that the lead male characters in these plays react to their identities differently, but still strive to maintain their masculine footholds in their homes. Stanley establishes the trend of masculinity asserting its sexual dominance in society, which Williams conveys in an almost animalistic fashion through Stanley’s character. The inclusion of Blanche’s deceased husband being homosexual ties into the societal struggle of gay men to be accepted and recognized. In

\textsuperscript{15} Anne Fleche, “Tennessee Williams and Queer Space,” 254-255.
\textsuperscript{16} Tennessee Williams, *Cat on a Hot Tin Roof*, 900.
the converse, Brick constantly struggles with his sexuality with people around him trying to label him as homosexual or not. He grips with his identity throughout the play, wanting to be the strong man for the family, but ultimately not able to face his real identity. Williams’ experiences as a homosexual man are reflected in these very different men, and Williams makes commentaries about masculinity through the animalistic bravado of Stanley and the conflicting sexual identities of Brick. Williams was in-tune with the post-war years and their quest for codified understanding of family, sexuality, and order after so many lives were lost. He writes of men who have lost something, whether that is legitimacy or their place in society. He writes of men who in their masculinity and strength, showcase their major fragility and weakness, which Williams reflects onto society as a whole. Through Williams’ investigation into post-war culture, he also integrates details from his own lived experience to enhance his work, without ever diving into the realm of autobiography. Williams is able to draw inspiration from his own life and trauma while still making strong artistic choices in his work. The result is a set of clear narratives that transcend past the factual and into strong and interesting fiction.

**Elements of Lived Experience**

Apart from toxic masculinity and male dominated aggression, Williams wrote often about madness and the fear of being detained. In professor of theatre John Louis DiGaetani’s examination of the psychological inspirations of modern playwrights, he identifies that this fear of madness permeates Williams’ life, and it is manifest most vividly with Blanche’s mental degeneration *A Streetcar Named Desire*. However, DiGaetani argues that the theme of sibling rivalry appears most significantly in Williams’ work, acting as a vehicle to justify the madness. DiGaetani cites that “contemporary writers and psychologists…have written extensively on the emotional conflicts and trauma which can result from the most intense
forms of sibling rivalry.” According to Williams biographer Donald Spoto, the rivalry between Stella and Blanche’s mental states act as a reflection of Williams’ own experience with his sister Rose. Throughout the play, Blanche challenges Stella by belittling her living conditions and her choice of a husband with Stanley. DiGaetani argues that this discord between Stella and Blanche reflects Williams’ own sibling rivalry that he felt in his own life, leading to the penultimate betrayal of Stella submitting Blanche to an asylum when she grows too mentally unstable.

Williams’ family had a history of insanity, even leading to his mother’s mental collapse at the end of her life. After a lobotomy Williams’ sister Rose in an asylum for much of her life, Williams would visit her often, bringing her gifts as much as he could; DiGaetani even claims that there were subtle incestuous feelings between Tennessee and Rose, permeating in his plays Two Character Play and Out Cry, which contain incestual brother and sister relationships. However, Williams does not aim to create a one-to-one comparison of Stella and Blanche with his own siblings. Instead, he communicates the fear of madness as a concept that audiences could share with him through the characters. In his own way, Williams was able to pull from his own insecurities and fears to create a story that reflected more universal fears of madness and insanity by drawing on personal experience without making the play about himself exclusively.

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18 DiGaetani, 74-76.
20 DiGaetani, 67.
Part II: The Cherub’s Mask: Focusing on Narrative

Conception of the Play

In the winter of 2015, I decided to apply for the Student Directed Series at North Central College. Through this process, students select a play and stage a fully fleshed out version of it during the theatre department’s season. Aspiring directors can apply with existing plays or cultivate new work in collaboration with others. The department gives full agency to the director to tell the stories that they feel passionately about, and it gives a unique opportunity to work on a new piece with a full production team. When I was first made aware of the opportunity, I knew that I needed to be a part of it, as I had been interested in directing a production. I initially wanted to choose a play that would be thought-provoking and interesting to work on, but I found it difficult to choose one that would be achievable with my limited experience and budget. I was also intrigued by writing, and thought that an original piece would suit the series well. Original work would also offer me a more open process to do whatever I wanted.

When I decided that I wanted to produce my own work, I quickly realized that I was extremely inexperienced in the craft of playwriting. I intended, instead, to work in tandem with a playwright, and act as solely an interpreter of the piece rather than a collaborator in its creation. I called on my brother to help me write a script; he had written in school and expressed interest in working on the play. We threw around an idea that we could share with an audience, and we wanted the story to mean something to us. We decided to talk about family and divorce.

I wanted to stage a play about my own experiences because I knew that I could comment on them in an honest way. I wanted to tell the story of my parents: two loving teenagers who become a couple, get married because it is expected, have children that one of
them is not ready for, and experience resentment, infidelity, rocky forgiveness, medical
scares, and divorce. I wanted to follow the exact path that my parents went on; I wanted to
tell their story. My brother and I felt that it would be cathartic to stage our family’s story
exactly as it happened, as we felt that our experience was unique and needed to be staged.
This notion of catharsis was a practice that has been in the theatre dating back to the time of
the Greek tragedies, where the protagonist strives to reach a goal and it horribly stricken
down in the pursuit, invoking pity and fear in the audience.21 Though scholars disagree on
Aristotle’s exact meaning by the term “catharsis” in tragedy, the idea has come to stand in for
a Freudian purging of emotions, leading to a healing or relief. My parallel, personal catharsis
would come from finally watching the events of my life played out on stage, making it
something separate from myself. By externalizing it, I felt that it would help me gain closure.

We began work on the script and tried to flesh out some ideas for how to stage such a
personal journey. Our talks began in Oesterle Library on North Central College’s campus,
where we met several times to brainstorm ideas; this was the fall before the applications for
the Student Directed Series were due. We considered making the work episodic rather than a
linear narrative, allowing for each character to break out and speak their own experience in
direct address to the audience. We knew that we wanted to get an even perspective of the
mother and father in the show as an exercise of objectivity. This idea of staging our memories
afforded us an opportunity to create a visceral story. We felt that by staging our exact story, it
would not only allow us to create something that we felt was more authentic, but it would
also be a cathartic exercise of staging our trauma. Some scholars who study the staging of
tragedy argue that depicting real trauma, though potentially dangerous, offers the best results
when the artist faces the negative emotions and experiences. As theatre professor and scholar

21 Leon Golden, "The Purgation Theory of Catharsis," The Journal of Aesthetics and Art Criticism 31, no. 4
Jodi Kanter discusses the staging of grief in her book *Performing Loss: Rebuilding Community through Theater and Writing*. People often experience feelings of grief and trauma in silence, and that vocalizing and staging such experiences help us to reconcile with their realities.\(^{22}\)

**The Story, Our Story**

The portion of our lives that we decided to cover in *The Cherub’s Mask* has to do with the fallout of my relationship with my mother. Normally, I would not think it necessary to go into personal detail about my life, but it is necessary that I be as transparent as possible when discussing autobiographical work. There are fundamental elements from our lives that we wanted to cover in the story, namely the impact that our parents’ divorce had on us and the subsequent years living with our mother.

Our talks began with recounting stories of our parents from when they were young. After our parents split up, my mother would tell us of countless instances, many apocryphal or all-together false, of our father’s infidelity and abusive tendencies. Growing up, my brother and I lived a rather idyllic and reasonably normal middle class life. Dad worked long hours while Mom stayed home and took care of the house and our wellbeing. Childhood seemed rather conventional; many families possess a calm before the storm that divorce unleashes. This was the time when Mom and Dad were not Jacky and Mike; they were untouched pillars of our lives. However, a single winter afternoon held a heavy statement in its grasp that led my brother and I down a path that we maintain to this day.

For the first time in my life, I was experiencing my parents’ faces fall to shame and embarrassment, grief and relief, as they revealed that they were no longer going to remain a

married unit. Their solidarity was never a question for me, and their placement at the center of my world had been unwavering. And just as reconciling with a child on the death of a family member, they were announcing their failure. Parenthood held a sacred position that created all sense of stability and family. Without that unit, I did not know another way to exist. Mom and Dad were severely weathered individuals, eroded after years of enclosed anger, resentment, and distrust finally chipped past the idyllic surface. Suddenly our parents were individuals, immensely flawed people with decades of gall that couldn’t help but claw to the surface. This notion of unveiling the humanity of parents after divorce gripped us from the start, and we knew that we had a solid entry point into the story.

My experience was not unlike many children whose parents split up when they are young. In an attempt to capture our experience on stage, we decided to frame the play from the father’s perspective, as we wanted to choose a person through whom we could play with the balance of sympathy and disdain. In creating the father, David, we were able to enter the play through familiar eyes, and give the show a central focus. We also needed a strong character to stand in opposition of David, and Astrid, his ex-wife, proved to be that counterbalance. David is often stressed and frazzled, and Astrid remains calm with a laser focus on the crises at hand; these roles switch at key points of the show (i.e. when Astrid is taken off guard at remembrance of the past). It was incredibly important to me that Astrid stands at opposition of David throughout the show, but not appear as a villain. I wanted to distance ourselves from the cheap, and rather sexist, trope of having a destructive and unstable mother as the foil to the insecure and unintelligent father. I wanted both parents to be their own entities with complex opinions of the relationship.
Reflections on Process

Artistic Liberties

When we began to map out my life into a theatrical context, we failed to realize the ways in which it would affect the narrative. In our pursuit for an authentic story that recounted our experience, it became abundantly clear how difficult it would be to maintain details verbatim and create an interesting narrative that would be accepted by an audience. Our experiences, though emotionally impactful, did not occur in a traditional theatrical mode. There was not an Aristotelian dramatic structure to our parents’ divorce; there was not a story there that could be told from start to finish. This dramatic structure provides the traditional Western model of plot structure: exposition, followed by rising action, a climax that provides the turning point for the protagonist, and then a falling action leading to a resolution. It was in our search of memorializing our experience that we hit a large roadblock. And it was also a time that we reached an impasse in regards to our working relationship, and my brother soon disengaged from the process. A mixture of difficulty facing the subject matter and a lack of drive to tackle the task, my brother stepped aside from the writing of the play, leaving a concept without a vehicle to create it. With the sparse pages and loose scenes that I had, I was left to write the script on my own. A fellow student, John Lindberg, offered to give a helping hand in the writing process. They read the short treatment and gave their time to help me in any way I needed. Together, we began to craft the show that included elements of my life, while adding the extra touch of an outsider perspective. Including John in the writing process allowed me to distance myself more from my own experience and treat the play as something that was inspired from my real experiences, but was a separate story that would stand on its own.
In his book *The Elements of Playwriting*, author Louis E. Catron states that one of the first steps in writing drama is identifying one’s personal beliefs, creating an experience that “is an insightful journey into self-discovery.”

Through working with John on the script, I found that I was engaging in my own journey of self-discovery, but as an artist rather than as the subject of the story. Artistically, it was enthralling to be able to work with someone who was not attached to my experience, as I had a person now to bounce my ideas off of in order to understand how audiences would engage with the work.

I argue that this strategy was successful because it inadvertently paralleled the playwriting strategies of writers like Tennessee Williams, who dramatized the ideas behind their experiences, rather than the exact experiences themselves, in order to demonstrate the conflicts of the 20th Century American family. It is in this pursuit that autobiographical work transcends the writer and becomes a play for a more universal audience. In our distillation of characteristics, I decided that the show should focus heavily on not only the parents’ dynamic as recently divorced, but to dive into the reasons why their relationship failed. The characteristics we decided to highlight were initially ones of contempt and resentment: lack of trust, old wounds, depression, negativity. These characteristics were not only present in both of my parents after their divorce, but remain with them to this day. Also, John and I posited that these characteristics would be those binding factors that audiences, especially those people who have been affected by divorce, would relate to heavily. We decided to pull from aspects of my life, while still creating characters that would work within the fictional narrative. We realized that in order to tell the story that we wanted to tell, there were some things that we needed to change and omit completely from my narrative in order to give it a compelling structure. We decided to distill my parents down to their most fundamental

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qualities, and to paint a picture that was not totally sympathetic; we wanted the audience to be able to identify with aspects of the characters, but also remain open to judging the characters as people in this world.

Before my brother removed himself from the process, we did establish that a hospital setting would be a useful place to stage the show. I wanted to play with proximity, and put two people who want to be the furthest away from each other in a room that they must stay in together. We decided that the circumstances would activate the couple into discourse about the past, in a way that wasn’t just stating exposition in monologue, but would advance the dramatic action by bringing their child into the hospital. This would give them something that was of mutual care and interest, a situation where they would have to work together for the well being of their child. This set of circumstances offered the possibility of a tense narrative, as well as a dramatically heightened way to tell the story of divorce in a time of crisis.

We also made key changes to the relationship of David and Astrid that deviated from my parents, making them more interesting theatrically. I wanted to include the portion of my mother’s reality relating to her obsession with medical emergencies. My mother suffers from Munchausen Syndrome by Proxy, a psychological disorder that drives a person to hurt themselves, or others, in order to achieve attention from those around them. It is an involuntary compulsion to create crises, typically having to do with medical scares. Those that are externally affected by the person who suffers from Munchausen by Proxy are typically the person’s children or significant other; those that are closest to the person are often affected by their behavior.24 This was a crucial aspect that we needed to place in Astrid, to give her a justification for her wrongdoing in the play. We wanted to work hard not make it the dominant aspect of her character, as we were not telling a story of mental illness. We

also did not want to demonize those that suffer from Munchausen. Astrid is a woman who loves her family, but simply cannot control the compulsions that drive her to hurt her daughter.

The character of David reads very differently from my father in several key ways, namely in his demeanor. My father is supremely emotional and compassionate, making him a loving and caring father. However, in order to balance Astrid’s coldness, we needed to give David flaws as a parent as well. John and I decided that he needed to be more of a misanthrope, hardened by years of being deceived, now gun-shy about trusting people. We wanted audiences to not totally be on his side from the beginning, though we were framing the story from his perspective. Keeping the parents on even ground with the audience creates more dramatic tension, rather than constructing a clear “good” and “bad” guy.

**Abstraction Through Staging**

The transition from playwright to director can be a difficult task. As the author of the play, I wrote each character in a voice that resonated with me, and in order to create a cohesive story, writers need to constantly juggle the characters, plot, and given circumstances equally. Creating these characters requires a deep focus and understanding of their function in the narrative as a whole. Directing is not entirely different in that respect. I found that directing also offered a wider scope of focus on storytelling, rather than the narrow focus one experiences while acting. Writing and directing seemingly go hand in hand; however, there is a fundamental difference that I came across in my process. I found that directing offered me a greater freedom of exploration, as I was not tied to the ideas of the writer, but could now become an interpreter of the work. It was in this freedom that I found more layers to the story.
Initially, the play was simply going to exist in the realm of realism, relying heavily on the dialogue and circumstances to create a compelling story. This would complement the realistic nature of the characters and make sure that the show maintained a clear narrative for the audience to follow. However, as we neared time for rehearsals to begin, I started to feel as though the scenes themselves did not contain enough substance to fill ninety minutes of an evening. I felt that the play needed more in regards to storytelling, and there was no need to simply add more expositional dialogue to fill in the gaps. I have always been fascinated with more abstract movement work in physical theatre, and I wanted to find some way to bridge the gap between psychological realism and this more conceptual physical work. In order for that to work, I needed to become comfortable letting go of the story being my own; instead it had to become about the group.

In the rehearsal process, we employed much of the work of theatre educators Anne Bogart and Tina Landau, namely with their work in *The Viewpoints Book*. We started with creating a collective vocabulary that we could communicate from, as the book dictates. We began the staging process by engaging in some free movement, allowing the actors to engage with their bodies in ways that were outside of the realm of realism. We welcomed theatre educator and North Central College visiting professor of theatre Dave Peterson to come in and lead a workshop on Viewpoints work, as he has his training in physical theatre and clowning. According to Bogart and Landau, viewpoints stem from a performance tradition of post-modern expressionism:

> Viewpoints “is a philosophy translated into a technique for (1) training performers; (2) building ensemble; and (3) creating movement for the stage. Viewpoints is a set of names given to certain principles of movement through time and space; these names constitute a language for talking about what happens onstage. Viewpoints is points of awareness that a performer or creator makes use of while working.”

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In a session that lasted roughly an hour, the actors were told to examine the two areas that Bogart and Landau’s work focuses on: viewpoints and composition. We explored the viewpoints of time and space, where the actors moved about the space exploring different ways to move their bodies. In a guided exercise, the actors would change specific areas of the viewpoints, starting with the tempo in which they moved. We would go through a spectrum of different speeds of movement and for different periods of time. The viewpoints of time (tempo, duration, kinesthetic response, and repetition) all work within the actor, exploring the limits that their bodies can reach, which they usually do not access while working on psychological realism.26 The viewpoints of space (shape, gesture, architecture, spatial relationship, and topography) refer to the actor’s relationship with the space around them and the others that they encounter in the space. These exercises get people to play with close proximity, being pressed up closely together and then distancing themselves as far as they could while still in the space. These exercises acted as a tool to draw the group together as an ensemble, something that Bogart and Landau emphasize is essential to strong storytelling. In practice, this resulted in such scenes in the show as the movement interludes between the scenes, known as “movement pieces.”

Working with the actors, as well as our movement coach Sarah Rosenberg, we created stylized transitions between the scenes that filled the gaps of the narrative. Since the set was going to be a solid unit that did not require changes from scene to scene, I thought it would be an excellent opportunity to create abstract physical representations of David and Astrid’s memories together. These transitions, that we dubbed “movement pieces,” helped to take the play out of the confines of the hospital room and allowed the story to access different topographical possibilities in ways that traditional staging could not satisfy. These pieces also allowed for further abstraction from my lived experience, as we were all able to create scenes

26 Bogart and Landau, 8-9.
that captured a feeling or a word. For example, the first two pieces of the show are supposed to embody the words “disease” and “anxiety.” We decided to give David and Astrid characteristics that we worked as an ensemble to devise. The actors then moved their bodies in ways that would represent these words, and the movement piece came to life. These physical motifs began to shape into a story arc that existed in parallel with the narrative of the spoken dialogue, allowing for the audience to engage with the story from an aural and physical standpoint.

Throughout the process, I wanted the play to maintain a sense of freedom without the constraints of the writer/director/actor paradigm. I disclosed with the cast that this story is based off of my life because I wanted them to understand the gravity of the issues that we would be dealing with. This was not to gain their sympathy for myself, but rather a way to help them realize that this is something that happens to real people. I wanted them to respect the story, but also open up to me about critiques regarding the script, something that you do not see as often when a director claims to be the sole authority on the process. Because I am not an experienced writer, and I was working with my peers, I did not want there to be a sense that I was dominating the space with my ideas; I have found that the best art that I have created has come from working with an ensemble to create a cohesive world. Engaging with the viewpoints work helped to create an ensemble effort to create a show that I could not have devised alone.27 This included going through the script once it was on its feet. If someone did not understand a line or did not think it functioned in the narrative, we would stop and work together on how to fix it. It was a group effort to create dialogue that would be cohesive and clear for all of the performers involved. The process was intended to act as a

27 Bogart and Landau, 122-123.
guided devising opportunity, with myself acting as the facilitator and guide of material that we all worked to create.

Overall, I feel that *The Cherub’s Mask* was a successful process in terms of my ability to draw on my personal experience, while still maintaining enough flexibility for dramatic storytelling. By creating an open process of collaboration, we were able to make a play that stands on its own as a piece of drama. The process was successful through my ability to relinquish the reality of the content and focus on the fictional narrative within the play. By focusing on the story being dramatically interesting rather than autobiographical, the play was able to become a much more artistically successful work.
Bibliography


The Cherub’s Mask

By: John Lindberg and Jack Morsovillo

Original Production
Performed February 11-13, 2016
Theatre at Meiley Swallow Hall
North Central College

Original Cast

David Cohen – John Bihun
Astrid Cohen – Nicole Borowski
Emmy Cohen – Ali McGarel
Nurse – Miranda Harris
Doctor – Tyler Myers

Original Production Team

Director – Jack Morsovillo
Stage Manager/Scenic Designer – Stephen Kossak
Lighting Designer – Alex Poe
Sound Designer – Tom Noeson
Movement Coach/Props Designer – Sarah Irene Rosenberg
Costume Design – Caitlin O’Brien
Assistant Stage Manager – Elizabeth Miller
Scene One

(Open on an empty stage, with flashing red and blue lights, and the sound of car doors slamming shut. It’s a very cold night. From backstage, comes DAVID, a man in his mid-30’s, carrying Emmy, his preteen daughter.)

DAVID: Help! Help! Somebody please help me!

(Stage ignites into action, with David standing in the middle of it all. He’s isolated, recalling all of the following events: A hospital bed is brought out, as well as the accompanying elements of a hospital bedroom. These elements are brought out by the Doctor and Nurse. The following dialogue is heard, but not spoken by the actors currently on stage, while the lights stay at a blue out.)

(All of this in a soundscape.)

NURSE: Sir, please calm down. What is your emergency?

DAVID: She was vomiting on and off all night, but I found her slumped on the bathroom floor after the last time.

NURSE: Any allergies?

DAVID: No. No, none that I know of.

NURSE: Age and name?

DOCTOR: Get her in here, right away,

DAVID: Her name is Emmy Cohen… she’s 12.

DOCTOR: Please, sir, we need the space.

NURSE: And your name?

DAVID: David Cohen…I’m her father. What is going on? Please… what is happening?

NURSE: Mr. Cohen, this will only take a minute.

DAVID: (As if it were internal monologue.) I’m sorry. This is all just too stressful. I tried calling my ex-wife when I found her and had no luck. Emmy wasn’t looking too good when she dropped her off. I figured she just was worn out from a tough week at school. I don’t know what to do. I just feel so powerless. Christ, I feel like I’m in a movie…and I…if I were to lose Emmy, I don’t know what I would do. I can’t lose her. I won’t lose her!
(Soundscape swells to the point of hysteria. DAVID slumps into a chair and shields his ears from the onslaught of noise. Then, as suddenly as it began, the soundscape is silenced.)

**DOCTOR:** Mr. Cohen? Your daughter is stable now. She’s resting while we run our tests. She was very dehydrated, so we hooked her up to an IV.

**NURSE:** Emmy just needs some rest now.

**DOCTOR:** Right, that’s the best we can do until we get a better understanding for what’s ailing your daughter.

**DAVID:** You don’t know what this is then? She’s really never had this happen before, so I don’t know what to tell you that would help at all. I mean, kids are always a little sick, right?

**DOCTOR:** It could be anything, honestly. It’s too early to say anything definitive before we have a better idea of her blood work.

**DAVID:** Can I sit with her?

**DOCTOR:** Of course, just be mindful that whatever is affecting your daughter could also affect you, or already be affecting you. And let her get some rest.

**DAVID:** Of course.

(The DOCTOR and NURSE walk away.)

(DAVID walks into the room slowy and quietly, closing the door behind him. He pulls the chair from the corner and sits next to the bed. He pulls out his cell phone.)

**DAVID:** Jesus....

(DAVID dials a number. He waits silently, only to have the line not answer.)
Scene Two

(Fade lights to match reality. Come back on DAVID sitting with his elbows on EMMY’s bed, when the door opens. ASTRID, a woman in her early to mid-30’s walks in. She stops when she sees EMMY, and starts to cry.)

ASTRID: Oh, Emmy, is she…?

DAVID: She’s stable, just resting now. She had a very hard night.

ASTRID: Why didn’t you call me earlier?

DAVID: I tried to, but the line didn’t connect.

(ASTRID nods.)

DAVID: She’s going to be ok, Astrid. She just needs her rest. The doctor said that they’ll know more of what to do when her tests come in and she wakes up. But for now, it’s out of our hands.

ASTRID: You know that I hate that…

DAVID: I know. But we can’t do anything more. All we can do is just be with her. Are you doing okay?

(ASTRID walks over to EMMY and kneels down to her level. She plants a small kiss on her forehead and sits in DAVID’s chair.)

ASTRID: She’s warm.

DAVID: I know. (pause) Are you alright? Emmy said...

(DAVID walks over to Astrid.)

ASTRID: David...she’s warm. She’s too warm.

DAVID: She’s fine, Astrid. The doctor would be here if there was something wrong. There are all kinds of alarms and machines here.

ASTRID: Don’t yell at me…

DAVID: What? I’m not yelling. I’m just saying that you don’t need to worry as much as you are. You’re overreacting.

(ASTRID stands and walks away from DAVID.)
**ASTRID:** This is a serious situation, David. You don’t know what could be wrong with her. I’m worried, but I guess that means overreacting?

**DAVID:** Astrid, not here-

**ASTRID:** I’m scared, David.

**DAVID:** Yes, I understand that-

**ASTRID:** No. No you really don’t. You never understood my anxiety, my concerns. Never.

**DAVID:** Look, this is not the time to fight about us. Now’s the time to stay calm. We have to care for Emmy. She is in the best hands possible, and soon, we’ll know what the problem is. The best thing that we can do is let her rest, stay calm. *We* are not the issue. She needs us to be calm, so, I’m going to do that. And if that means that I need to step out to get coffee or go to the bathroom, fine. If you want to run home, or call your mother or whatever, do it. Otherwise, *this* helps no one.

**ASTRID:** You’re not in my shoes. You’ve never been one to experience something like this. *(ASTRID derails her thought, as she sees DAVID’s expression)* That’s not what I meant. I...look. It’s what I learned when I was recovering. My body will help me deal with the stress, but that is my body not yours. You have to let me deal with this in my way.

**DAVID:** Alright. I’m sorry, Astrid. I’m just trying to look out for your best interest. *(pause)* You never told me how you have been.

**ASTRID:** Oh, I’ve been good. Doing a lot better. The tour just winded down, which gives me some more time for the things I’ve put on the back-burner. How have you been?

**DAVID:** Surviving. Astrid, Emmy told me about your fall.

**ASTRID:** What fall?

**DAVID:** She said you fell down the stairs.

**ASTRID:** Oh, yes. I was fine. She worries so much.

**DAVID:** She said that she found a bottle of pills near –

**ASTRID:** David, I don’t want to talk about this.

**DAVID:** When were you going to tell me about this?

**ASTRID:** I said I don’t want to talk about this.
DAVID: This affects all of us. We need to talk about this.

ASTRID: Now we’re demanding? David, please.

DAVID: What pills Astrid? Are you using something? What is Emmy talking about?

ASTRID: (puzzled) What?

DAVID: Emmy told me that she found you in a heap at the bottom of the back stairs, and that I wasn’t supposed to know because I would overreact. I know you want to keep to your own personal life, but you have to tell me these things. Are you using something that I should be aware of?

ASTRID: (looking confused) I have been having some anxiety since I have been home. I fell because the stairs were wet. I was heading downstairs for a glass of water. Emmy must have just misunderstood me.

DAVID: Anxiety?

ASTRID: It’s legitimate. Or do you need proof? (pulls bottle out of purse) Here. Emmy put things together that weren’t there.

DAVID: Of course she did. Why can’t you just admit this? It never changes with you. It’s just like before.

ASTRID: Oh don’t even bring that up…I can’t believe you. This is exactly why I wanted to keep this quiet.

DAVID: You lied. To all of us, and now you’re doing it again. The only difference is that I’m done. I’m not just going to stand here and let you lie to my face!

ASTRID: Really David?! I was sick.

(ension Rushes out of the room)

(David paces around the waiting room. He sits in a chair and holds his head in his hands.)
(David is isolated on the stage as the light shifts from reality. Two figures appear on the stage, both masked and begin to relive David’s memory.)

(Fade out.)
Scene Three

(DAVID has now left the room. EMMY sits awake, as the NURSE takes her vitals.)

NURSE: (To self) Where is that chart?

EMMY: Where is my dad?

NURSE: Hey there, gorgeous! Your dad stepped out for a couple minutes to make a call. Your mom stopped by too.

EMMY: Was she mad?

NURSE: Mad? Why would she be mad?

EMMY: I know how much hospitals upset her.

NURSE: No, she wasn’t mad. She was worried about you.

EMMY: Am I going to be okay?

NURSE: Hmm? Yeah, of course hun.

EMMY: Am I going to die?

NURSE: (alarmed) Oh my, no no. You probably just ate something bad.

EMMY: When my mom went to the hospital last time, she got cancer…

NURSE: Oh. Well, that wasn’t the hospital. That doesn’t happen to everyone when they get sick. And we all know things worked out fine for your mom in the end. Why don’t you rest a bit?

(Enter ASTRID)

ASTRID: Oh, hi. Sorry, here is the chart. I was just looking it over.

NURSE: Figures, being in the medical field? The only parents that know what anything means.

ASTRID: Oh yes, I understand.

NURSE: If you just give me a minute, I can give you the room. (Reviewing chart) By the way, I’m sorry to do this now considering…I read your book, and I loved it. Your story is truly inspiring and…I’m sorry, I’ll just leave you two alone.
(Exit NURSE)

ASTRID: How are you feeling, Em?

EMMY: Good.

ASTRID: Where is your father?

EMMY: The nurse said he’s calling someone. I think it’s for work.

ASTRID: Really, now?

EMMY: Mom, I’m sorry that this has caused so much trouble. I really do feel a lot better.

ASTRID: Emilia! You couldn’t control this. You know, if you don’t feel well you can talk about that here, right? This is a place where you can get better, you just have to tell the doctors how you feel.

EMMY: I feel a lot better. I was scared that I wouldn’t get better. Dad really helped me.

ASTRID: Well, your dad tries. But you still should have been helped sooner.

EMMY: No really! When I was getting sick last night, he sat next to me and talked with me all night. I kinda ran out of things to say.

ASTRID: That’s great honey. (with suspicion) Did you talk about anything interesting?

EMMY: (pausing) Nothing big. I think I remember talking about how I was feeling, things with school, about things at home with you –

ASTRID: Me? What about?

EMMY: Oh Mom! I’m sorry. I forgot that –

ASTRID: Emilia, what did you talk about?

EMMY: I...I told him about your fall…

ASTRID: (flustered) I told you that that was between us. That he would overreact. And he did.

EMMY: I’m sorry…
ASTRID: It’s okay…it’s okay, Mommy’s not mad. (holds hand to head) Oh my, you’re still burning up…

EMMY: The nurse said I didn’t have a fever…

ASTRID: Here, take these. (produces pills from purse and hands them to EMMY)

EMMY: What is it?

ASTRID: It’s your allergy medication. It’s time to take it, and you already missed a dose today. Emilia? Please, I know it has been difficult with all the medicine you’ve been taking, but you have to keep up with your prescription. That’s how viruses get started.

(EMMY swallows them with juice and lays back.)

ASTRID: I’m going to talk with your father. You get some rest. I love you so much, Emilia.

(Fade out)
Scene Four

(DAVID is about to re-enter the room when he is stopped by ASTRID)

ASTRID: David! How could you leave at a time like this?

DAVID: (groggily) I had to call the office to let them know that I couldn’t come in. Unlike you, I can’t just miss work without letting anyone know. Also, it’s very late. I thought she needed some alone time anyway.

ASTRID: Sure. Look, whatever she told you was wrong. I was never pregnant, and I never told her that I was.

DAVID: Why would she lie, Astrid? What would she have to gain by making up a story like that?

ASTRID: She’s a child, David.

DAVID: I’ll go ask her again.

ASTRID: You can’t. She’s sleeping.

(DAVID shakes his head, then looks into the room and sees that she is sleeping)

ASTRID: Like you said, it’s late.

(ASTRID takes a seat)

ASTRID: You’re lucky, David. If I had my way, I wouldn’t let anyone else in that room.

DAVID: It’s a great thing that you don’t control that then.

ASTRID: You should eat something, you look a little worn out.

DAVID: Thank you for your concern. Can I get you something?

ASTRID: No, I just would like some time alone, if you don’t mind.

DAVID: Call me if she needs something while I’m gone.

ASTRID: I am perfectly capable of -

DAVID: Jesus Christ, Astrid. Just let me know, okay? No debate. Just a text, that’s all.

ASTRID: Okay.
(DAVID leaves)

(Fade out)

(Fade in as DAVID is now in a different part of the playing space, where he has gotten himself a sandwich, wrapped in plastic. The DOCTOR finds him, alone.)

DOCTOR: Mr. Cohen?

DAVID: Oh, Doctor! Have you found anything out?

DOCTOR: Well, Mr. Cohen-

DAVID: David.

DOCTOR: Sorry, David. I’d like to discuss Emmy’s test results.

DAVID: (Rubbing his eyes and unwrapping his sandwich) Sure thing, sir.

DOCTOR: So, Emmy’s tests seem normal enough. No poisoning, no infection. Only a medication for her food allergy.

DAVID: Well, that’s good.

DOCTOR: Unfortunately, we can’t pinpoint the exact cause for an otherwise healthy little girl to vomit, collapse, and lose consciousness.

DAVID: This is the third week in a row that she’s felt sick when coming to my house. I was starting to think maybe it was an allergy or something, so I cleaned top to bottom and had every possible filter changed in my house and car. Then, this. I don’t know what to do anymore Doc.

DOCTOR: What about the possibility of a bully? Or of a harsh school situation?

DAVID: Nothing. She said school is great. Emmy’s worried about her mom. She said that she fell down some stairs and miscarried. But…

DOCTOR: That’s a lot for a girl her age. It’s hard on a child to know so many things they can’t fully understand. Is there something else?

DAVID: She said that she was only a few days late...

DOCTOR: Mr. Cohen…David…Emmy’s medical charts say that she’s been admitted to three different hospitals with the same sort of symptoms in the last year.
DAVID: What? I didn’t know about the others. When exactly did this happen?

(The DOCTOR gets paged to return to EMMY’S room.)

DOCTOR: We need to get back there, now.

(DAVID and DOCTOR exit quickly to EMMY’s room.)

(Snap to Full Blackout. Lights come back immediately.)
Scene Five

(EMMY is throwing up in a waste bin. DAVID, the DOCTOR, the NURSE are all present.)

NURSE: Sit her up.

DOCTOR: It must be a residual reaction from whatever was in her system. She hasn’t taken anything else since the last injection, did she?

NURSE: We didn’t give her anything.

DAVID: Emmy, did you take anything else?

(Emmy shakes her head. Lays her head back.)

DAVID: Doctor, what is this? What’s going on?

DOCTOR: Mr. Cohen, this is actually a good thing. She’s working whatever is plaguing her out of her system. (He is trying to hold EMMY who is having trouble sitting still)

DAVID: I know, it’ll be okay, Em.

(The DOCTOR raises a folder in his left hand.)

DOCTOR: Completely clean. It wasn’t anything artificial she ingested. Her blood is clean of every possible drug we would test for. I need to speak with Emmy’s mother. If she gave her something without us knowing, that could be it.

DAVID: I’m not sure where she is. She probably doesn’t want to talk to me at all.

NURSE: Can you call her please? It’s very important.

(DAVID nods and takes out his cell phone. He dials the number and holds the phone to his ear, visibly shaking. ASTRID confidently walks in.)

ASTRID: What’s wrong with my little girl?! Why didn’t you call me sooner?

DOCTOR: She had another bout of vomiting. She’s fine now, but she’s a little weak. We have to increase the fluids significantly. It’s working out of her system.

ASTRID: (To DAVID) What did you do to her?

DAVID: Me?!

NURSE: He didn’t do this Astrid. We’re still trying to figure out the source of the illness.
**DOCTOR:** *(EMMY has calmed down.)* *(To NURSE)* She doesn’t have a disease or infection. It’s not a virus. It’s not poison. Mrs. Cohen, the cause of your daughter’s condition is still uncertain to us. Was there anything that you gave her while she was here?

**ASTRID:** *(Composing herself)* Not a thing. Can I see her now?

**DOCTOR:** Yes of course.

*(The DOCTOR and NURSE leave. EMMY is resting.)*

**DAVID:** Astrid.

**ASTRID:** No, David. I know you didn’t do anything wrong.

**DAVID:** You haven’t believed a word I’ve said since you got here.

**ASTRID:** You wouldn’t hurt our little girl. I know that. Whatever she has, they will find it.

**DAVID:** They haven’t found anything yet, and it’s been what? 12 hours?

**ASTRID:** I understand that. These things are complicated. I don’t mean to be upset. But you know that I would never do anything to hurt Emmy.

**DAVID:** I just want to get her out of here and have this all go away.

**ASTRID:** Believe me. This isn’t easy for me either. I can’t stand being in here, much less with you when you’re like this.

**DAVID:** It’s not the height of my week either. I don’t get it. You should feel right at home in here.

**ASTRID:** David, please…

**DAVID:** You always loved hospitals. Only you liked to have others surround you in the bed.

**ASTRID:** Enough about that.

*(The fighting has come to a shouting whisper)*

**DAVID:** Enough? You don’t get to decide that. You didn’t stand over the bed with a pit in your stomach for months, wondering if that would be the last time you’d be able to have that opportunity. And for what? Nothing.

**ASTRID:** You know I was sick, and I beat it. The surgery cleared up everything.
DAVID: Surgery...

ASTRID: *(A short pause)* Miracles happen all the time. This was just another.

DAVID: A miracle? Absolutely divine.

ASTRID: Look, I know that things didn’t end well between you and I.

DAVID: That is an understatement.

ASTRID: I fell in love…

DAVID: You loved him?

ASTRID: That’s what I felt.

DAVID: You see? Even you can’t tell the lies from the truth anymore.

ASTRID: I loved you, but you became so negative. All the press, my miracle, my life back. And you could accept none of it. I was cured, David. And you couldn’t even be happy about that.

DAVID: But it wasn’t that, it never worked. Not for one more person. Not one more after you.

ASTRID: Some people are just blessed.

DAVID: You lied to all of us. Whatever surgery you did have…I don’t know.

ASTRID: Enough, David. Admit it. I fell in love with another man, and when I wanted to leave, you threw such a fit about the lying and...what did you call it? Mental abuse? You and your fits. It’s why I got weak in the first place.

DAVID: Don’t...

ASTRID: The worst part is, you know that I’m right. You made me hold onto too much stress with your tantrums and your lies and jealousy to stay healthy. I neglected my health for you. But, for your sake, I was a miracle. I went through hell. More than you can ever know. More than you are willing to care about. I fell in love with someone else because he cared that I was a miracle. He saw me as a blessing, just like I felt about you. I was wrong, clearly.

DAVID: *(DAVID leans into ASTRID’S face)* Why is it that every time we have this discussion, the timeline gets skewed? Why do I always become the monster? I’m the monster! Fine, I’ll be the monster! Let’s wind the clock back and I’ll tear the house apart again the way I used to and smash the windows with my fist and fuck every goddamn person
who buys into my bullshit. Make me the monster! I wish I could do it myself because it is better than being stuck here with you while my daughter is hooked up to machines and I can’t--

**ASTRID:** *(ASTRID takes DAVID’S hand and places it on her chest.)* You should calm down. You don’t want to have an attack.

*(DAVID pushes ASTRID’s hand away. She kisses EMMY on the forehead and leaves.)*

*(DAVID sits on a bench and tries to calm down as much as possible. He takes three deep breaths and moves his shoulders in a circle. He counts silently on his fingers. The lights shift back to that memory space. Two figures enter to act out David’s memory.)*

*(Fade out.)*
Scene Six

(EMMY is no longer gray, after being nursed back to health by an I.V., and is sitting up, much more relaxed, smiling, and watching T.V. ASTRID is asleep in a chair next to her bed.)

(Enter DOCTOR. With the door opening, we see ASTRID wake up and stare with wide eyes, as if ashamed of sleeping. The DOCTOR is holding a bottle of pills and a medical chart.)

DOCTOR: Hello, Emmy. How are you feeling?

EMMY: I’m pretty sleepy, but my stomach doesn’t hurt anymore.

DOCTOR: You’ve been through a lot in the last few hours. You can rest easy now.

DOCTOR: (To ASTRID) I think we can safely say that Emmy is doing better. We are still unsure about why she keeps getting sicker and then better, but I can say now that I’m not as worried as I was earlier. Mrs. Cohen, if you wish, there is a lounge area for overnight guests.

ASTRID: No, I’m okay here. I wasn’t here at all when she got sick again. She needs me.

EMMY: (EMMY’s smile fades.) Can I go home now?

DOCTOR: Not just yet. I’m sorry, but we may have to run a few more tests. We just want to make sure that everything is copacetic.

EMMY: But I feel fine now. No headaches or fevers.

DOCTOR: Oh, you never had a fever.

EMMY: (Looking confused) Mom said I did…

ASTRID: (Stands Up) No, no, you must’ve been dreaming.

EMMY: No, you told me that I felt hot and then you gave me allergy meds.

DOCTOR: (The DOCTOR shifts his look from EMMY to ASTRID and looks confused) You said that you didn’t give her anything since she’s been here? Additional allergy medication?

ASTRID: I didn’t, she must’ve dreamt that.

DOCTOR: (looking more skeptical) We’re still going to run more tests. We need to know for sure.

ASTRID: Are you sure? She’s been through a lot already.
DOCTOR: I’m afraid so.

ASTRID: (ASTRID pauses, and then tries to gain control of the situation.) Then I want every test available! I want to know what is wrong with her!

DOCTOR: We’re going to do our best for Emmy. The overnight lounge down the hall. Get some rest. Please.

(FASTRID nods confidently. The DOCTOR nods slightly, and exits as the NURSE enters.)

(Lights change to represent focus on another part of the stage, where DAVID is being guided by the DOCTOR back to the room.)

DOCTOR: (Nervously) David, I know who your wife is. Everyone does. I need to ask you some frank and possibly hurtful questions.

DAVID: (confused) Yeah, of course.

DOCTOR: Has your wife ever called you away from something important to say that her or Emmy were hurt or sick?

DAVID: (Hesitant, but then confident.) Yeah, a few times. Before Emmy was born, she as always dropping glasses and afraid that she had tiny pieces in her foot. She called me out of a an important work meeting to say that she had spilled boiling water on her hand and needed to go to the hospital, turns out it was just a little red. After Emmy was born, it got worse. She called to say that Emmy had fallen off of a chair and broken all of her teeth, so I raced home… She had a small cut on her lip and was playing. She was fine. Astrid has always been an extreme over-reactor. Why did you asked that?

(The DOCTOR looks at DAVID and sighs.)

DOCTOR: I think your wife gave Emmy something while she was here.

DAVID: To try to help?

DOCTOR: (Shaking his head) To keep her the same.

DAVID: She wouldn’t do that…who would do that? How could she do that? I…

DOCTOR: These things happen. It’s possible.

DAVID: Doctor, with all due respect, Astrid would not be capable of that. I may have had my problems with her in the past, but she would never do that.

DOCTOR: I just wanted to present all of the options to you.
DAVID: What can we do to make sure? Could we possibly set up a camera in the room?

DOCTOR: We can, but only when...if we believe that something is truly wrong. Only when things are so obvious that it is beyond a reasonable doubt. It’s quite literally useless. Using a camera isn’t really an option.

DAVID: Oh.

DOCTOR: But I do believe that something is seriously wrong. Emmy told me that Astrid had told her that she had a fever and that she needed to take pills, which Astrid produced herself, apparently. But Astrid is denying everything. She’s asking for every test possible, so if something is wrong, we will find it now. However, given how serious this is, I have to call this in to Child Protective Services. I don’t know when they’ll arrive, so I hope you understand. In the meantime, I need you to stay close to Astrid. Just to be sure. It also would not be out of the realm of possibility to sit Astrid down and confront her about what she gave Emmy. It could be nothing, I just want to make sure that there isn’t something we are missing.

DAVID: (With silent rage.) Yes, yes of course.

DOCTOR: Thank you.

(The DOCTOR exits)

(Lights shift to show focus on EMMY’S room as DAVID enters.)

DAVID: Hi, Emmy.

EMMY: Hi, Dad!

DAVID: Are you feeling better?

EMMY: (Nodding)

ASTRID: I’m glad you’re here. My boss called, I have to run into work to pick something up. I’m sorry for earlier. Can you stay here for a while?

DAVID: Yeah, I can do that.

ASTRID: Thank you (ASTRID exits.)

(DAVID walks over to EMMY’s bed and strokes her hand, EMMY is watching T.V., but never looks up.)
DAVID: Emmy, I need to ask you something, and I need you to be really honest with me.

EMMY: Of course.

DAVID: Did Mom give you something earlier?

EMMY: Some allergy pills, that’s all. I missed my dose from earlier.

DAVID: Allergy pills?

EMMY: Yeah. She said I had a fever earlier.

DAVID: What do they look like?

EMMY: Little. Red. Like always.

DAVID: Like always?

EMMY: Mom’s not a bad person, Dad.

DAVID: I never said that.

EMMY: She just gets nervous and scared. She wants to know I’m always okay. She tells me that all the time. Everyone just keeps asking me questions about her, and I’m getting mad. No one is doing anything. I just want you two to stop fighting.

DAVID: Alright, alright. I’m sorry, Emmy. You’re right. This isn’t about your mother and I. We just want to make sure you’re okay. Why don’t you sleep a little?

EMMY: I want to watch TV.

DAVID: Ok, I’ll just sit over here if you need me.

(DAVID slowly drifts to sleep, EMMY does the same.)

(Lights shift to memory. The Two Figures come into the light, relive David’s memory.)

(Fade out.)
Scene Seven

(The late afternoon light has faded into darkness, and the TV light is the only light in the room that isn’t a medical machine. The door creaks open, and ASTRID walks in, holding a bag of groceries. She is wearing new clothes. The lights click on and DAVID wakes up)

ASTRID: Oh. Hi. I’m sorry, I just ran out again.

DAVID: What do you mean again? You were here already?

ASTRID: Yeah, I came back around 4:00, but you were sleeping. The doctor came in and ran some tests, so I was here for that. After Emmy fell asleep, I ran back out. She’s still asleep? (ASTRID walks over to EMMY and strokes her hair, EMMY doesn’t move.) She must be exhausted.

DAVID: Why didn’t you wake me up?

ASTRID: You looked peaceful, I didn’t want to disturb you.

DAVID: I was waiting for you..

ASTRID: Maybe you should go home, David. You haven’t had any time to decompress since you’ve been here

DAVID: This is important to me. I don’t-

ASTRID: Only if you want. It’s not necessary.

DAVID: I don’t really know how to ask you this…but Emmy told me about the pills. What were they?

ASTRID: (ASTRID maintains a light gaze towards EMMY) Again with the pills. There was so much happening, I don’t remember. Look, it doesn’t surprise me that she would tell you that. She’s mad at me.

DAVID: Why would she be mad at you? I don’t understand…

ASTRID: She told me that she would rather live with you.

DAVID: When did she say that?

ASTRID: This was about a month ago. She said that you were much more understanding and fun. Emmy doesn’t even think of me as her mother…

DAVID: Astrid, you know that’s not true.
ASTRID: No? When have I been there? I’ve been gone, David. All that she can remember is that I’ve been gone, and that she’s “supposed” to love me. Purely out of commitment. I’ve only been back for the lesser part of a year now. And half of that time has been spent with you. Of course before that, were the tours and lectures, which everyone wanted to see, so I wasn’t even in this state. And before then was the cure, and the books, and documentary, and all the interviews. Poor Astrid was too busy recovering to be present. And then before that was the cancer and the treatments. Such a quiet time. I bet she doesn’t even remember the first Christmas we spent at the ward. All that leaves are the two happy years we had before we got the news. Two years when I was there. Two years where I could love my child. Two years, with a baby, who remembers none of that. I shouldn’t blame her.

DAVID: No, you shouldn’t. And you shouldn’t blame yourself either.

ASTRID: Why should I even try anymore?

DAVID: You’re her mother. She needs you, but she’s just growing up. You had to be the same way…

ASTRID: That’s not true. I loved my mother. And she loved me. So why can’t Emmy do the same for a mother who loves her?

DAVID: Astrid, please. Calm down-

ASTRID: (storms towards DAVID) I can’t calm down, David. This is too important, I will not lose her!

DAVID: Astrid, calm down. You’ll wake her.

ASTRID: Stop telling me to calm down!.

(The DOCTOR comes in with a slight knock.)

DOCTOR: Oh, I’m so sorry.

DOCTOR: There’s no need to worry about that.

ASTRID: No, no. You don’t understand. (Pulling tissues out of her purse.)

(OSTRID exits.)

DOCTOR: I’m glad to see you’re getting some rest Mr. Cohen. I hope things have been going better since I last spoke to you. Has Astrid been here long?

DAVID: She came back. Right around 6:00. She was here earlier too.
DOCTOR: Oh, I didn’t see her come in at all.

DAVID: She didn’t wake me.

DOCTOR: That is alright. We’re keeping a close eye on her. In the meantime, we’re still waiting for results to her tests. We ran as many as possible. It’ll be complete, but it takes quite a while. Also anything after 10:00, you know how it goes.

DAVID: My god… you’ve been here all day.

DOCTOR: It’s really okay. I’m used to it. I’m off in a few, but I have to be back in the morning. She’s sleeping pretty soundly, so I’m not that worried. The nurse will be here to check on her from time to time, but I’m sure that rest will be the best medicine.

DAVID: I’m glad it’s almost over. Thank you, Doctor. You have no idea what all of this means to me.

DOCTOR: I think I do. Take care of yourself, Mr. Cohen. I’ll see you bright and early tomorrow morning.

DAVID: Of course, get some rest.

(The DOCTOR walks out and off stage, leaving just DAVID and EMMY on stage. EMMY is still sleeping soundly. DAVID wipes the last of sleep from his eyes. The NURSE walks in holding a sandwich and soda.)

NURSE: Mr. Cohen?

DAVID: Hi, how are you?

NURSE: I’m fine. Long shift. Astrid asked me to bring these to you. How is Emmy?

DAVID: Oh! Sleeping soundly. She needed it.

NURSE: That’s good, I’m very glad. Sorry if this is personal, but I just loved that Lifetime movie about…

DAVID: My ex-wife, yes. No, it’s not too personal. Although I wish they wouldn’t have casted someone so short to play me.

NURSE: (The NURSE laughs quietly) How are you both holding up?

DAVID: We’re a bit overwhelmed. Completely exhausted. Getting at each other a lot. You married? Too personal?
NURSE: Oh no! It’s fine. I’m not married. My boyfriend and I have been together for about a year.

DAVID: I remember when Astrid and I were one year in. You probably are starting to finish each other’s sentences and making “couple friends”. All the double dates. One time Astrid and I went on a double date with her boss and his boyfriend.

(EMMY has woken up)

NURSE: Oh that must have been nice!

DAVID: It really was. Until his wife showed up. We had a huge laugh about it when we got home. Astrid got a raise shortly after that. I guess to pay for the awkward, I don’t know. Yeah, we had fun once.

(The smile fades from the NURSE’s face)

NURSE: What happened between you two?

DAVID: Now, that’s a little too personal.

NURSE: (Embarrassed) Sorry…I have to get going. I’m sorry, Mr. Cohen.

(The NURSE walks away)

DAVID: It’s okay.

(EMMY reaches to her mouth and has blood lightly drip from the side of her mouth.)

DAVID: Emmy? Are you okay?

(EMMY shakes her head no, and proceeds to grab her bedpan and throw up into it heavily. DAVID runs over and grabs the bedpan.)

DAVID: Shit, shit! It’s okay, Emmy. You’re okay.

(DAVID looks down into the bedpan and notices blood, pure blood. EMMY grabs her stomach and folds over. She starts crying and throws her head back onto the pillow. DAVID panics.)

DAVID: HELP! SOMEONE HELP ME!

(The NURSE runs in and looks surprised, she looks into the bedpan, and the DOCTOR enters ready to work. ASTRID walks in looking confused.)
ASTRID: David? What’s wrong?

DAVID: *(Holding up the bedpan)* It’s blood… it’s blood.

(*ASTRID screams and runs over to the NURSE, pushing her out of the way. The DOCTOR walks in and pushes through ASTRID, knocking her to the floor. DAVID rushes over to ASTRID, picks her up, and hugs her.*)

DAVID: She’s going to be okay.

ASTRID: It’s going to be okay.

(*The DOCTOR and NURSE work on EMMY for a while, and get her back to normal. Her pulse returns to normal and she seems more stable.*)

DOCTOR: *(to NURSE)* Get me those test results!

NURSE: They said they still haven’t gotten to the last of the results. Big backup.

DOCTOR: *(Strong)* You tell them to get them done!

(*The NURSE finishes up her phone call and nods to the DOCTOR.*)

DOCTOR: *(To DAVID and ASTRID, who are still hugging, ASTRID softly crying.)* She’s stable again. We’ll keep an eye on her. I’m sorry. We need time to figure out what’s wrong.

DAVID: It’s okay, as long as she’s okay.

DOCTOR: The blood could just be from damage. It could also be an ulcer, so we’re going to start treating her for that as well.

ASTRID: *(breaking away from DAVID)* Thank you.

DOCTOR: Of course. I’ll be back soon. You both should probably wait outside until we get back.

(*The DOCTOR leaves, and the NURSE finishes up what she is doing, then exits. DAVID and ASTRID exit into the hall.*)

DAVID: I…I need to get out of here. At least for a little while. I don’t live far.

ASTRID: Are you just going to shower and change and then come back?

DAVID: *(nods)* Yeah, I won’t be long.
ASTRID: (nods and goes for another hug, which DAVID grants her. She looks up at him.) I’m sorry.

DAVID: I won’t be long.

(DAVID exits and ASTRID sits down. She rubs her eyes and looks at her watch. The NURSE walks back in.)

NURSE: I’m sorry, I just forgot some things. Did Mr. Cohen leave?

ASTRID: Yes, he went home to shower and change.

NURSE: Yeah. He’s been here for a very long time.

(ASTRID nods and goes to her magazine, the NURSE picks up her things and eyes ASTRID.)

NURSE: (Sheepishly) I...I loved your book.

ASTRID: (looking up lovingly) You mentioned that earlier. Thank you.

NURSE: Yeah. Your story inspired me to become a nurse. I was young when I read it, 12 or 13 maybe.

ASTRID: (looking over to EMMY) She was barely a year old when I was diagnosed. She doesn’t remember much.

NURSE: Are you still clear?

ASTRID: (pausing) Crystal. I get checked every six months.

NURSE: Good, I’m really glad. Can I ask you something?

ASTRID: Sure.

NURSE: How did you deal with all the attention? I mean, the interviews, the book, the Lifetime movie. I would be terrified with all the fame.

ASTRID: I wouldn’t call it fame.

NURSE: I’m sorry. I should go. You must--

ASTRID: (interrupting) It kept me going...I loved it. Now, I’m bargain table at Barnes and Noble.
NURSE: *(looking puzzled)* Isn’t that a good thing?

ASTRID: *(pauses for a long time)* Of course. A great thing. All good things come to an end. I’m just happy to be alive.

NURSE: *(confused)* I should leave you be. Have a good night, Astrid.

ASTRID: You as well, dear.

*(Fade)*
Scene Eight

(DAVID enters with fresh clothes. Coffee in hand, he walks into the silent early morning of the hospital. It is early. DAVID takes a sip of his coffee and sits on the bench outside the hospital, it’s freezing, but the air is calming to him.)

(Light shifts into memory. Two figures appear to DAVID.)

(Sound and music swell, much like the beginning. The memory becomes distorted, fades.)

(DAVID is left slumped on the bench as the memory fades. He wipes his hand over his eyes. He pulls out his phone and makes a call.)

DAVID: Dad? Yeah, hi. Everything is okay for now. She’s resting. Don’t you ever sleep in? No…no, I didn’t think so. They still don't know what it is… all kinds of tests, yeah. I think she’ll be okay, she just needs rest...What? Yeah, of course she’s here. I’ll be fine. It’s not about me. Yes, of course Dad. Maybe around noon?

(Enter ASTRID, who looks on quietly)

DAVID: Okay, Dad, well I just wanted to check in. Yeah...yeah of course. I’m okay, Dad. Hey, Dad? I love you. Take care.

ASTRID: Hey, feel better?

DAVID: Yeah...yeah I do. How is she doing?

ASTRID: She’s doing better. She woke up and was confused about where she was. The nurse said it is common in these types of situations. She should be okay. Why did you have to leave?

DAVID: I had to get stable ground beneath my feet again. After seeing Emmy like that, I had to leave for a bit once I knew she was stable. Too many things came back to me in there.

ASTRID: I know. This is never going to be easy.

DAVID: Remember when Emmy was born?

ASTRID: Of course I do.

DAVID: I never wanted kids. Did you know that? I thought I would go my whole life without being a father. I saw how much it took out of my dad, and I didn’t want to go through that. The diapers, the feeding, the looks people give when you wrangle three toddlers in the supermarket. It’s a sad existence, when you really think about it. It was one sided. You give
all your time, all of your heart to a small person you created with someone else you try to give all of your heart to. You are left with nothing.

**ASTRID:** David…

**DAVID:** Never in my life did I want to have that happen to me. And never in my life have I been more wrong than I was with those assumptions. When Emmy was born, I knew that she was going to be the most important person who has ever lived. I knew that I personally would never create something so perfect, so innocent. Emilia Grace Cohen is an angel, my little cherub. I would start wars and burn cities to the ground to protect her. I am her father. She has my heart. That’s what I see when I look at that hospital bed. My little cherub holding my heart. I had to leave to make sure I could still have a pulse with her little hands letting go of me. I needed to make sure I could survive.

*(There is a long pause. ASTRID turns DAVID’s face towards hers.)*

**ASTRID:** I love you, David.

**DAVID:** (looks straight into ASTRID’s eyes) You don’t get to tell me that.

**ASTRID:** Excuse me?

**DAVID:** You don’t get to say that to me.

**ASTRID:** You don’t believe me.

**DAVID:** (shifts in his seat) Do you like doing this?

**ASTRID:** Doing what?

**DAVID:** I tried so hard to protect you from the world. When you got sick, I hoped that I could pull it out of you and throw it in the trash. I gave up years for you. Then you lied. You needed to leave. Now you say you love me?

**ASTRID:** I am sorry for everything that I did to you. But please, do not diminish my feelings and the things that I went through. I got sick and you--

**DAVID:** Oh spare me! I didn’t need to write a book about my wife’s miraculous recovery. I didn’t have to plaster my face all over daytime television with my encouraging words of perseverance.

**ASTRID:** You’re wrong David. You don’t get to tell me these things because you didn’t go through what I did. As much as you feel martyred because you had to sit and wait on the sidelines while people looked to me for inspiration that does not give you the right to pretend
like my life being saved is worth nothing. (*starts to gather things*) You clearly need more time alone, so--

**DAVID:** I want to know why. Tell me why!

**ASTRID:** I am through telling you anything! I need to check on Emmy. Despite what you keep insinuating, our daughter being sick is actually not about us. It’s not about you.

**DAVID:** About me?!

**ASTRID:** You know? I really am not surprised now that Emmy wants to live with you. The picture you must paint of me over there. I am not here to even acknowledge your claims, but just to see if you were okay. But now I know that you never will be. And I am sorry for that. But I will be damned if you do anything to hurt my daughter again.

**DAVID:** Well maybe I am not the one hurting her this time…

**ASTRID:** (*storms towards DAVID*) You shut your fucking mouth! That is my daughter! How could you possibly accuse me of…? You know what, David? You aren’t the only one who gave your heart to that child. If anything happened to her...that would be it for me. I’m going upstairs to see her, and I’ll give you time. Just give me a couple minutes. Please, just give me that much.

**DAVID:** I’ll go up there in fifteen minutes.

**ASTRID:** Thank you. David? (*pause*) You really didn’t want kids?

**DAVID:** No. I only wanted Emmy. Because she’d be ours.

(*ASTRID walks off into the hospital. DAVID sits again on the bench. Fade out.*)
Scene Nine

(When DAVID enters the room, the lamp by the bed is on, EMMY is awake and reading a book.)

DAVID: Hey, cutie. I’m glad you’re awake.

EMMY: Mhm, I slept a lot.

DAVID: Yeah you did, it’s good for you though. How are you feeling?

EMMY: I’m okay.

DAVID: Good. What are you reading?

EMMY: (puts down the book and picks up the TV remote) Nothing good. Mom thought I would like it.

DAVID: Did Mom say where she was going?

EMMY: No, when I woke up, she told me she had to run home for a while. Are your clothes different?

DAVID: Yeah, I was kind of stale. I didn’t want to stink up the room. The hospital gave me a change of clothes.

(There is a long pause between them, EMMY stares straight ahead at the TV and DAVID looks over his shoulder at it, while stroking EMMY’s hair.)

EMMY: (softly) Dad?

DAVID: (looking back from the TV) Yes?

EMMY: (choked) Are things going to be okay?

DAVID: Emmy, that’s nothing you have to worry about.

EMMY: Because I just want things to be okay. And if I go away, I want things to...to-

DAVID: (starts holding EMMY) Emmy! No no no, you’re going to be fine. Everything will be okay. The doctor will be in here in a soon to tell us that everything will be alright. I promise you.

EMMY: I don’t want to die.
DAVID: (straightens up) And you won’t. You won’t.

EMMY: Okay Dad, I believe you.

DAVID: Emmy, where did all of this come from?

EMMY: I don’t know. I had a dream that I saw Papa, and Grandma, and Aunt Liz. They wanted me to know that they would be there. It...it was scary, I guess.

DAVID: Yeah, I have dreams like that too sometimes. It’s just like a guardian angel. Letting you know everything will be better soon.

EMMY: I love you.

DAVID: I love you, Em.

(They both sit together, finally able to breathe.)

(Lights shift to the memory. Only one figure appears, acts out memory. Second figure looks on from the side. They come together, and the two figures mirror DAVID and EMMY embracing each other. Memory plays out. Dissolves. All hospital sounds dissipate and all that exists is a father with his angel.)

(Slip back into reality. Hospital machines start up again.)

DAVID: I’m so sorry.

(Fade)
Scene Ten

(Lights up on the same hospital scene of the first act. EMMY is in bed. She is half awake, and light beeps can be heard from the machines in the room. DAVID is sitting in a chair near her bed. ASTRID strolls in with a small box.)

DAVID: (To EMMY) Hey. I’m going to run to the bathroom. I’ll be right back, don’t worry.

(DAVID exits.)

ASTRID: By the way Emmy, I brought your dolls. I thought you might want them in case you were getting bored.

EMMY: No, Dad has been keeping me company.

ASTRID: Wouldn’t you want to play with them, maybe with your father and I? Or you could put on a little show?

EMMY: Mom, I haven’t played with those in years. I can see the dust on them from here.

ASTRID: Oh, come on, Em. (With quiet excitement.) You had fun with these!

EMMY: When I was six. I like just sitting with Dad.

ASTRID: Alright. I’ll keep them here just in case. (ASTRID sets the shoe box under the bed, and rests a hand on EMMY’S head.) I hope you won’t have to stay here much longer. It’s hard to see you in this bed like this. You should be up and active.

EMMY: I don’t really feel like being active right now.

ASTRID: I know. It’s okay don’t rush yourself. You need the rest. I just mean I’d rather you not be in here, not because it’s something you did, but because you deserve some fun and freedom.

EMMY: I get what you mean.

ASTRID: Good. (ASTRID hesitates.) Emmy, do you want to live with Dad?

EMMY: Of course! Does he not want me to come over anymore?

ASTRID: No, no! Of course not. Your father loves you very much. It’s just that I feel so much… I feel like I wasn’t there. You’re going to grow up soon and it’ll happen so fast. A childhood only happens once, and I wasn’t there. I mean I was, but I wasn’t there for you. I feel like I don’t see you.
EMMY: What are you talking about? I’m right here.

ASTRID: No, I mean when you’re at home. And I know, I know. But it feels like, it feels like- I was trying to gather my thoughts in my car but I’m just struggling so hard to say what I want to say. Without blaming you. It’s so difficult, but I feel like I’ve been missing out. And I feel like I’m still missing out. But I don’t know what to do. There’s already been so much damage. And when I try to fix what I’ve done I only push away farther. I feel like I’m just rambling at this point.

EMMY: No Mom, it’s okay. I understand what you’re trying to say. But maybe you’re just trying too hard. I mean, it’s just like when I go home over the summer from school, and I can’t see my friends. I can’t see them, I can’t talk to them. All I can do is just wait for them to get back. And even if they don’t remember that we’re friends, I still like them, right? So I don’t try and make them sit with me, or follow them around. I just try to be their friend. I care about them, so I just try and care about them. If they don’t want to talk to me, then there’s nothing I can do, but that’s not how they are. It just makes sense, right? We don’t have to try, it just happens because we care about each other.

ASTRID: I don’t know where you get this from. You’re so much older than I remember.

EMMY: What was the question again?

ASTRID: It’s not important. All that matters is that I love you, and I’m going to try harder. Okay?

(DAVID has returned, he looks relieved.)

DAVID: What was in that box you had?

(ASTRID picks up one of the dolls from under the hospital bed and hands it to DAVID)

DAVID: Oh, these! I’ve been looking for these forever. Emmy, do you remember these? God, it’s been so long.

ASTRID: It really has.

(Lights shift to reflect internal thought. ASTRID, DAVID and EMMY are now in a memory. They are all holding different puppets. In reality, DAVID and ASTRID are replaced by their emotional doubles.)

EMMY: I’m the smartest girl in all the kingdom. You can’t even see me I’m so smart!

DAVID: Oh yeah? Well, I got up early today, so your magic won’t work on me!
EMMY: Now I have to get away!

ASTRID: Please be careful!

EMMY: Daddy, daddy!

DAVID: (DAVID has picked up EMMY.) What? Doesn’t the Princess get to fly here?

EMMY: But you’re still the bird! The bird can’t catch the Princess. That’s not how it works.

DAVID: But then how is the Princess supposed to fly? (DAVID has set EMMY down.)

EMMY: She gets lifted up by the Cats broom!

ASTRID: (Realizing it is her cue) Oh, is this where I’m supposed to come in?

(ASTRID picks up EMMY and her puppet. However ASTRID does this is the correct way to carry EMMY, as no matter what height is reached, EMMY will not be satisfied.)

EMMY: Higher, Higher!

(The lights shift again to return EMMY, ASTRID, and DAVID to their places in the hospital. ASTRID silently leaves in a light hurry. DAVID and EMMY acknowledge her exit, but do nothing.)

(Lights fade)
Scene Eleven

(Lights up on EMMY, asleep, and DAVID at her bedside. The NURSE enters shortly after.)

NURSE: Oh, Mr. Cohen, has Astrid gotten back yet? We were supposed to talk when she did.

DAVID: She had to step out. Astrid wasn’t feeling herself. I think it was her anxiety getting to her. Is there something you needed to ask her?

NURSE: I just wanted to talk with her.

DAVID: If you have some question about Emmy’s health, I’m sure that I could try to fill in the blanks while she gathers herself.

NURSE: No, it wasn’t about Emmy, it’s just personal things.

DAVID: I’m sure I could tell you about her if you wanted.

NURSE: Mr. Cohen-

DAVID: I’d probably be a more reliable narrator of her life than she is.

NURSE: Mr. Cohen!

DAVID: You should get back to your job.

NURSE: Emmy is asleep. There’s nothing more that we can do.

DAVID: I’m sorry.

NURSE: If you’re truly worried about your daughter right now, or at any time, you know you can always call for us?

DAVID: Yes. I know.

NURSE: Is there something you need us to check up on?

DAVID: No, no. It’s alright.

NURSE: If everything is okay, then why the hostility? Mr. Cohen? We’re trying our best.

DAVID: I know, I know. I appreciate it. I don’t mean to be angry. I try to control it. Really, I do. It’s something that I’ve worked on for a long time.
NURSE: Is this something that you have dealt with for a while?

DAVID: Yes, for the last couple years. Ever since Emmy was born

NURSE: (The NURSE pages the DOCTOR silently.) Mr. Cohen, if you don’t mind, I would actually like to ask you some questions.

DAVID: Oh, yes. What about?

NURSE: Please keep in mind these questions are to ask for the safety of your daughter. Before you and your wife had your divorce, was there anything unsafe in the house?

DAVID: You mean medically? No, nothing outside of regular medication for Astrid, or anything else you’d normally find. Over the counter stuff.

NURSE: No, I mean, were there any violent tendencies?

DAVID: How do you mean?

NURSE: Mr. Cohen, this is purely confidential, we need to know if there was ever any violence towards Emmy in the house.


NURSE: Alright. I’ll ask Astrid as well, but I trust you. I only asked because it seemed like it was a possibility. We can’t be too careful.

DAVID: What do you mean by that? You can’t possibly accuse me of--

NURSE: Mr. Cohen, please. I am not accusing you. We just have to check on all options. You know?

DAVID: No I don’t. Enlighten me.

NURSE: Well, fathers usually --

(The DOCTOR enters, cutting her off.)

NURSE: These kinds of situations…we need to be aware of them.

(The Doctor gathers information from the situation.)

DOCTOR: Yes, of course. I’m only just catching the end of this, I apologize, but if there is anything you can tell us, Mr. Cohen, please be honest with us. It’s for your daughter.
DAVID: *(growing in intensity)* I would never do anything like that. This is my daughter. There were times when I would get angry in the house. I was searching for answers, and I would get a little loud at times. But it wasn’t ever directed towards Emmy. She wasn’t even around when it happened. She couldn’t even remember it if she was. It was too long ago for her to remember. It was terrible. There was such a blind rage behind it. I was so angry about what was happening to Astrid, what she did to me and I... *(DAVID pauses.)* That isn’t who I am. My life and my family won’t be controlled by my emotions. I’m stronger than that.

NURSE: Do you feel better Mr. Cohen?

DAVID: I do. But I am not in here for a therapy session. With all due respect.

DOCTOR: Thank you, David.

*(ASTRID enters, carrying a planner filled with sticky notes. The NURSE goes to speak to her, but changes her mind. The NURSE instead grabs the chart for EMMY, and motions the DOCTOR to come with her.)*

*(The NURSE and DOCTOR exit.)*

*(ASTRID places a hand on EMMY’S bed and DAVID looks up from his chair.)*

*(Lights shift to reflect internal thought.)*

*(The characters representing DAVID represents the emotions of lacking use of his arms. The character representing ASTRID represents the emotions of lacking a voice.)*

*(Lights shift back to return the scene to normal. The characters representing DAVID and ASTRID’S emotions exit.)*
Scene Twelve

(A small amount of time has passed during the moment of internal thought. EMMY has shifted in her bed. She is still asleep, but is now uncomfortable. DAVID is seated. ASTRID is sitting with a planner filled with sticky notes.)

ASTRID: I’m sorry that I had to leave. I just about lost my skin.

DAVID: You don’t need to worry about it.

ASTRID: Is it alright if we don’t talk about it?

DAVID: Sure thing.

ASTRID: Thank you. How’s Emmy?

DAVID: Doing the same. She really wants to get out of here.

ASTRID: (After a pause) I overheard shouting a moment ago.

DAVID: Oh.

ASTRID: Did something happen while I was gone?

DAVID: No, well, I mean-

ASTRID: I’m sorry if it’s too personal, but I think in this case I should know.

DAVID: No, it’s not like that. I was being defensive, and I lost control for a moment. We talked, the nurse and me. They were concerned that I had possibly abused Emmy as a child.

(ASTRID sits next to DAVID.)

ASTRID: Oh, David. You shouldn’t have to feel that way. No, no. You’ve always been a great father. Please don’t feel that way.

DAVID: It just makes me worried. I don’t know how, but there’s just a part of me now that thinks I could have been hurting Emmy. What if there’s something I don’t remember?

ASTRID: But there isn’t. You’re supportive, you’re conscious, you have foresight, and you’ve never hurt Emmy. We would know if you did.

DAVID: I shouldn’t even have to think about this. It shouldn’t be possible. You know those moments, where you can visibly see hesitation when you ask a question? Even if what the person tells is the truth, the hesitation should be sign enough that there’s something wrong.
Or maybe I’m wrong. Maybe it’s just bias that’s making me think this. I want to find an answer as soon as possible, so anything that looks like an answer…. 

(ASTRID has taken DAVID’s hand) 

ASTRID: You can’t doubt yourself. What you know is what is real. There aren’t any in-betweens.  

DAVID: Please don’t.  

(DAVID has put down ASTRID’S hand.)  

ASTRID: David.  

DAVID: I’m sorry. I know you are trying to help. That’s just one road we cannot go down.  

(ASTRID gets up silently.)  

(Lights shift to represent internal thought.)  

(The new scene of internal thought is of a memory. It is of ASTRID and DAVID shortly after ASTRID’S cancer recovery process.)  

DAVID: I think I need to go with you.  

ASTRID: You don’t think you’re being the least bit unfair?  

DAVID: I’m not! There’s so much out of my hands though. I thought that we agreed that this was going to be a recovery process that involved both of us. Aren’t we a team? You can’t just leave Emmy and me alone. We need to walk with you.  

ASTRID: Maybe things have changed.  

DAVID: I just don’t think you should be spending so much alone time with this doctor.  

ASTRID: What’s wrong? Don’t say that you’re jealous.  

DAVID: Okay, I’m jealous. But don’t I have some right to be? Even as a person?  

ASTRID: I think you might be a little out of your mind.  

DAVID: Astrid, please. Talk to me. I need answers. You can’t just keep leaving me in the dark like this.
ASTRID: You’re not in my shoes, David. You’re not the one that has to experience something like this. (ASTRID derails her thought, sees David’s expression) That’s not what I meant. I...look. It’s my recovery. This is my body not yours. You have to let me deal with this in my way.

DAVID: I understand, but shouldn’t your health mean something to me? Shouldn’t your life mean something to me?

EMMY: (From Reality) Dad?

ASTRID: You just don’t understand what’s going on, David.

DOCTOR: (Also calling from reality.) David?!

(Lights shift back to reality. DAVID returns to his original position, while ASTRID is having a panic attack. EMMY is now seizing on the hospital bed.)

DOCTOR: (To the NURSE) Keep her on her side. Time this!

DAVID: What’s happening? What went wrong? She’s just been sitting here.

(DAVID rushes to the bed.)

NURSE: Emmy’s having a seizure. (To the DOCTOR) Help me keep her airways open.

DAVID: From what?

DOCTOR: We don’t know.

ASTRID: I can’t take it!

(ASTRID exits.)

DAVID: Why can’t you figure this out?

DOCTOR: Calm down, Mr. Cohen.

NURSE: I can call in the Neurologist.

DOCTOR: We’ll have to do the best we can until he gets here.

NURSE: David, I need you to hold up Emmy on her side so she doesn’t bite her tongue.

(DAVID takes the NURSE’S place at the side of the bed.)
(The NURSE exits.)

DAVID: God...I don’t... I don’t know what to do. Please! Please give me some sign that she’s okay. Tell me that my baby is okay. I just want her to be okay. I’ll give anything. Just let me know something. Anything...

(EMMY has now stopped. This only upsets DAVID more and he breaks down at the side of the bed. The NURSE comes to his side and takes his hand and gives DAVID a hug.)

NURSE: David, can I send someone to get you a bottle of water?

(DAVID inaudibly declines.)

DOCTOR: Alright, David. We have to take Emmy down to radiology to get a CT Scan. We need to find the source of the seizures, and see whether this is still a virus or something neurological. We cannot rule out any possible damage that might have taken place. I have to attend another call, so I will check back later. But you have to pay attention, I don’t know what would have happened if your wife hadn’t been here to call us down.

DAVID: Can’t you stay with her in case something happens?

DOCTOR: You need to understand, there are other patients in this hospital. We’re short staffed. Other children need care as well. We need your help to help Emmy. Can you do that for me, David?

DAVID: I can give a shit about other people in this hospital! I don’t have a choice. Why isn’t she better? Is she going to wake up?

(The NURSE enters with ASTRID, guiding her back to the room.)

DOCTOR: David! We are doing all we can. She will be in the best hands.

ASTRID: I’m back.

NURSE: Doctor, we have to go.

DAVID: It’s okay. I’m fine.

ASTRID: I’m here.

DOCTOR: We’ll be back in a short while. Please take care of yourselves.

(The NURSE and DOCTOR exit.)

(ASTRID and DAVID look at each other. Lights fade.)
Scene Thirteen

(ASTRID and DAVID are sitting on opposite sides of the room. DAVID has no expression at this point. ASTRID is looking through her planner again. ASTRID tries to say something, but is hesitant.)

ASTRID: (With fear and hesitation) David, I need to talk.

DAVID: I don’t really feel like talking. (DAVID adjusts his chair.)

ASTRID: No, I really need to talk.

DAVID: Please.

ASTRID: Please, David.

DAVID: (DAVID shifts his chair forward.) What is it?

(DAVID looks at ASTRID, not understanding. DAVID shifts his chair forward again.)

ASTRID: Just talk. I can’t just sit here in silence anymore. It doesn’t matter. I’ll talk about anything just to stop it.

DAVID: Alright. How has adjusting been since you got back? I don’t really know what-

ASTRID: It’s been okay. I haven’t had too much going on. (ASTRID sets down her planner.) It’s definitely been a struggle to find myself again.

DAVID: I can understand that. It’s not easy to get up and be gone for so long.

ASTRID: And with trying to find all my old friends. It’s not like things ended badly but it’s still so complicated. There was no way stay in touch. Cell phones, all the traveling, and long distance. I feel like I never saw Emmy.

DAVID: That’s okay. That’s the way things were.

(DAVID shifts his chair forward again.)

ASTRID: That doesn’t change the way it made me feel. I felt a little alone on the road.

DAVID: But you were presenting. You were talking to people. I don’t understand.

ASTRID: It just felt a little empty.

DAVID: Don’t say that.
ASTRID: The focus was very, very wide. It felt like people were kind of looking past me when they were looking up to me.

DAVID: What are you doing?

ASTRID: It was like I wasn’t there. They treated the event like it was a huge deal. But I didn’t feel like they cared about me.

(DAVID shifts his chair forward. He is now close to ASTRID on the stage.)

DAVID: Maybe it was because they thought that there was a hope for a better cure? I mean, I still don’t buy it but-

ASTRID: No, it wasn’t that. It was that I felt like people didn’t care about how I felt. How much was taken out of me.

DAVID: Would you stop that, please? And besides that, doesn’t it matter that people were becoming hopeful for their own futures, and for their families future?

ASTRID: This was during my recovery, David. This was part of my recovery. I was just barely in charge of my faculties when they asked me to present.

DAVID: Yeah, but you were also writing a book. (DAVID leans forward on his chair.) Don’t you think that opening up to press release kind of incited their questions? You also didn’t have to go with them. You didn’t have to leave.

ASTRID: It wasn’t about leaving. I was fine with going out and helping people. There is a present need to help people in the world. But I thought they’d be helping me too. Supporting me, and asking how I survived. How I triumphed.

DAVID: How you were a miracle.

ASTRID: I’m sorry.

DAVID: No, it’s alright.

ASTRID: I just wish it had gone differently. There were a lot of different ways it could have gone, and I watched them go by. I watched them.

DAVID: It’s alright. It was a fast time for everyone involved. No one should blame you.

ASTRID: Thank you, David. I feel like because of you and Emmy, things worked out. I survived because of you two.
DAVID: Astrid, what if I hadn’t been there?

ASTRID: I suppose things could have carried on.

DAVID: (DAVID leans back in his chair.) I shouldn’t have said that. I don’t mean that.

ASTRID: It’s okay. You shouldn’t be blamed for being afraid. It was something you were rushed in to.

DAVID: No, no. It wasn’t something I was rushed into. It was something that was meant to be in my life. And if you hadn’t been there, my life wouldn’t be the way it is. (pause) Astrid, I’m sorry.

ASTRID: I hurt you.

DAVID: I never made it easy for you. I was always unhappy, even when I wasn’t supposed to be. I drove you away. You needed me, and I was there. But the whole time I was there, I kept feeling like you would owe me something in return.

ASTRID: You don’t have to do this

DAVID: I just...I loved you. I needed you so much, and I pushed you from me. You got sick and I pushed you away. I couldn’t stand to have a piece of me die, so I pushed you away. Once you left, there was only Emmy. That’s it. Even though you got better, I still lost you all over.

ASTRID: David. I love you.

DAVID: I love you. That isn’t lost.

ASTRID: It’s not?

DAVID: I want you to know.

(NURSE enters)

NURSE: Mr. and Mrs. Cohen. We have some news about Emmy.

ASTRID: Is she going to be okay?

NURSE: She has suffered some head trauma from the seizures. She is in a state at the moment like a deep sleep, but not a coma. She needs all the rest she can get from her trauma.

DAVID: How could this have happened?
NURSE: That is what we are trying to figure out. The seizures came on so suddenly. Luckily, we have not seen another one since before her scan.

ASTRID: So she’ll be okay?

NURSE: As of now, she is doing better. (pause) There are a few things I would like to discuss with the two of you.

ASTRID: What things?

NURSE: Have you two made any plans for the possibility of –

DAVID: (coming to) No. That’s not an option.

NURSE: We just advise that families be prepared for any and all possibilities. I know this is not easy for either one of you. Especially considering all of the heartache your family has already been through. We will do all that we can for Emmy. I will inform you of any other details. In the meantime, think about what I said. And hang in there.

(NURSE exits. DAVID retreats to a chair.)

ASTRID: (clutching book) What did we do? Why did we deserve all of this?

DAVID: It can’t happen. There isn’t a chance.

ASTRID: We tried to fill the house with so much love. And all that has come our way is…breaking.

DAVID: They must have run a test wrong. Emmy always was a heavy sleeper. It was probably something genetic that she grew into. My uncle used to have seizures all the time. Maybe it’s genetic.

ASTRID: I prayed so much. I tried to make it better for all of us. I tried. Goddammit!

(ASTRID throws the book, and falls to the floor. DAVID rushes to her.)

DAVID: Hey! She is going to be fine. We didn’t do this.

ASTRID: We can’t lose her, David. It can’t happen.

DAVID: It won’t happen! Whatever happens, we will face it together.

ASTRID: David…
**DAVID:** *(embraces ASTRID on the ground)* Just like we always have. She has to be okay. Our Emmy wouldn’t let something like this get her. Remember when she was a toddler? She had us running from the monsters while she wanted to chase them out of the room herself.

**ASTRID:** She always wanted to show us that no one had anything to be afraid of.

**DAVID:** And we don’t, Astrid. Not a thing.

*(DAVID and ASTRID melt into one another the way they used to.)*

*(Lights fade.)*
Scene Fourteen

(Lights up on DAVID and ASTRID embracing a small bundle representing Emmy. This scene is in reflection.)

DAVID: Astrid, I love you so much. We did it! I mean…

ASTRID: *(holding the bundle)* That’s right. Do you want to hold her?

DAVID: Really?

ASTRID: You’re Dad, now. You should probably get used to it.

*(DAVID embraces the bundle sheepishly.)*

DAVID: Oh my god.

ASTRID: David, we did it.

DAVID: Oh my god!

*(Lights shift. The Two Figures enter and mirror DAVID and ASTRID in the memory. DAVID is lost in the moment. The larger figure takes the bundle from his hands gently and lays it down on the bed. The music from earlier swells, this time with more sincerity, no chaos. This is the best moment of DAVID’s life.)*

*(All of these following lines exist within the sound cue, similar to the beginning of the show. The sincerity soon decays into chaos. DAVID is stationary. His expression turns from bliss to stagnation, staring out at his heart.)*

ASTRID: David. David, Emmy isn’t breathing.

DAVID: Oh my god.

ASTRID: David, get the Doctor.

ASTRID: Emmy. Emmy, you need to wake up. This isn’t the time to joke around. *(Calling after DAVID.)* David, please hurry!

NURSE: Time of death, 6:37 PM.

ASTRID: It’s all over. There’s nothing left.
(The lights fade back to reality. The DOCTOR and NURSE enter together. The bed is empty, only Emmy’s things remain.)

**DOCTOR:** I am so sorry for your loss. Astrid is downstairs, whenever you are ready.

**NURSE:** We’ll leave you to have your time to collect her things. Please take as long as you need.

(The DOCTOR and NURSE exit.)

(DAVID kneels at the side of the now empty bed. He has no more tears left. DAVID picks up the shoe box containing the puppets. As he rises, he picks up a single doll from the box, and rests the box on the bed.)

(DAVID then sets the doll back into the box, ready to leave, but in this process, DAVID discovers a red bottle of pills. DAVID realizes the truth.)

(Lights fade.)

**End of Show**