

# Mental Illness Reflected in Sarah Kane's 4.48 Psychosis

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**Abstract:** *4.48 psychosis in many respects, is believed to be a personal story, arising from Sarah's melancholy and sadness, as well as the therapy she received. Kane had abandoned the concept of character here, and she conveyed the phrases only through hyphens. The dialogue/monologue progressed from declarations of love and devotion to an explanation of the medicine administered to the mentally sick and depressed patient. 4.48 Psychosis is an insight and comprehension into the mind of a mentally ill person, implying that the borders between imagination and reality, sanity and insanity, should be investigated.*

**Keywords:** Sarah Kane, Mental Illness, 4.48 Psychosis

## 1. Introduction

"After 4.48 I shall not speak again"

-Sarah Kane, *4.48 Psychosis*

Sarah Kane (1971-1999), a British playwright, is a cornerstone of In-yer-Face Theater. Kane's plays were known for their controversial and antagonistic subject matter. Kane's *4.48 Psychosis* was seen via lens of mental illness, linking the illness to postmodern experience, relational cruelty, and violence. Throughout the play there can be seen a person who has no definite gender in psychiatry talking to the doctor and sometimes to a lover who occasionally merge into one individual. The character might be schizophrenic and sees all these identities (Stoller, 2016).

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Intimate discussions on losing love, losing hope, body-mind conflict, medicine, suicide, and a variety of other topics arose as a result of discussing this play. Many created works combine theater with movement, dance, or other performance elements to provide a more immersive experience (Oddey, 1994) We could make anything with this freedom. The aim was to spread the message of Sarah Kane's *4.48 Psychosis*, a narrative about finding acceptance for individuals who are mentally ill. The drama includes themes of mental illness, including despair, schizophrenia, and even suicide, as well as themes of hope, acceptance, and discovery.

Although her mental condition undoubtedly affected her artistic work, it is clear how much of it was personal. In her work, what is the message she is attempting to communicate regarding mental illness? Mental health education is insufficiently strong and accessible across the world, in part because mental health is misunderstood. Mental illness is also a socially taboo subject, and many people avoid discussing it. We can learn more about mental illness by studying Kane's work: how to treat it, what it's like to live with it, and how to de-stigmatize individuals who suffer from it.

The play's title "*4.48 Psychosis*" comes from Kane's habit of waking up at 4:48 a.m. and experiencing her most depressed symptoms. In the play, the primary speaker says, "At 4.48 when depression visits I shall hang myself to the sound of my lover's breathing" (1. 4) and again on page 7, "After 4.48 I shall not speak again" (1. 7). Psychosis is the label given to the symptoms of a disease, not the disease itself. As a result, the term "psychosis" can apply to the symptoms of mental disorders like schizophrenia. Psychosis can cause hallucinations, delusions, and other symptoms and "lost contact with reality" (Stoller, 2016).

Deficit of speech, incoherent speech, rapid and frenzied speaking, disorganized behavior, aggression, hostility, belief that one's thoughts aren't one's own, disorientation, suicidal thoughts, unwanted thoughts, anger, anxiety, apathy, excitement, feeling detached from one's self, general discontent, and a limited range of emotions are all common symptoms of psychosis. Schizoaffective Disorder (SAD) is a mental illness that affects people. From an autobiographical viewpoint; these traits are present in *4.48 Psychosis*, allowing Kane's condition to be examined via her writing. (Berger, 2016).

There are no characters, no stage directions, and no discernible narrative. There is no initiating act, no trigger for the play's conclusion, and no hurdles erected by an enraged opponent.

The script is written in the form of poetry and is intended for a theatrical setting. As though Kane's ideas had poured onto the paper, the play just exists. Her play is fragmented in thinking, much like her sickness made her impetuous. It feels like it may erupt at any time. Kane once said, "I frequently walk out of the theatre early without fear of missing anything. But however bad I've felt, I've never left a football match early, because you never know when a miracle might occur" (Singer, 2004).

Kane is addressing the importance of adventure and excitement in the theater, which we see her actively demonstrate in her writing using literary approaches, as well as the piece's interpretative character. Kane's need for spontaneity propels her work forward, allowing her to create experimental theater based on her ever-changing thoughts. (Stoller, 2016).

Ken Urban wrote a study of Kane's work with the aim of reviving her plays and bringing them to a new audience. In "An Ethics of Catastrophe: The Theatre of Sarah Kane" for the *Performing Arts Journal*, Urban states, "Sarah Kane emerges as the most far-reaching experimentalist. Her plays use images and movement to re-imagine British stage. Her work lacks any pretense to authorial closure, for the directors, actors, and even the readers of her plays become integral parts of their meanings." Having read, collaborated on, and acted in her piece *4.48 Psychosis*, it can be found that Urban's statement is quite accurate (Urban, 2001, p 36-46).

The play's lyrical language and absence of traditional framework allow for interpretation rather than bias. Instead than imposing preconceptions on the audience, as most depictions of mental illness do, these open-ended traits allow for debate of the subject matter. Because tales are typically cleanly conveyed to the audience, the potential to challenge is lacking.

*Touched with Fire*, a book by Kay Jamison, explores the artistic temperament. To begin with, the phrase "artistic temperament" is significant since it detects a pattern in creative brains. Jamison says, "Depression affects not only mood but the nature of the content as well" (Jamison, 1993, p 21). She claims that mental disorders cause various moods, which might influence one's artistic nature. This might explain why so many artists, like van Gogh, Woolf, Plath, Tolstoy, and Hemingway, have suffered from mental illness and appeared to become insane "gone mad" throughout their careers. (Stoller, 2016).

Kane's *4.48 Psychosis* invites its audience to face their fear of mental illness with its interpretative text, non-traditional structure, and emotive language. Kane's work is not only well-crafted, but it is also grounded in reality based on her own life experiences. The play is full of complex, monologic sections addressing an anonymous doctor, and we can only assume that with Kane's sickness and personal past in mental hospitals, *4.48 Psychosis* must have a pervasive autobiographical aspect. For example, on page 4, we hear about

*Dr This and Dr That and Dr Whatsit who's just passing and thought he'd pop in to take the piss as well. Burning in a hot tunnel of dismay, my humiliation complete as I shake without reason and stumble over words and have nothing to say about my 'illness' which anyway amounts only to knowing that there's no point in anything because I'm going to die (1.4).*

These words may appear frightening, yet when brought to a stage, they educate and enable us to interact with others. Because mental health concerns are taboo and rarely discussed openly, bringing them to the forefront might initiate dialogues that otherwise would not have started.

We hear Kane in a less sad mood at the end of the piece, approaching hope. She communicates in pieces, and her objectives, aspirations, and innermost wishes are assumed. For instance, on page 24, she says, "To overcome weakness," "To belong," "to be accepted," and "to draw close and enjoyably reciprocate with another" (1. 24). Her use of fragmented phrases is a literary device that successfully conveys her point. Kane doesn't give us the entire context of her communications, but we're expected to figure out where she's getting at. This allows for a wide range of interpretations, giving viewers a sense of ownership over her work. Readers learn to identify with their own interpretations of Kane's words, which makes it easier for people who are unfamiliar with mental illness to connect. Patients are de-stigmatized as a result of this, because their sentiments are understood rather than feared. (Fawcett, 2016).

## 2. Conclusion

Any artistic depiction of mental illness is a kind of education. Kane's appeal is that she did not sugar-coat her condition, instead allowing us to see her in her natural state. We can't ask for much more as members of the audience. Kane demonstrates an active capacity to give a new perspective on these prevalent but quiet illnesses through the writing. Her use of emotive language, an unconventional style, and lyrical writing allow the audience and readers to empathize more broadly. Kane allows viewers the freedom to comprehend mental illness for themselves, rather than the prejudiced preconceptions promoted by conventional media, due to these characteristics.

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