

# whose life is it anyway?

education pack - part one

Sonia Friedman Productions and Mark Rubinstein  
present

Kim Cattrall  
in

# whose life is it anyway?

By  
Brian Clark

Directed by  
Peter Hall

with  
Ann Mitchell William Chubb Amita Dhiri Alexander Siddig  
Jotham Annan Rachel Bavidge Emma Lowndes  
and  
Janet Suzman

STRICTLY LIMITED SEASON FROM 7 JANUARY

Comedy Theatre

Portico Street, London E81

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# whose life is it anyway?

# background to the play

**Whose Life is it Anyway?** was author Brian Clark's first major play. Originally produced for television, the stage version premiered at the Mermaid Theatre in London in 1978. The play was originally written with a male central character, Ken Harrison, and in this first production, the part was played to great acclaim by **Tom Conti**. The play won the Society of West End Theatre's Best Play Award and The Evening Standard's Most Promising Playwright Award. It transferred to the Savoy Theatre before moving to Broadway the following year.

At this point Clark decided to rewrite the play for a female lead, named Claire Harrison, and it subsequently reopened on Broadway in 1979 with **Mary Tyler Moore** playing Claire. In 1981 the play was adapted for film, starring **Richard Dreyfuss** as Ken Harrison, giving it a circular journey from screen to stage and back again.

The version which is being produced for the West End stage in 2004/05 again tells sculptor Claire Harrison's story. Intelligent, sexy and talented, she is used to being in control of her life. Then a serious road accident forces her to contemplate a future in which she will remain constantly dependent on those around her. Left with only the use of her sharp mind, wit and indomitable spirit, Claire will not submit quietly to her fate. She can make us laugh, and often does. She could make us cry, but doesn't want to. What she does want is to be heard and to reclaim the decisions about her own life and death. **Whose Life is it Anyway?** places the individual at the centre of one of the most complex medical and moral issues of our times – do we have the right to decide how we want to live and when we want to die?

## this education pack

The information in this pack aims to enhance your visit to the play, whether you are a teacher, a student or an interested patron. It is available in two sections; the first covers the context for the play, and features an interview with Brian Clark, explores key themes in the play, and provides examples of real life situations for students to discuss. There are also suggestions for exercises and discussion points which link to the Citizenship curriculum at Key Stage 3 and 4, specifically:

- Knowledge and understanding about becoming informed citizens (the legal and human rights and responsibilities underpinning society, the diversity of the population and the need for mutual respect and understanding)
- Developing skills of enquiry and communication
- Developing skills of participation and responsible action (using one's imagination to consider other people's experiences)

(Source: National Curriculum)

Part 2 will be available in the New Year, once the production opens, and will focus on the production itself. It will feature interviews with cast members and the artistic team. Both parts of the pack are available free of charge to download.

# interview with brian clark



Brian Clark

Playwright and television dramatist Brian Clark made his reputation with **Whose Life Is It Anyway?** His other plays include **The Petition**, which opened on Broadway with **Jessica Tandy** and **Hume Cronyn** and which was subsequently directed at the National Theatre by Peter Hall in 1986, starring **Rosemary Harris** and **John Mills**. His other work includes **England's Ireland**, **Post Mortem**, **Kipling**, **Hopping to Byzantium** and most recently, **In Pursuit of Eve**. His writing for television includes **Late Starter**, **Telford's Change**, **Happy Returns** and **There's No Place**.

The following interview with Brian Clark took place in November 2004.

## Can you tell us something about the genesis of the play please?

Various incidents contributed to it forming in my head, but nothing specific. I didn't know someone who had been in this position. I had recently experienced the death of my mother, which had obviously affected me enormously, but in the late sixties and early seventies the idea of technological survival was a very hot topic. It was the idea that we could solve all our problems. And it made me think, 'well, what if not? Usually you can commit suicide but ... what if you can't?' I was driving to Manchester at the time, and it just clicked, and I thought 'I've got a fantastic play here!' The problem with plays is finding the reasons to get people to talk, but with this play, it struck me immediately that this character's voice would be their only weapon.

## The play was originally written for television, and then rewritten for theatre. Why did you make that transition?

I was a theatre person, but for lots of reasons it got sent to TV. At that time it was also much easier to get a play on television than on in the theatre; there were so many more slots on TV for one-off dramas. But it was rejected many times before finally being produced entirely by chance. It was a huge success in America, which led to a Chicago publisher suggesting I write a stage version, primarily for the amateur market, which is tremendously strong in the USA. It then happened that a London Theatre producer, Ray Cooney, was looking for a play, and was persuaded that **Whose Life is it Anyway?** was the right one to go for by his new Executive Producer. This resulted in the first production with **Tom Conti**, which was a huge success. However, the play never found a publisher despite this success, so I ended up self-publishing it. In fact, my press has published over a hundred plays now.

**What effect did the experience of seeing your first play given a major London production have on your writing? Did it seduce you back into theatre from TV?**

Well, actually I carried on writing mostly for television! Dennis Potter and I were very committed to the idea of TV being ‘the real national theatre’ and, as I mentioned before, there were so many more opportunities at that time. However, this did change very dramatically. Fewer slots were available, especially for single play slots. What I do love about theatre is that it is so collaborative. I like to be in rehearsals, and good directors want the writer there. I’ve never had a play which hasn’t improved in some way in rehearsal. It’s so important to recognise that directors have choices to make with your play, as do actors. The real key to creativity is selection and choice. They’re practically synonymous.

**Once you knew you had the germ of the play in your head, how did you approach the theme?**

The play is about claustrophobia. That’s its guiding metaphor. I’m not a claustrophobic but my nightmares have that feel to them, of not being able to move. That’s the psychological basis of the play, I suppose.

I’ve seen so many productions of this play, and the one thing that links them all is that people always say it makes them laugh. Well, it wouldn’t work if it didn’t. Although I did see a version in Gdansk in Poland at the time of Lech Walesa and Solidarity, where the audience just didn’t laugh at all. But what they had instead was a very powerful parallel between their society’s paralysis, and the main character’s, which made it very moving indeed.

Ultimately, this is a play about freedom, not death. It’s sad that this is her only route, but having the freedom to choose is what matters. Nothing is more important than that. And it’s not a grim play. It’s very life-affirming.

**How sure were you of your characters and their viewpoints when you started writing? I’m thinking in particular of Claire, Sister Anderson, Doctor Scott and Doctor Emerson.**

Some comes as you write. I’d been a patient, I’d checked the medicine out. Plays are often about the conflict of good and evil, but a much more powerful conflict is that of good and good. None of these characters is ‘bad’. It’s so painful because there’s no solution – other than her choice. Actually, I didn’t have a solution to the play when I started writing. I went to a lawyer and found out that the solution would take a year, which was too long. So I went away and thought about habeus corpus, which made sense to me, so I went back and used it. About three weeks before we opened, Ray Cooney asked me if it had ever been used in reality, which it hadn’t! We went and found a High Court judge and told him the story, and fortunately he concurred with my reasoning. Interestingly, it has been used since – but the first recorded use is in a play!



But to go back to the characters, I realised during the first production that there was a flaw. There is a law of theatre which says that whoever's funny is right... Just think of the fools in Shakespeare. But the play is one-sided in the original because the patient's wit overrides everyone else's. The antagonist is not as funny as the protagonist. The original portrayal of Emerson was very much of a consultant of the old school, button-hole and pin-stripe suit sort of thing. But in the new version he gives as good as he gets intellectually. He and Claire reach an intellectual impasse, and neither one really wins on that score. The film actually started the process of making him more human. The key to him is that he never gives up. As for Claire, well she's just the sort of person I most admire; strong, witty and knows what she wants.

### Why did you introduce the personal relationships between Kay and John, and Helen Hill and Dr. Scott, and yet not bring any of Claire's close family in to the play?

I wanted as much normality as possible, and it is highly likely that a young nurse and a young orderly would flirt with each other. It also heightens the loss of Claire's sexuality. Kay is sensitive to this, and for Dr. Scott, it's much more harrowing and adult. I didn't need Claire's family in the play; they would have cluttered it and made it too mawkish. It also emphasises her isolation. And we learn that she told her boyfriend not to come back anymore, which is another instance of her exercising the only power left to her – that of choice.

### Why did you decide to swap the gender of your main character?

When **Tom (Conti)** left to go to the US, I wanted to replace him with a woman. **Tom** always charms an audience, so I had to think very carefully about how to replace him, and I became quite passionate about the need to rewrite for a woman. But it was such a major change that people felt it was safer to continue as before, so **Bill Paterson** came in, and did an excellent job. But in America, **Tom** could only do 6 months because of the visa situation, and that was what enabled us to rewrite for **Mary Tyler Moore**. The scene which everyone was most worried about, funnily enough, was the breast scene, and all the 'money' came in to the rehearsal to watch! But seriously, a woman universalises the problem more for me. Women are so much more adept at coping than men, and Claire's decision is made all the more powerful because of this.

### Do you think this production is especially timely?

Even more timely, in as much as the techniques are even more advanced. There are more cases which capture the public interest as well, such as those of Diane Pretty and Miss B. One lost, one won. How does that make sense? More and more people are faced with this dilemma. The play raises consciousness. I have been asked to address medical and neuroscience conferences, to give papers stimulated by this play! The play also became a textbook in medical schools.

### Do you think disability is still a taboo issue in our society?

Less so, but yes. Particularly in relation to sex. Claire's body has been taken away from her, and yet it starts to take her over. She worries that she's become a sex obsessed old crone because her mind still desires whilst her body feels nothing, or has been made unavailable to her and others.

But generally, disability rights have come a long way though, and we are making enormous strides.

## so whose life is it?

The central debate of Brian Clark's play is whether Claire has the right to decide whether she lives or dies. This debate was a hot topic when the play was written, in the 1970s, and remains so today. The real life case of Diane Pretty illustrates the question very clearly.



### diane pretty 1959-2002

Diane Pretty was diagnosed with Motor Neurone Disease, a debilitating condition which affects the motor neurones in the brain and spinal cord. They are the nerve cells along which the brain sends instructions in the form of electrical impulses. Degeneration leads to weakness and wasting of muscles, and the condition is ultimately fatal. Like Claire Harrison, Diane Pretty had very strong feelings on her right to die as she chose to:

*“I am 43 years old. I desperately want a doctor to help me die. Motor Neurone disease has left my mind as sharp as ever, but it has gradually destroyed my muscles, making it hard for me to communicate with my family. It has left me in a wheelchair, catheterized and fed through a tube. I have fought against the disease for the last 2 years and have had all possible medical treatment.*

*I am fully aware of what the future holds and have decided to refuse artificial ventilation. Rather than die by choking or suffocation, I want a doctor to help me die when I am no longer able to communicate with my family and friends. I have discussed this with my husband of 25 years, Brian, who has come to terms with what I want and respects my decision.....*

*.... If I were physically able I could take my own life. That's not illegal. But because of the terrible nature of my illness I cannot take my own life – to carry out my wish I will need assistance. Should a doctor give me the assistance I need, he or she will be guilty of a crime that carries a lengthy prison sentence. As the law stands it makes no sense. The law needs changing so that I, and people like me, can choose how and when we die and not be forced to endure untold suffering for no reason”.*



## the law

Diane's case was the first of its kind brought under the **Human Rights Act**, which came into effect in October 2000. The argument rested on three key rights:

- Article 3 says it is everyone's absolute right not to be subjected to inhuman or degrading treatment that causes intense physical and mental suffering. By not allowing Diane's choice that someone help her end her life, the law condemned Mrs Pretty to prolonged suffering and increased loss of dignity.
- Article 8 is the right to privacy and to personal autonomy over one's own body, free from state interference. Because of her physical condition Diane required help in order to exercise her autonomy – and so the law should have allowed her to request this assistance.
- Article 14 outlaws discrimination. If Diane had been less physically disabled she could have ended her own life because suicide is not a criminal offence. However, motor neurone disease had weakened Diane physically and she would have needed a third party's assistance, but she was prevented from receiving such assistance by the 1961 Suicide Act, which criminalised assisted suicide. Hence she was being discriminated against.

## exercises and discussion points

- What parallels can you see between Diane Pretty's case and Claire Harrison's? What differences are there?
- What Diane and Claire both asked for is called Voluntary Euthanasia. Divide your group in two and, using Information and Communication Technology, research the arguments both for and against Voluntary Euthanasia. A good starting place is Diane Pretty's website **[www.justice4diane.org.uk](http://www.justice4diane.org.uk)**. Once you have some information, consider holding a class debate to discuss the issues verbally. You could use Claire Harrison as your example case. Should Claire Harrison be allowed to die?
- Using ICT, research the Human Rights Act. Do you think it is a good law? Where might there be problems in applying it to day to day life? Can it apply equally to everyone?

# disability: what does it mean to us?

The word disability raises all sorts of feelings in us. If we are honest, these may include negative feelings like fear, guilt, incomprehension, concern, pity, but perhaps we also feel admiration, optimism, familiarity and positivity when we encounter disabled people. Certainly, this ought to be the case increasingly as recent legislation, the Disability Discrimination Act (1995), has been focused on improving the perception of disabled people in the UK, and ensuring that they have equal access to goods and services. Disabled people are no longer at the margins of society, but must be allowed to access all the services non-disabled people take for granted, and have their voices heard where it really counts.

Being disabled doesn't just mean that you are a wheelchair user either. Disability can take many forms, not all of which are apparent when you first meet someone. For example, being disabled can mean you:

- Have sensory impairments, for example, blindness or deafness
- Have a long term, chronic condition like Multiple Sclerosis
- Have a mental illness
- Have physical impairments or disfigurement
- Have a learning disability like Down's Syndrome
- Have dyslexia
- Have asthma

## what is discrimination?

Discrimination is often not intentional and can arise from:

- Stereotypes
- Assumptions
- Lack of understanding or information
- Fear
- Poor communication skills
- Lack of contact with disabled people
- Low expectations

Discrimination can also be deliberate, or mistakenly viewed as humour.

## facts v. myths

Until relatively recently, the widely-held image of a disabled person was usually of someone using a wheelchair, bravely facing adversity, and dependent on the goodwill of non-disabled people to help them access 'normal' life. This is not only offensive to disabled people, but it is also inaccurate.

Approximately 15% of the population, or 8.6 million people, consider themselves disabled. The majority of disabled people have hidden impairments, for example a hearing loss or conditions like multiple sclerosis, and therefore cannot be 'categorised' through instant visual assessment.

Most disabled people are of working age, and the majority are not born with their impairments, but acquire them in their lives. Disabled people are not a separate group of 'unfortunates'. Disability could become part of anyone's life at any time, particularly as we have an aging population. Many people also have multiple impairments, and therefore need a range of access provision to meet their needs.

Disabled people are also consumers, employers and employees, relatives and friends. As such, their needs are as complex and varied as anyone else, and it is vital to listen to a disabled person identifying their requirements, rather than make assumptions about what you think they need.

## spinal cord injury

Being disabled can, of course, also mean you have been paralysed, like Claire Harrison in the play. Claire has been in a car accident and has lost all feeling and movement in her body from the neck down. Her mind, however, remains as active as ever, making her very conscious of this dramatic change in circumstance. Spinal cord injury occurs when the spinal cord is damaged or severed, resulting in loss of feeling either in the lower body (paraplegic) or in the arms and legs (quadriplegic/tetraplegic). An injury to the spine in the neck region not only affects the four limbs but also the chest muscles, and consequently there may be difficulty with breathing, coughing and clearing the chest.

Although Claire is a fictional character, many people find themselves in her position as a result of Spinal Cord Injury (SCI). One particularly famous person who suffered a SCI was the actor **Christopher Reeve**, most well known for playing Superman in the films of the same name.



## christopher reeve 1952-2004

**Christopher Reeve** took a very different stance to Claire Harrison. Injured after a fall from a horse in 1995, he spent much of his time from his rehabilitation to his death in October 2004 campaigning for research into Spinal Cord Injury. He believed passionately that a cure for SCI should and could be found, and that anyone who

had received such an injury had every right to hope for such a cure. Indeed, he had begun to regain some sensation in some parts of his body. **Christopher Reeve** derived great motivation from his campaigning and from the love and support of his friends and family. As a celebrity, he was able to focus the attention of the world's media on his condition and use this to raise funds and improve understanding. The Christopher Reeve Paralysis Foundation bears his name for this very reason, and aims to continue his good work even after his death.

The website for this foundation ([www.christopherreeve.org](http://www.christopherreeve.org)) gives the following information on what causes Spinal Cord Injuries:

Vehicular Accidents	38.5%
Violence	30%
Falls	19%
Sports-related	8%
Other	4.5%

## exercises and discussion points

- Think about images of disability on television, in films or in your life. Write about one of these images, and the impact it had on you.
- Choose one of the many different types of disabilities mentioned above. With a partner, talk through your normal daily routine and discuss how you would cope with your newly acquired disability. What changes would you make? What difficulties would you face? How would you feel at the end of that day?
- Look at the statistics from the Christopher Reeve Paralysis Foundation. What do they tell you?

# disability on stage and screen

Disabled people, it has been argued, have not been portrayed fairly or equally in the media. This includes advertisements, films, books and plays. It is one of the aims of the Disability Discrimination Act to ensure that disabled people are properly represented in the media and all forms of cultural life, both because it is right to do so, and because it will in turn help other people's perceptions of disability if they are encountering more positive images in their daily lives.

Some plays and films which have disability as a central theme, and which you may wish to read or watch as part of your studies, include:

## Richard III by William Shakespeare

*Deform'd, unfinish'd, sent before my time  
Into this breathing world scarce half made up,  
And that so lamely and unfashionable  
That dogs bark at me as I halt by them*

Richard III, one of Shakespeare's famous kings, was both villainous and disabled at least in modern eyes. The story starts after years of civil unrest between the royal houses of York and Lancaster. Edward IV is undisputed king. However, his brother Richard Duke of Gloucester plots to seize the throne for himself, removing anybody in his path, starting with their other brother George Duke of Clarence who is arrested for treason.

## A Day in the Death of Joe Egg by Peter Nichols (1967)

This play concerns Bri and Sheila, and their severely mentally disabled child, nicknamed Joe Egg. The parents invent conversations and personality traits for the child, even though she seems unable to communicate in any way herself. As Bri and Sheila begin to fabricate scenarios, their marriage comes under increasing strain.

## Johnny Got His Gun (1971) Director: Dalton Trumbo

During the First World War in a hospital somewhere in Europe, a horrifically mutilated soldier (Bottoms), left limbless and faceless from a shell explosion, and thought by the medical staff to be "insensible", comes to realize the situation he is in. In his desperate attempt to establish communication with the outer world - he isn't able to speak as he hasn't a mouth and he can't write since his arms were amputated - he falls back on a series of fantasies fusing myth and reality. And as the doctors are immersed in their research for potential experiments on the "body", a young nurse seems to be the only person able to hear Johnny's inner, desperate cries...

### Rain Man (1988) Director: Barry Levinson

Used car hustler Charlie Babbitt (**Tom Cruise**) is told that his estranged father has died. He expects to receive at least a portion of the \$3 million estate, but discovers he has inherited only his father's prize roses and a Buick Roadmaster. The \$3 million has been put into a trust for an undisclosed party so Charlie heads to his home town of Cincinnati to find out who the lucky party is. The secret beneficiary is Raymond Babbitt, the autistic-savant older brother Charlie never knew he had. Charlie must earn the trust of his brother in order to divert the inheritance.

### My Left Foot (1989) Director: Jim Sheridan

Christy Brown is a quadriplegic born to a large, poor Irish family. His mother, Mrs Brown, recognizes the intelligence and humanity in the lad everyone else regards as a vegetable. Eventually, Christy matures into a cantankerous writer who uses his only functional limb, his left foot, to write with.

### Four Weddings and A Funeral (1994) Director: Mike Newell

This acclaimed British comedy centres on the intermittent romance between a charming, bumbling, Englishman Charles and a beautiful American woman Carrie, who seem always to run into each other at weddings. Charles' brother David (David Bower), who is deaf and uses British Sign Language, through which he and Charles communicate. David is also shown in a couple of scenes developing a love interest of his own. Richard Curtis's script has wonderful humour and timing and includes a disabled supporting character without patronising or stereotyping. Curtis's involvement with Comic Relief, which supports the empowerment of disabled people with funding, may have played a part in causing Curtis to include a disabled character in this positive way. The trend was continued in Notting Hill (1999, Roger Michell, UK/USA), another Curtis film, in which one of **Hugh Grant's** character's friends is a wheelchair user. David is also shown in a couple of scenes developing a love interest of his own.

### Inside I'm Dancing (2004) Director: Damien O'Donnell

Twenty four year-old Michael has cerebral palsy and has been quietly sheltered away at Carrigmore Residential Home for most of his life. His speech is affected by his condition, and he has to painstakingly tap out every word on a spelling board. All that is about to change though, because of a certain Rory O'Shea.

Rory, a rebellious young man, has the ability to move only his head and two fingers on his right hand, but he's not about to let that stop him having a good time. Much to Michael's surprise, Rory can also understand what he is saying and the two are soon firm friends with Rory wasting no time in teaching Michael all about the joys of life outside the home.

This is a story about two people who have to deal with discrimination in life at every level, there are issues that need to be tackled, but they are handled with such wit and candour that the film never takes a moralising tone, and ensures the audience is laughing all the way through. Both the lead characters, who are disabled, are played by non-disabled actors, which may help you in discussing the first point on the next page.



## exercises and discussion points

- In relation to any of these plays or films, consider whether the actors playing the parts should be disabled themselves or not. Write down the arguments for and against.
- Write down the characteristics of the disabled character in one of these plays or films, and the characteristics of a non-disabled character from the same film. What do you notice when you compare the two? Are any of these depictions of disabled people stereotyped?
- Divide the group in half. The motion under discussion is 'all plays and films should be sign interpreted to enable deaf people to access them'. One half writes down the arguments in favour of this motion, the other half writes down the argument against the motion. Open the discussion out to the whole group, enabling both sides to be heard.
- Disability affects 15% of humanity. How well represented do you think disability is portrayed in plays and films?
- Imagine you are writing a play and wanted to include a character who is a wheelchair user. What might you need to consider when writing the part?

## when you come and see the play...

During your visit to see **Whose Life is it Anyway?**, you may wish to bear in mind the following aspects of the play in order that you can discuss them in class afterwards.

1. The main character in this play, Claire Harrison, remains in her hospital bed throughout the play, unable to move her body. How does this affect:
  - **Kim Cattrall's** presentation of the character of Claire?
  - The way the other actors interact with her?
  - The way the play is presented visually on stage?
  - The use of lighting and sound effects in the production?
2. Do you think the play could be accused of being sentimental? Think about why this is or is not the case.
3. There is a conflict of will in the play. Which side do you think is right, and why?
4. Do you think the representation of doctors and nurses in the play is fair?
5. Which character did you most like in the play? What was it that interested you about them?
6. Notice how the audience around you reacts to the play. Do they display the same responses, or are they more varied?
7. What did you feel and think at the end of the play?

