Audience Guide

California Repertory Company
CSULB Theatre Arts Department
April 18 – May 10
Music by Tom Kitt
Book and Lyrics by Brian Yorkey
Directed by Joanne Gordon
How to Use this Guide
Welcome to the CSULB Theatre Arts Department! Each show of the semester will be accompanied by an audience guide such as this one. Theater is about asking questions, not providing easy answers; we intend these guides to provide context to help you examine, discuss, and evaluate the work you’ll see this semester.

A Note to Audiences
*Next to Normal* contains material that may be distressing. On campus, CSULB Counseling and Psychological Services (CAPS) offers short-term counseling for individuals, group counseling, career development counseling, referral services, psycho-educational workshops, and crisis intervention.

On campus: Counseling and Psychological Services: (562) 985-4001
Women’s Resource Center: (562) 985-8576

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The Cast
(As denoted in the script)

in order of appearance:

her daughter NATALIE: Sixteen and trying to be perfect. It's not going well.
and HENRY: Seventeen. Musician, romantic, stoner, slacker, philosopher king.

- and -

VOICES, an ANESTHESIOLOGIST, NURSES, DOCTORS, and others, all played by the company, and a
PSYCHOPHARMACOLOGIST (DOCTOR FINE) played by the actor playing DOCTOR MADDEN.

PLOT SUMMARY

Next to Normal is a contemporary family drama, about a woman's struggle with emotional anguish, mental illness, and the effects of her illness on her family. At the opening of the show, Diana seems to have an ideal life – she is educated, well off, and happily married with two teenage children. However, it soon becomes clear that all is not as it seems. Diana is plagued with anxieties, mood swings and delusions that traces back to a family tragedy 16 years earlier and are growing worse with time as she struggles with maintaining her bipolar disorder.

During the course of the play, Diana goes through a series of doctors and treatments, in response to and sometimes triggering the ups and downs of her illness. Under the care of her primary doctor, Dr. Madden, Diana takes medication, talks through her issues and problems, and undergoes the more controversial option of electroconvulsive therapy (ECT). Meanwhile, her husband Dan confronts his own struggle of fighting for his marriage and keeping his family together; daughter Natalie deals with the pressures of fighting for her parents' attention and a budding romance with a fellow student, Henry; her son Gabe serves as Diana's confidante and link to a happier past. Though the family strives to establish some sort of normality, and each character seeks his or her own peace and happiness, the ties that bind slowly unravel around them.

Next to Normal is considered a rock musical, and much of the story is told through song. The melodies are often interwoven, and the action moves back and forth among simultaneous scenes, as well as between literal and psychological realities. Though serious in focus, the play is full of surprises and humor as well.
About the Authors

Music by:

**TOM KITT** most recently created orchestrations/arrangements/musical supervision for *American Idiot* (Berkeley Rep). Kitt composed the new musical *Next to Normal*, for which he received two Tony Awards (Best Original Score with [Brian Yorkey](http://americantheatrewing.org/biography/detail/brian_yorkey/) and Best Orchestration with Michael Starobin), the Outer Critics Circle Award for Best New Score and the 2009 Frederick Loewe Award for Dramatic Composition. As a composer, his other credits include *High Fidelity* on Broadway, *From Up Here* at Manhattan Theatre Club and *The Retributionists* at Playwrights Horizons. As a musical director, conductor and arranger for Broadway and off-Broadway shows, his credits include *13*, *Debbie Does Dallas*, *Everyday Rapture* (Second Stage), *Hair*, *Mario Cantone: Laugh Whore* and *Urban Cowboy*. He created new orchestrations for the CTG/Deaf West production of *Pippin*. His string arrangements appear on the new Green Day album *21st Century Breakdown*. He is the proud leader of the Tom Kitt Band ([www.tomkittband.com](http://www.tomkittband.com)), and his original songs have been featured in film and on TV.

*Bio as of October, 2009.*

Book & Lyrics by:

**BRIAN YORKEY** (Book/Lyrics) Brian received the 2009 Tony Award for Best Score for his work on *Next to Normal* and was also nominated for the Tony Award for Best Book of a Musical. Theatre credits include *Making Tracks*, which has played Off-Broadway and regionally, the musical adaptation of Ang Lee's *The Wedding Banquet*; and the new country musical *Play It By Heart*. Film and TV include the features *Time After Time*, in development at Universal with Marc Platt, and *Sluts* for Lionsgate and Furst Films; he is currently writing *Love Undercover* for Pandemonium Films and Overture, and *Chase* for Anonymous Content and Rosenzweig Films; and he co-created *Bears*, a new series for the Logo network. He has directed Off-Broadway and regionally, and for seven years was associate artistic director at Village Theatre in Washington state, one of the nation's leading producers of new musicals. He's a graduate of Columbia University, where he was artistic director of the *Varsity Show*, an alum of the BMI/Lehman Engel Musical Theatre Workshop and a proud member of the Dramatists Guild and the WGA.

*Bio as of December, 2009.*

Production History

*Next to Normal* is a musical with book and lyrics by Brian Yorkey and music by Tom Kitt. The piece began in 1998 as a short sketch about a woman undergoing electroconvulsive therapy, under the title *Feeling Electric*. Over the next decade, the script and score grew and developed through a series of workshops, and was retitled *Next to Normal*. The play debuted off-Broadway in 2008, and won the Outer Critics’ Circle Award for Outstanding Score, with Drama Desk Award nominations for Outstanding Actress and Outstanding Score. After the run off-Broadway, the show was reworked, and then produced at Washington, DC’s Arena Stage from November 2008 to January 2009.

The musical opened on Broadway in April 2009. It was nominated for eleven Tony® Awards in 2009 and won three; Best Original Score, Best Orchestration, and Best Performance by a Leading Actress in a Musical, for Alice Ripley’s performance as Diana. It was also awarded the 2010 Pulitzer Prize for Drama, becoming only the eighth musical in Pulitzer history to receive the honor. In awarding the prize to *Next to Normal*, the Pulitzer committee called the show "a powerful rock musical that grapples with mental illness in a suburban family and expands the scope of subject matter for musicals."

The Broadway production closed on January 16, 2011 after 21 previews and 733 regular performances. Since then, the show has toured nationally in the U.S., and received productions abroad in Canada, Australia, Holland, Argentina, Brazil, Peru, Korea, Israel, and several countries in Scandinavia.

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1 American Theatre Wing: [http://americantheatrewing.org/biography/detail/tom_kitt](http://americantheatrewing.org/biography/detail/tom_kitt)


3 [http://www.pulitzer.org/citation/2010-Drama](http://www.pulitzer.org/citation/2010-Drama)
Interview with Director Joanne Gordon

How would you summarize what the show is about?

JG: On one level it is a small domestic story. It's a story of a family in pain. On a larger level it's a story about loss and asking what is the gracious way to accommodate to loss? It was interesting, when I first saw the piece in New York, by the end of act one I was weeping like a baby. The weeping had to do with a relationship with my mother who was ill at the time and who was alone; her pain and my inability to help her with her pain was tough to deal with. The specific story elements for me of this piece are simply incidental. They are kickoff points to our exploring our ability to comfort each other, to deal with loss and pain, and of family dynamics and how one person's pain affects the entire family. . . it's a very complicated piece.

On the importance of the show:

I think there is no question that we all deal with family dynamics every single day. Whether it's because our families are working well together or if they're dysfunctional. If they're working well together we're terrified something is going to cease, something's going to happen to break them and if they're not working together well we are striving to get pieces. So we all can identify with family plays that are based on family pain, but even more than that, it is the dynamic of love that is so powerful; the need to love, misguided love, missed love—it's something we all function on all the time. It doesn't matter if you're 8 or 18 or 80, it's as paramount a driving force for anyone, so I think that the theme of needing love, giving love, giving love in the wrong places, being broken by love—it's universal.

Of the many complex themes that are found in the show, what sticks with you?

JG: I think that you always have to be smart. If you've got a good title, then the title always tells you where to go. It's a very good title. The whole point is that "normal" when we use the word glibly is: that which is accepted by the majority of people is correct. This play expresses the reality of being NEXT to normal. Not how it is often stereotypically portrayed as so way out in left field that you are a caricature of crazy, but surviving by not accepting norms, but by finding a parallel course—next to normal or ALTERNATIVE to normal.

Can you talk about the casting of the show?

JG: One of the elements I've tried to do to communicate the universality of the piece is in the casting. My cast is gloriously multi-ethnic. I have two African-Americans; I have two Anglo, a Latin, and an Asian-American actor. We are a true "American family"; we are not just "Leave it to Beaver".

In your opinion, how does this show rank in the canon of musical theatre?

JG: I think it's way up there. As you know I am a Sondheim fanatic and fan. I think that Kitt and Yorkey are a "son" of Sondheim so to speak. Many people would see Jonathon Larson, the creator of Rent, as the next generation, yet his life was tragically cut short before he could reach maturity. Of all the plays that have followed Sondheim's lead, this is the one that has gotten closest to his brilliance in my opinion.

How do you approach the subject of mental illness in the show?

JG: One man's madness is another man's genius. I don't think pain and vulnerability belong to the mad, simply to the sensitive. I think dulling the pain is understandable but has to appreciated by the individual and not other people. Pain is part of life.

Is this the first time you've directed this show?

JG: Yes.

What are you excited to bring to this production as the director?

JG: I think the first thing is my casting. I very much doubt that there's been another multi-ethnic cast. So immediately I am making some sort of political statement which I like to do, in a very subtle way, but nevertheless I think that seeing America not as just a white family is important, it is crucial, and it's true to California. So that's the first thing, the second is
working with scenic designer Elizabeth Smith and Danila on the environment, the mise-en-scène, and my intention is to work within a metaphoric universe where the themes of the play are expressed in the physical dimensions of the set; it’s in no way realistic; not by the furthest stretch of imagination is there any realism. The themes are given visual poetry in the physical environment. I like working in that way, it challenges the actors, it challenges the audience, and it pushes it from pseudo-realism into poetic theatricality.

What can the audience look forward to when seeing the show?

JG: The fact is the score is very accessible, it’s not the kind of easy melodic period of Rogers & Hammerstein or Lerner and Lowe; it's not that world at all. I think the kind of rock language will appeal to younger generation. Music is a very quick and visceral way to penetrate by not going through the brain but going through the gut, which is the way I think theatre should be into your soul. I am hoping others will be touched by the show as I was.

What's your favorite song in the show?

"I Miss the Mountains" sung by the character of Diana. They are accepting the highs and lows and wanting those lows, even though they are really painful. That is for me the key to the play.

Vocabulary

Mise-en-scène - is an expression used to describe the design aspects of a theatre or film production, which essentially means "visual theme" or "telling a story"—both in visually artful ways through storyboarding, cinematography and stage design, and in poetically artful ways through direction.

Psychopharmacologist – A scientist or doctor who specializes in the study of drugs and how they affect the mind.

Psychogenic - Originating in the mind or in mental or emotional processes; having a psychological rather than a physiological origin.

Lithium - a substance used, in its carbonate or citrate form, in the treatment or prevention of bipolar disorder or mania

What is Bipolar Disorder?

Also known as manic depressive illness, bipolar disorder is characterized by severe and disabling highs (mania) and lows (depression). Affecting 2.2 million Americans, this illness typically begins in adolescence or early adulthood and continues throughout life, with 80% of patients experiencing multiple manic episodes and 15% ending their lives in suicide. However, effective medical treatments are available, and new research is constantly expanding the range of possible treatment options. With proper treatment, most people with bipolar disorders are able to lead fulfilling and productive lives.

Bipolar Disorder is distinguished from Major Depressive Disorder by the presence of manic or hypomanic episodes. It is distinguished from Schizoaffective Disorder by the absence of psychotic symptoms (such as delusions, hallucinations) during periods of stable mood.

Bipolar Disorder is really a spectrum of disorders. Bipolar I disorder is characterized by a history of at least one manic episode, and (usually) depressive episodes. Bipolar II disorder is characterized by hypomanic episodes alternating with depressive episodes. Cyclothymia is characterized by highs, which fulfill some but not all criteria for hypomania and lows, which fulfill some but not all criteria for depression.4

4 http://bipolar.stanford.edu/bipolar.html
Electroconvulsive Therapy

Electroconvulsive therapy (ECT) is a procedure in which electric currents are passed through the brain, intentionally triggering a brief seizure. ECT seems to cause changes in brain chemistry that can quickly reverse symptoms of certain mental illnesses. It often works when other treatments are unsuccessful.

Much of the stigma attached to ECT is based on early treatments in which high doses of electricity were administered without anesthesia, leading to memory loss, fractured bones and other serious side effects.

ECT is much safer today and is given to people while they're under general anesthesia. Although ECT still causes some side effects, it now uses electrical currents given in a controlled setting to achieve the most benefit with the fewest possible risks.  

“Is ECT an Ethical Treatment? 

Although electroconvulsive therapy is widely considered a controversial therapy, it has survived for 70 years and usage has even increased. In Scandinavian countries, ECT is given on an equal footing with drugs and psychotherapy to psychiatric patients, while in the United States and some other European countries; there are social impediments to its use. As a consequence, patient suffering is prolonged, the cost of psychiatric care is increased and avoidable tragic deaths occur.

Reasons for Controversy

Three reasons are given for the aversion: 1) ECT is considered old-fashioned and politically incorrect; 2) it is forced on the patient; and 3) the memory disturbances are so severe and persistent that no rational human being would undergo this procedure, no matter how well-intended.

Electroconvulsive therapy is the oldest psychiatric treatment now in use, but modern practice is very different from that of early years. The technique of stimulation has been refined, and superficial anesthesia with muscular relaxation and oxygenation are in wide use. These changes contribute to a more lenient procedure.

The popular perception of ECT as forced upon an unwilling patient as pictured in the film One Flew Over the Cuckoo’s Nest is no longer a feature of modern treatment. Treatments are now given with patients’ individual consent. Only when patients are incompetent by reason of a severe psychiatric disturbance is ECT proposed without patients’ individual consent. At such times, the laws of the state for the application of life-saving procedures may be invoked and the patient treated.

Immediate confusion accompanies ECT, but it is not persistent. Loss of personal memories is often described but is persistent in only a few patients. In the overall picture of the thousands of patients treated with ECT each year, the memory effects are a nuisance rather than an unassailable obstacle to its use.

Ethical Analysis

An ethical analysis of our practice may lead us out of the present impasse. An upsurge in interest in the application of ethical principles to medical care followed World War II, leading to the declarations and codes of the United Nations and scientific and professional communities. Four principles of health care--beneficence (doing good), non-maleficence (not doing harm), respect for personal autonomy and justice (equality of opportunity)--are widely accepted since their proposal by the philosophers at Georgetown University (Beauchamp and Childress, 2001). In practice, all principles are to be respected in all instances. When such is not possible, an analysis of the alternatives and their consequences in both the short and long term is made, and the least harmful alternative is accepted.

(For the complete article click the link below)

- See more at: http://www.psychiatrictimes.com/articles/ect-ethical-treatment#sthash.mbC40fHs.dpuf

http://www.mayoclinic.org/tests-procedures/electroconvulsive-therapy/basics/definition/prc-20014161
Statistics about BPD and Other Related Disorders

**Depression**[^6]
- Major depressive disorder is one of the most common mental disorders in the United States.
- Each year about 6.7% of U.S adults experience major depressive disorder.
- Women are 70% more likely than men to experience depression during their lifetime.
- The average age of onset is 32 years old. Additionally, 3.3% of 13 to 18 year olds have experienced a seriously debilitating depressive disorder.

**Bipolar Disorder**[^7]
- Bipolar disorder affects approximately 5.7 million American adults or about 2.6% of the U.S population age 18 and older in a given year.
- The median age of onset for bipolar disorders is 25 years.
- More than 2/3 of people with bipolar disorder have at least 1 close relative with the illness or with unipolar major depression, indicating that the disease has a heritable component.

**Schizophrenia**[^8]
- Approximately 2.4 million American adults, or about 1.1% of the population age 18 and older in a given year, have schizophrenia.
- Schizophrenia affects men and women with equal frequency.
- Schizophrenia often first appears in men in their late teens or early twenties.

**Anxiety Disorder**[^9]
- Approximately 40 million American adults ages 18 and older, or about 18.1% of people in this age group in a given year, have an anxiety disorder.
- Women are 60% more likely than men to experience an anxiety disorder over their lifetime.
- Anxiety disorders frequently co-occur with depressive disorders or substance abuse.
- Most people with an anxiety disorder will have a first episode by age 21.5.

**Panic Disorder**[^10]
- Approximately 6 million American Adults ages 18 and older, or about 2.7% of people in this age group in a given year, have panic disorder and is twice as common in women as in men.
- Panic disorder typically develops in early adulthood (median age of onset 24), but the age of onset extends throughout adulthood.
- About one in three people with panic disorder develops agoraphobia, a condition in which the individual becomes afraid of being in any place or situation where escape might be difficult or help unavailable in the event of a panic attack.

**Questions for Discussion**

1. Who are the victims in this story?
2. Was Diana’s treatment of ECT ethical?
3. Was Dan’s desire to hide the past from Diana right or wrong?
4. Do you support Diana’s decision to leave her family to find her own peace of mind?
5. Is it better to have loved and lost then to never love at all?

Further Exploration

(VIDEO) American Theatre Wing – Working in the Theatre - Next to Normal: The Road to Broadway

The creative team behind the hit musical Next To Normal - Director Michael Greif, Composer Tom Kitt, Producer David Stone and Book Writer/Lyricist Brian Yorkey - discuss the unique road the show took to Broadway beginning with its start at the BMI Workshop; the origin of the show's subject matter and the challenges of getting acceptance for it; the reasons behind a title change and what that represented for the creative process; why they took the unusual step of going from off-Broadway to out of town before Broadway; what influences the press and audiences had after the off-Broadway opening in their decision process; why some songs were dropped, others changed and the reasons behind the addition of new material; and 4 songs are performed in studio that illustrate the changes in the various stages of the production.

Originally taped - November, 2009

http://americantheatrewing.org/wit/detail/next_to_normal_11_09/

Bipolar Disorder


http://www.mayoclinic.com/health/bipolar-disorder/DS00356

Treatments


http://www.helpguide.org/mental/bipolar_disorder_diagnosis_treatment.htm

Electroconvulsive Therapy


Definition: http://www.mayoclinic.org/tests-procedures/electroconvulsive-therapy/basics/definition/prc-20014161

Video: http://www.mayoclinic.org/diseases-conditions/depression/multimedia/electroconvulsive-therapy/vid-20084705

Grief Support Programs

http://mayoclinichealthsystem.org/locations/mankato/medical-services/hospice/grief-support-programs