University of Northern Iowa

UNI ScholarWorks

Honors Program Theses

Student Work

2014

Next to normal: a costume design based in psychological research

Grace R. Kinser University of Northern Iowa

Let us know how access to this document benefits you

Copyright © 2014 Grace R. Kinser

Follow this and additional works at: https://scholarworks.uni.edu/hpt

Part of the Mental and Social Health Commons, Psychology Commons, and the Theatre and Performance Studies Commons

Recommended Citation

Kinser, Grace R., "Next to normal: a costume design based in psychological research" (2014). *Honors Program Theses.* 187.

https://scholarworks.uni.edu/hpt/187

This Open Access Honors Program Thesis is brought to you for free and open access by the Student Work at UNI ScholarWorks. It has been accepted for inclusion in Honors Program Theses by an authorized administrator of UNI ScholarWorks. For more information, please contact scholarworks@uni.edu.

Offensive Materials Statement: Materials located in UNI ScholarWorks come from a broad range of sources and time periods. Some of these materials may contain offensive stereotypes, ideas, visuals, or language.

NEXT TO NORMAL: A COSTUME DESIGN BASED IN PSYCHOLOGICAL RESEARCH

A Thesis Submitted
in Partial Fulfillment
of the Requirements for the Designation
University Honors with Distinction

Grace R. Kinser
University of Northern Iowa
December 2014

Next to Normal: A Costume Design Based in Psychological Research

Throughout my life my two main interests have been theatre and people. When I came to UNI I found a way to pursue these interests through my education, with a psychology major and a theatre minor. I had the first idea for my thesis when I had the opportunity to take some upper level costume design classes alongside some of my upper level psychology courses, and I noticed how naturally the two areas of study fit together. As I began to choose my play, started to think about the psychological concepts in the shows I was reading, and progressed with my education in psychology. I found another source of inspiration: a desire to educate people about mental illness. It has been my experience that there are a lot of misconceptions about psychology, therapy, and mental illness in our society today, and I find it very disheartening. There are too many people who don't see mental illness as a real issue, who believe that sufferers should "just get over it". I believe that theatre can be one of the most powerful educational tools available to the public, and I thought that this thesis would be a great opportunity to foster understanding of bipolar disorder and the difficulties of life with a mental illness.

In our design costumes class we were required to bring factual research into our designs, but in my designs it mainly amounted to research about the fashions and particulars of a profession in a given time. For this project I was inspired to dig deeper into the psychology of the characters in the show. To do this I wanted my research to not only explore the lifestyle of the characters, but to be consistent with current psychological research about mental illnesses. I needed to find a show that dealt with psychological issues so that I could do in depth research on those issues and apply

that to my costume design. I wanted my costumes to not only establish the feel of the show, but to portray these psychological concepts honestly. I did some research and found myself drawn to a musical that was relatively new, and dealt frankly and directly with the subject of mental illness. The name of the show was *Next to Normal*.

Background

Next to Normal was first performed off Broadway in 2008, but the show had its birth almost a decade before that in a musical theatre workshop hosted by Broadcast Music, Inc (Michels 9). Brian Yorkey and Tom Kitt were required to write a ten minute musical for the end of the workshop, and Yorkey's attention was caught by a documentary he had seen on TV about electroconvulsive therapy (Michels 9). This interest developed into a short musical called "Feeling Electric", which they eventually went on to develop into a full length musical. After workshopping their play at the Second City theatre and an opening in Washington D.C., they decided to make some major changes and it eventually re-emerged off-Broadway as Next to Normal.

Developing the musical over the course of almost a decade allowed Kitt and Yorkey to do massive amounts of research, and for a play dealing with as serious an issue as mental illness to have an impact, honesty about the illness is necessary. The amount of research performed by the writers is what attracted me to this musical for my particular thesis project. If the playwrights were not honest and informed about the psychological aspects of a show, a costume design based in psychological research could be incongruous with the script. I had to find a show where the playwrights had done at least as much research as me. They needed to understand the details of living with a particular mental illness and the treatments that would accompany that

diagnosis. The authors took this task very seriously, so I thought it would be the most appropriate choice for my project.

Synopsis

Next to Normal follows the Goodman family, consisting of a mother, Diana; a father, Dan; and two children, Gabe and Natalie. They seem to put up a happy front, but in fact Diana has been struggling with severe bipolar depression and delusional episodes for the past sixteen years. As the play progresses we discover that Gabe is in fact a hallucination that only Diana sees or interacts with. Their real son died unexpectedly when he was eighteen months old, of intestinal problems. Natalie has been trying to make up for the hole this left in her parent's lives and drives herself to extremes at school, both academically and in pursuit of her musical career. She does not have a lot of friends but over the course of the show she gets to know and eventually starts dating a fellow musician named Henry. However, Natalie is reluctant to let him meet her family and her mother in particular.

Diana has a sixteen year history of medication but still has not found a good combination of drugs to control her unique constellation of symptoms. She sees a psychopharmacologist who has her on a different combination of medication every couple of weeks, and when he settles on a regimen that leaves her feeling emotionless she decides to go off medication completely. This leads to a severe manic episode and an increase in the intensity of her delusions, so Dan encourages her to see a new doctor, Dr. Madden. As Diana's treatments get more intense, Natalie feels more and more neglected and beings to steal her mother's prescription pills and experiment with other drugs.

Dr. Madden focuses on talk therapy and begins to make real progress with Diana. However when he encourages her to clear out Gabe's old room, Gabe appears and convinces her to attempt suicide. After this Dr. Madden suggests electroconvulsive therapy (ECT). When she emerges from treatment however, Diana has lost nineteen years of her memory. Dan and Natalie try and help her recover her memories without bringing up Gabe, but Dr. Madden lets slip in therapy that she had a son. When Diana remembers Gabe, her hallucinations come back in force. This leads to a huge confrontation and argument between Diana and Dan, and Diana decides that she needs to leave. She tells Dan that neither of them will be able to heal if she remains. When she walks out the door Dan acknowledges Gabe for the first time.

Research

When doing a traditional costume design, a designer has to focus on two types of research: factual and evocative. Factual research consists of taking exactly what the writers give you in the script and finding out what those facts translate to on stage. For instance, from the script of this show we can tell several things about the Goodman family. We know Dan works as an architect, and he makes enough that they can pay for Diana's various treatments and for Natalie's piano lessons, as well as building their own house. They live in a big enough town that there are at least two facilities that can care for people with an illness as severe as Diana's, but they live out in the suburbs. Information like this gives me a good base for my design choices, and ensures that the setting of the play is clear to the audience.

In contrast, evocative research deals with the overall feel of a show or design. It is particularly helpful when communicating with other designers to ensure that the

show is congruent. With factual research, I would be looking at actual items of clothing that are connected with the information given in the script, but with evocative research it could be a piece of artwork or even a song. It is about communicating the mood of a show. When I am doing a costume design, I like to connect the individual characters with other people, either celebrities, historical figures, or existing characters. One of the connections I made while doing preliminary research for my design was between Diana and the Stepford Wives (Fig. 25). Diana is controlled in many ways by her husband, who really wants to have "the perfect loving family" and always tries to put a good face on things instead of dealing with them (Kitt 8).

The psychological research I did tied in very closely with my factual research, essentially what I did was just take that factual research one step further. For the most part I looked at Diana's particular illness and how it would affect both her and her family, but I was interested in the psychology of the elements of design as well. There are many elements of design that allow a costumer to get their message across. Among these are the shape of the garment, which can define a time period or can suggest a person's attitudes. Another is the type of fabric used, which can suggest social status at a glance. Arguably one of the most important aspects of costume design is color. It is often the first thing people notice about an article of clothing, and can say a lot about a person's mood, station, and attitudes towards life. I was disappointed during my research to find very few scholarly articles about our reactions to shape and style, but I was able to find a study about the effect colors can have on humans. Most of the research about color has been done by market researchers and

is focused around advertisements and the like, but their empirical research is still based in psychology and their discoveries are relevant to all applications of color.

Diana

Character Analysis

Diana is the main character in my show and is one of the most complex. The plot of the show is mainly driven by her illness, so we find out a great deal about it.

She is described by the authors as "Sexy. Sharp. Delusional bipolar depressive" (Kitt 4). Her official diagnosis is "bipolar with delusional episodes", but she in reality her symptoms do not fit neatly into any particular illness (Kitt 18). On top of the typical manic and depressive episodes associated with bipolar disorder, she has severe audio and visual hallucinations that take the form of her dead son, Gabe. Although Gabe died as a baby, her hallucination is of a Gabe that aged normally and is now almost eighteen. She experiences a few other hallucinations but they only happen a couple times throughout the show and are short lived. The predominant and disruptive one is Gabe.

Because of this complicated diagnosis Diana has a sixteen year history of medication, but they still have not gotten the combo quite right. Within seven minutes of the show starting she begins to slide into a minor manic episode. When her psychopharmacologist prescribes a regimen that leaves her feeling flat and emotionless, she dumps her medication down the toilet at Gabe's urging. After another severe manic episode, she begins talk therapy with a new doctor and begins to make some progress, until Gabe convinces her to attempt suicide so that they can be together. After this she progresses to electroconvulsive therapy, which causes her to

temporarily lose nineteen years of her memory. Her memory returns slowly and with prompting, but even at the end of the show they have not fully returned.

Costume Application

Diana's costume changes are greatly influenced by her changing treatments. Each one affects her mood, behavior, and symptoms, and therefore the clothing she would choose to wear. Dr. Fine has Diana on many different medications in the beginning of the show, including a variety of antidepressants. However, current research shows that there has never been a correlation between a reduction of bipolar depression symptoms and antidepressants (Frye 3). It is unsurprising that Diana dumps her medicine in the toilet and relapses. Nicholas Keks conducted a study evaluating treatments used for bipolar patients before they attempted suicide, and he noted that antidepressants have never been shown to help diminish suicidal thoughts in bipolar patients (Keks 5). Diana has attempted suicide at least once before the play starts, and yet in the beginning of the show her only form of therapy is oral medication.

A group of researchers interviewed 50 non institutionalized patients who had been diagnosed with bipolar disorder to discover their attitudes towards the different types of treatments they had received and found the overwhelming response of the patients was that they disliked medication the most (Vargas-Huicochea 4). Many expressed a fear of becoming addicted to psychological drugs, and many more disliked the idea of putting chemicals into their bodies at all (Vargas-Huicochea 3). Diana does not express these fears initially, and she has been on medication for fifteen years already when the play opens. However, she is very vocal about the side effects she

experiences and the way the medications make her feel, and in the end she flushes her medication down the toilet (Kitt 17-19).

Diana would have her biggest fluctuations during this period of treatment since medication is not quite advanced enough to fully alleviate bipolar symptoms, and most bipolar patients have a mental conflict regarding medications. The changing medication stacks with her mental conflict and the volatile nature of bipolar disorder to create a very stressful time in her life. To show all of this conflict, I used a lot of contrast in her first outfit. I contrasted textures by pairing bright red, satiny pajamas with a grey flannel bathrobe (Fig. 1). I chose to make her pajamas red because Diana mentions several times over the course of the show that her medication has a negative impact on her sex drive, and research shows that warmer colors are associated with physical attraction as well as physical and mental arousal (Labrecque 189-191). Her red pajamas show that she is trying to help her marriage somewhat, but the pajamas are also baggy, unflattering, and masculine. This contrast again highlights the conflict Diana is experiencing at this point in her life.

When Diana's psychopharmacologist, Dr. Fine, finally settles on a regimen of pills it is one that leaves Diana feeling emotionless. During this part of the treatment, I dressed Diana in a simple outfit with relatively muted colors to display these flattened emotions (Fig 2). There are only two pieces in her outfit that have saturated color, her sweater and her coat. The sweater is a royal blue so it's bright, but it's deep enough that when paired with white black and grey it appears relatively muted. Her peacoat is yellow which always looks bright, but her coat remains the same throughout the show and is not particular to this scene or outfit. It is fairly common for patients with bipolar

disorder to go on massive shopping sprees during manic episodes (Frye 7). Diana would have bought her coat before going on this particular combination of medications, possibly during one of her manic episodes that occurred before the show.

Once Diana takes herself off her medication, she is full of energy and motivation (Kitt 27-28). I made a dramatic shift in her costume to show her change in attitude (Fig 3). The colors of her costume become brighter, more saturated, and they contrast more with each other. Her dress has bright green, orange, and yellow flowers on it, but I made the base blue. I chose blue because it contrasted sharply with the flowers, but I also chose it because Labrecque and his colleagues noted that blue is associated with increased likelihood to make impulse buys (189). This fits with the symptoms of a manic episode, which include impulsivity and grandiose thoughts- including grandiose thoughts about the content of her bank account- which connects to the shopping sprees I mentioned earlier (Singh 148).

On top of her colorful dress she wears a bright blue and green apron to do chores around the house. I chose colors that clashed with the dress she was wearing to show the hectic nature of her emotions during this manic episode. I chose cool colors for the apron because cool colors are associated with increased likability, and at this point Diana is still trying to maintain the illusion of the perfect housewife (Labrecque 189). Both the apron and the sneakers she paired with her nice dress are necessary, because other symptoms of a manic episode include energy, agitation, and hyperactivity, all of which are driving Diana to try and clean and fix everything in the house (Singh 148, Kitt 28).

Although Diana has had more professional help than anyone else in her family, she still struggles with her son's death and remains stuck in her past. In the 2003 report from the President's New Freedom Commission on Mental Health, members stress the idea that recovery must be teaching the sufferer how to handle life on their own with their illness, not just trying to treat symptoms. At the opening of the play that is precisely what is happening to Diana. Her psychopharmacologist lists off her reported symptoms, prescribes a variety of pills, and then checks up on individual symptoms. They are not trying to help her learn about her illness, only taking care of the product of her illness and grief. In this early part of the show, I dressed her in clothes that are not the most practical. Most of her physical needs are being taken care of, so she would not necessarily have to worry about practical clothing. So while she is practical enough to wear sneakers and an apron, for her third outfit, she still puts on a nice dress to do chores and crafts. Her second outfit is not terribly practical either, it works great for visiting the doctor but if she had to do anything else it would be quite restrictive.

Later in the show, when Diana is first released after the ECT, she is confused and unaware of the majority of her life. Dan and Diana were told to expect some memory loss, so for her first outfit out of the hospital, I wanted something simple and comfy that could fit in a variety of decades and social contexts so that it would not be too jarring when she left the hospital (Fig. 5). Soft pants, a sweater, and ballet flats are an outfit that would fit in many time periods, and the colors are plain so they do not draw your attention. After the treatment, when Diana has a checkup with Dr. Madden, she tells him that she feels lost, like "some Christopher Columbus, sailing out into my

mind.../With no map of where I'm going, or of what I've left behind" (Kitt 78). I chose to use more supple fabrics for this outfit to reflect this state of flux she finds herself in.

The fabric is also something that would feel comforting after such a dramatic treatment and change.

Pascal Sienaert conducted a literature review about Electroconvulsive Therapy (ECT) in 2011, and spent a deal of effort investigating its effectiveness as a treatment in patients with bipolar depression. Sienaert states right off the bat that ECT has shown to be effective in most patients who have experienced a Major Depressive Episode, no matter what the patient's primary diagnosis is. Much of the troubles Diana has been experiencing have been in relation to doctors disagreeing with her exact diagnosis, but this indicates to me that she should have received ECT many years ago.

It's true that ECT fell out of favor in the 60s through the 80s, but in the early 90s interest was rekindled in the therapy and large strides had been made by the time the play occurs (Sienaert 1). He also found that while ECT has mostly been used for patients with major depressive disorder (MDD), recent research has shown that when MDD is combined with episodes of psychosis, effectiveness of ECT can climb by about 8%, as compared to MDD alone (Sienaert 3). Unfortunately these promising numbers did not help Diana in the long run, she simply felt disoriented and lost for a few weeks before her memories and psychoses returned (Kitt 86). Although it did little for her symptoms long term, after the ECT Diana seems to be more able to come to grips with her illness. It is no longer a completely incontrovertible fact in her life, it is something that can be worked on and worked with. This puts her far ahead of where she's been

for the majority of the play. Diana's final outfit needed to reflect her outlook at the end of the show, so I made it simple and practical (Fig. 6). Her pants could pass for dressy or casual, as could her shirt and shoes. I kept the colors dark because she is once again in mourning for her son, but I gave her a colored shirt because Diana has never been a bland character. I chose purple because cool colors generally have a relaxing effect, but purple has red in it and Diana's life is still far from relaxed all of the time.

Although Diana's illness has a huge impact on her own life, it has a nearly equal impact on the lives of her family. There is a support group in Tennessee called "Building Recovery of Individual Dreams and Goals through Education and Support" (BRIDGES) whose goal is to educate sufferers and family members about mental illness. They base their program around the idea of "Emotional Stages of Recovery", a framework they performed a lot of research on. They separate the recovery process into three stages: Crisis, Decision, and Awakening. For each of these stages, there are things that the sufferer requires, and if they do not receive them it can have a permanent impact on their health.

For instance, after the initial crisis, it is important to have a support system in place. The sufferer needs a caregiver so that they can rest and tend to their most basic needs. Diana and Dan had Natalie very soon after their son died, which gave Diana no time to rest and grieve. They thought replacing Gabe would help Diana heal, but it was the exact opposite of what she needed. Putting that much strain on her immediately following the emergence of a mental illness simply worsened her symptoms, rather than allowing her to heal. This first stage is necessary to allow them to build the resolve that is required for phase two: The Decision.

During this stage, the sufferer needs to begin building independence and becoming educated about their mental illness. I feel like Diana was cheated out of this phase. Her husband felt obligated to stay by her side and take care of her, but he certainly does not make it seem like he trusts her. In the song "It's gonna be good" he is singing about how he's so glad she's doing so well, and yet in the same song he cannot help checking up on her several times a day. It turns out to be a good thing that he does, but if he had encouraged her independence more early on she would have already have learned healthy coping mechanisms that she could turn to.

Diana is also somewhat cheated of the chance to learn about her illness. Dan seems very enthusiastic about learning; he mentions that he goes on chatrooms and he is the one who finds Dr. Madden and suggests him to Diana. However, Diana has gotten so many different answers about her illness from doctors that there is only so much she can research. Her official diagnosis is "Bipolar with Psychotic Episodes", but that is fairly vague and she admits that it "Didn't totally cover it" (Kitt 39). It is only after completing these two stages that the sufferer can progress to stage 3, the Awakening. This is the point that the sufferer should be ready to rejoin society fully. Although Diana has been living with her illness for sixteen years, she has never been able to fully rejoin society since she has never been able to complete the first two steps in the process. She is not institutionalized, but she is no longer working and is not allowed to drive (Kitt 17).

One of the important aspects of BRIDGES is that all of the classes are taught by peers, rather than professionals. Group therapy is also a large part of the process, and members have said that they felt an acceptance in these classes and therapy sessions

that they had not felt anywhere before, even from loved ones. There is a definite lack of peer support in Diana's life. Dan mentions going to chatrooms online, and talking with women at work about his issues, but Diana sits at home all day except when she goes to her therapist. She has no one to talk to who has a similar illness. There even seems to be a lack of support from members of the family outside of Dan, Diana and Natalie; no extended family is mentioned until the very end of the show when Diana reaches out to her parents (Kitt 101).

Dan

Character Analysis

Dan is an interesting character. He got his girlfriend pregnant when he was twenty-five, and despite the fact that they had not been together very long he chose to marry her and stay with her. When their son passed after only a year or two of marriage and the wife he loved spiraled into mental illness he stuck by her side, got a good job, and tried to carry on as best he could. He sees himself not only as the breadwinner, but as the emotional foundation of the family as well. He feels as though he has to be the rock of the family all of the time, something constant Diana can cling to. He has all of the best intentions but unfortunately his lack of knowledge about mental illness causes all of those good intentions to backfire. He tries to be normal for Diana, but he should be learning and creating a new "normal" for the both of them that includes Diana's illness instead of pushing it to the side.

It is only when he is alone on stage he opens up about how difficult things are for him. He has a song called "Who's crazy?" where he sits in the car outside of Diana's doctor's appointment and questions the decisions that led him to this exact

point in his life. Despite this, he continues on with his job, his research about Diana's illness, and his quest for a treatment that will work. It is not until the very end of the show, when Diana leaves the house, that he is finally able to let go of this stoic exterior and truly grieve his son.

Costume Application

Diana's illness has just as big of an impact on her family as it does on her, their lives have revolved around Diana and her illness for so long that it is one of the most influential aspects of their lives. BRIDGES, the support group from Tennessee, published a paper outlining the needs of family members of a sufferer because they are somewhat different from the sufferer's needs. The first step for family members is ensuring that they do not go into denial and just hope for things to get better. It is important for family members to become educated about the disease in this period of time as well. Throughout the play Dan talks about how everything is "gonna be great" and fine, even when Diana's treatment is clearly not going well (Kitt 28).

It is easy to forget while reading the show that Dan, as well as Diana, lost a son. As the rock of the family Dan rarely expresses his feelings when anyone else is around. Anna L Aho, Pa¨ivi A˚ stedt-Kurki, Marja-Terttu Tarkka and Marja Kaunonen carried out a study in 2010 that examined current programs in place in hospitals to assist grieving fathers, and tried to determine what could be done to increase the helpfulness of those programs. During their research, they spoke with clinicians who worked with grief, and both male and female grieving parents to determine the needs and wants of a grieving father. One of their big findings was the importance of providing both "formal and informal help" (Aho 416) to a grieving father, or clinical and

social support. Dan seems to make everything about Diana. The characters do not talk much about what happened immediately following Gabe's death, other than that Natalie was born very soon after, so it is difficult to know what Dan has done in the past. In the show, Dan mentions talking some with co-workers about Diana's illness, but again that is about Diana. He does not mention having someone to talk to about the death of his son.

In the song "I've been" Dan states outright that if he were to lose Diana he'd be completely alone. He says he has never faced the world without her, and he is not sure if he could. He has put aside his needs for years to be the man he thinks Diana needs in her illness, "When she goes flying, I keep my feet on the ground" (Kitt 45). Dan also does not appear to have sought out the professional help he really needs to grieve his son, although he seems to be very involved with Diana's treatment. He has spent plenty of time researching Diana's illness, and possible treatments and cures, but appears to have done no research or sought out help regarding his own grief. He has denied his own needs for years to take care of his wife, and this has halted his grieving and kept him stuck in his past.

It seems as though because of all this Dan might be stuck in the first stage of acceptance after sixteen years. He shows almost no progress through the different stages, so I kept his costumes fairly uniform in style and color (Fig. 7-10). The only real changes to his costumes are based on what he has to do during that scene. He has suits and ties for work, a polo shirt for when he does not have to work but has to meet with doctors, and a sweater and jeans for when he is at home with his family.

Dan feels that if he can be normal, his whole family might go back to normal, so he

tries very hard to look put together. In the first song, "Just Another Day", he sings "When it's up to you to hold your house together/a house you've built with patience and with care" this clearly expresses the pressure he feels to be a rock for his family.

Because of this, I think Dan would really try to look the perfect suburban husband with his wardrobe. Even when he is off work he tries to look put together, he is not in sweats and a t shirt, he is in a nice sweater and jeans (Fig. 10). I also dressed him primarily in cool colors, since they have been shown to produce feelings of relaxation, and Dan feels as though he is the only cool head in the family (Labreque 189).

Dan makes everything about Diana and in doing so he is denying Natalie and himself crucial support. One of the only times Dan expresses his feelings about Diana's illness to her is right at the end, after the ECT and after she remembers Gabe. Because of this I let a little warm color into Dan's last outfit for the first time in the show, a yellow shirt peeking out from his grey, green and blue sweater (Fig. 10).

Gabe

Character Analysis

Although Gabe is a hallucination that exists only in Diana's mind, his presence is felt by every character in the show. Kitt and Yorkey describe Gabe as "Dashing. Gentle. Bright. Playful. Everything a mother etc" (4). Throughout the show he is actively competing with Dan for Diana's attention, and he usually wins. Natalie also feels a strong competition with Gabe, calling him "Superboy" and labeling herself "The Invisible Girl" (Kitt 36). Although Diana has imagined Gabe as the perfect son, talented and athletic and handsome, he also has a rebellious and dangerous side. When he first comes on stage he is attempting to sneak in the house several hours

past his curfew, and later in the show he convinces Diana to go off her medication and later still to attempt suicide. Since Gabe is a creation of Diana's mind, she subconsciously controls all of the changes he goes through in the show.

Costume Application

Diana has not had a lot of exposure to modern high school boys, since Natalie has never had a particularly close friend or boyfriend that she would bring home. Her experience with boys Gabe's age were all from when she was in high school and college, in the early nineties. The only other influence she has at the beginning of the show are how Natalie dresses and any high school students she might see on TV. Because of this, Gabe's first outfit is very basic. He wears jeans and a hoodie, with sneakers that are generic enough to work for multiple decades. (Fig. 11). The whole outfit bears a striking resemblance to what Natalie wears for that same scene, showing how Diana's environment influences her hallucinations.

By the time he changes again, Diana has seen Henry for the first time, so Gabe's costume becomes a little more modern. He has brightly colored skateboarding shoes that would not have been worn in Diana's time, and his jeans are skinnier as well. Aside from Henry's influence, the further we get into the show the more dangerous Gabe becomes. Diana is aware of this, but she cannot get rid of the hallucinations. I thought this fear would show through in his clothes a little bit. His outfit is still pretty basic, but I gave him black jeans instead of blue and chose a band t-shirt. The shirt is for Aerosmith, which is a band that would have been popular when Diana was in school and is still popular now.

Gabe does not come out in his final outfit until after Diana has undergone ECT and regained her memories. He still has that dangerous edge, but this time I gave him a more structured shirt to really reinforce the idea that he is a fixture in the Goodman's lives. The jeans and shoes remain the same, giving him a little bit of an alternative look as well.

Natalie

Character Analysis

Diana's illness is just as big a part of Natalie's life as her father's, but they deal with it in very different ways. The playwrights describe her as "Sixteen and trying to be perfect. It's not going well" (Kitt 4). She has been working her whole life to gain her parents attention and approval, but has always been overshadowed by her mother's illness and the memory of her brother. At the beginning of the show, she does very little other than study and practice the piano, and she admits that she only does it so that she can get a good scholarship and get away from her parents (Kitt 15). When she starts hanging out with Henry she begins to loosen up and enjoy herself a bit, but just when they are getting close Diana goes off her medication and takes a turn for the worse. After a big confrontation with her mother Natalie begins smoking marijuana with Henry, and as her mother gets worse this quickly progresses to stealing her mother's prescription pills and clubbing on weeknights. This causes some tension between her and Henry, but by the end of the show despite everything she has been through, she has made up with him and made an uneasy peace with both of her parents.

Costume Application

We can see a progression through the stages of grief as defined by BRIDGES throughout the show for Natalie. Natalie is more realistic about her mother's illness than her father, but she spent a long time in the first stage of denial due to her father's influence. As a child, she would have tried very hard to be as normal as possible to gain her parents approval, and I made her first two outfits represent the remnants of this desire (Fig. 14-15). Her first outfit is just pajamas, and when she wears them she is drinking Red Bull and doing homework at four in the morning. I thought she would just want to be as comfortable as possible, so I gave her a t-shirt and some basketball shorts (Fig. 13). I chose a t-shirt design that was both sarcastic and related to music to give the audience a glimpse of her personality.

When she changes for school she does it quickly, she just has a little time between finishing up her homework and piano practice before school. I gave her an outfit that she could throw together in ten minutes or less and would be appropriate for any high school student (Fig. 15). Her jeans are completely basic, she wears a plain hoodie representing her school, and she has slip on moccasins to save time tying her shoes. The only thing in this outfit that stands out is her scarf, which shows that despite her busy schedule she is putting a touch of effort into her outfit. It is still something you might see on any typical high school girl, but it is a statement for Natalie. The pattern is in bright, warm colors, in an attempt to capture her parent's attention and engage them.

As we get into the play, Natalie appears to have progressed to the second stage, where she learns how to cope with her mother's illness. This stage is often

accompanied by thoughts of anger and resentment, which often lead to feelings of guilt (Baxter 26). Members of BRIDGES state that it is important to educate the family about coping techniques during this stage, and this is again something that neither Natalie nor Dan are getting. When Natalie does express frustration with their situation, Dan essentially calls her selfish. This lack of education leads to both of them developing unhealthy coping mechanisms.

This second stage is the one that Natalie appears to be in for the majority of the play, coping with her mother's illness by throwing herself into school and music and eventually into drugs and clubbing. The program notes that it is important to have someone to vent to during this stage, and until she meets Henry Natalie has no one like that. Even after she begins dating Henry, she has a lot of trouble opening up to him about her family, since she sees him as normal and believes he would not understand. Since she feels like she has no one to vent to, she holds on to a lot of anger and remains in this second stage for quite a while. To display this change from the first stage, I started to dress her just a little more rebelliously, although not too overtly. I still wanted to keep it simple, because Natalie remained incredibly busy throughout the show. A leather jacket to expresses a new edge to her style, but it still has a feminine fit and style (Fig. 17). I also made the jacket burgundy instead of black, to draw attention and mentally arouse people around her. In addition the warm color differentiates her more from her father, since she is progressing through the stages without him. I also gave her lighter wash jeans and a grey t shirt to grunge up her look a bit and show Henry's growing influence at this point in the show.

Natalie's progression through the stages of grief explain many of her costume changes, but there are other factors affecting her behavior (and therefore her clothing) as well. In Wals et al.'s 2005 study of children of bipolar parents, they discovered that familial loading of a unipolar disorder leads to an increase in later problems, both behavioral and emotional. Ormel J et al. did a similar study that same year, and discovered that familial loading of both internalizing and externalizing psychopathologies was related to an increase in internalizing and externalizing issues, respectively. Internalizing behaviors include social withdrawal, feelings of guilt, sadness, or loneliness, and feeling unloved. Externalizing behaviors include physical and relational aggression, running away from home, and underage use of drugs and alcohol. Diana's erratic behavior throughout the course of her illness would have a big impact on Natalie's future problems, and we see her struggle with both internalizing and externalizing problems just like her mother, although to a lesser degree.

Throughout her life Natalie has been internalizing everything that has happened in her family, and she turns the anxiety she feels about events in her life towards herself. She responds by trying her hardest to be perfect, a perfect musician, a perfect student, anything to improve herself. She withdraws socially to accomplish these goals, which just exacerbates the feelings of loneliness she was experiencing due to the amount of attention her mother required. For her third outfit, when she has an important recital, I put her in a very simple, proper dress (Fig 16). Natalie has been internalizing her Mother's criticisms her entire life, and does not think very much of her looks, so even though the performance is important to her goal she would not wear anything very flashy or revealing.

Because of her crazy schedule, Natalie has very little time for friends. However even at the beginning of the play we see her beginning to dismiss the damaging, internalizing thoughts, expressing more anger towards her parents than herself. However this quickly snowballs out of control. We later see her progress to externalizing issues, drinking and taking drugs, acting out towards her parents and other adults, and taking out her anger on her only friend, Henry (Kitt 59-61). When these externalizing behaviors start to fully manifest, she changes to her more rebellious outfit (Fig. 17).

At the end of the show when Diana has finally made progress in her disease, Natalie begins to make progress as well. She makes peace with both Henry and her parents and finds a healthier balance between school, family, and social life. Her final outfit is a dress for a somewhat casual school dance, and it is the showiest costume she wears. This is not saying much with Natalie, just a little sequins and satin (Fig 18). But it does show that she has decided that her relationship with Henry is worth putting forth some effort, and the color blue is associated with pleasure and relaxation (Lebreque 189).

Henry

Character Analysis

Henry is an interesting character because even though he is crucial to the story, we find out very little about him. All we are really told is that he is a talented Jazz pianist, he is very nice, and he smokes a lot of marijuana. Natalie is attracted to him in large part because she sees him as normal, which is something she's been striving for her entire life. However Natalie recognizes how strange her home life is, so out of a

fear of rejection she would only allow herself to get close to someone who she perceived as at least a little strange. The playwrights describe him as "Musician. Romantic. Stoner. Slacker. Philosopher King. Seventeen" (Kitt 4).

Costume Application

Because of how little we learn about him, I could not apply much of my psychological research to Henry's costumes, so I relied on the evocative and the basic factual research I had done. Henry was one of the few characters that I felt I could use to really update the show from 2008. Although there are plenty of clothes that are associated with the stereotype of a high school stoner, Henry is not a stereotypical kind of guy. I decided that a good way to both update the look of the show and to set him a bit apart from the stereotype was to give his clothes a little hipster twist.

The only way I found to apply my psychological research to Henry's costumes was in my color choices. For the most part, I kept him in cool colors, because Natalie would be attracted to a calming presence and cool colors have been reported to evoke those feelings in observers (Labrecque 189-191). However for his very first outfit, when he first introduces himself to Natalie, I put him in a bright red flannel (Fig. 20). The same review conducted by Labrecque and his colleagues noted that warm colors are more likely to increase physical and mental arousal and generate excitement (Labrecque 189-191). However, if the colors have a high value, meaning they are very true and bright, they can increase likeability while still inducing feelings of relaxation (Labrecque 189). So while I put Henry in warm colors for this scene to attract Natalie's attention, I used a red with a very high value to maintain that relaxation as well. The style of his first outfit- jeans, t-shirt, button down- is pretty standard high school boy,

with some grunge flavor to show that he is a little alternative. You can see the influence of this grunge style in Natalie's fourth outfit (Fig. 17). I also gave him a Louis Armstrong t-shirt to establish his love of jazz and music.

For his second outfit, the playwrights specifically mention that he wear a rugby shirt, but I stuck with the cool color palette so that it would fit with the rest of his wardrobe (Fig. 21). I put him in shorts even though these scenes take place in September and October because Henry is the type of character who would wear shorts well into fall just to be different. For his third outfit I kept the shorts, but swapped out his rugby shirt for a Hawaiian one (Fig. 22). I have found that Hawaiian shirts have become very popular in recent years, especially among the hipster stoner crowd that I chose to make Henry a part of. In addition to this, I see it as an outfit he might wear even in October just to make Natalie smile.

For Henry's final change, I again kept it in cool colors, and I put him in another standard high school boy outfit: jeans and a t-shirt (Fig. 23). To show his alternative side, I also gave him neon sneakers, skinny jeans, a flat-bill hat in bright colors, and a funny music related t shirt.

Dr. Madden

Character Analysis

Dr. Madden is another character that we do not get a lot of in the script, we just see how he affects Diana's illness and her life. The entire time he is on stage he is extremely professional, we learn absolutely nothing about his life outside of his appointments with Diana. His character description in the play reads "On the young side of ageless. Assured. A rock star" (Kitt 4). The only real clue we get to his

personality is how Diana sees him, occasionally when he is on stage she will see him as a "scary rock star" for just a moment (Kitt 69). There will be a quick lighting change, a guitar chord, and he will sing one of his lines.

Costume Application

Dr. Madden was tricky, because he is a very professional person but there is something about him that makes people refer to him as a rockstar. In addition to Diana's hallucinations, the women at Dan's work who recommended Dr. Madden specifically describe him as a rock star (Kitt 37). To achieve this, I kept the silhouette of his outfit very professional and used the texture and color of his clothes to achieve the rockstar look (Fig. 24). I associate rockstars with a very opulent, over the top feel so I made his clothes out of very high quality fabrics. His tie and shirt are both satiny and his trousers are made of a wool/cashmere blend. In addition to using high quality fabrics, I chose to put him in mostly dark colors, to show the rockstar edge. It is tempered by the light grey color of his trousers and his lab coat, but his dark purple shirt paired with a black tie and a satin sheen make him look a little dangerous. His tie is very narrow, which is somewhat uncommon in a professional setting, so it adds to his edge. I also gave him pointy toed shoes to show that he cared about his appearance enough to go beyond the generic black dress shoes that most men wear for every occasion.

Dr. Fine

Character Analysis

We get even less information about Dr. Fine than we do about Dr. Madden, he is only on stage for five pages, and the majority of his lines are describing Diana's condition and prescribing pills. He is made out to be extremely professional and a little insensitive.

Costume Application

Since Dr. Fine always seems to keep his and Diana's meeting very short, I dressed him like a doctor that has places to be (Fig. 23). I started with practical tennis shoes that show little concern for trends, and kept the rest of his outfit just as sensible. Instead of expensive fabrics I dressed him in things that would be cheap and easy to clean. Instead of dark, bold colors like Dr. Madden, I gave him a simple blue shirt and khakis. I also made the colors of his outfit a little bit mismatched, pairing a shirt that is a little too light with his dark tie and dark khakis. If Dr. Fine is too busy to listen to Diana's concerns about the final regimen of pills he has her on he certainly does not have time to match his outfits well.

Conclusion

Through my research, I discovered a lot about bipolar depression, mental illness in general, and what it is like to live with someone who is struggling with a mental illness. All of this gave me great insights into what each character would wear at different points in their lives, and hopefully it comes through in my designs. Brian Yorkey and Tom Kitt took their show very seriously, and wanted to enlighten people

about the realities of mental illness. I feel that my costume design respects this goal by applying my own research, and I feel that these costume choices help in honestly depicting the lives of sufferers of mental illness and their families.

Appendix A Costume Renderings





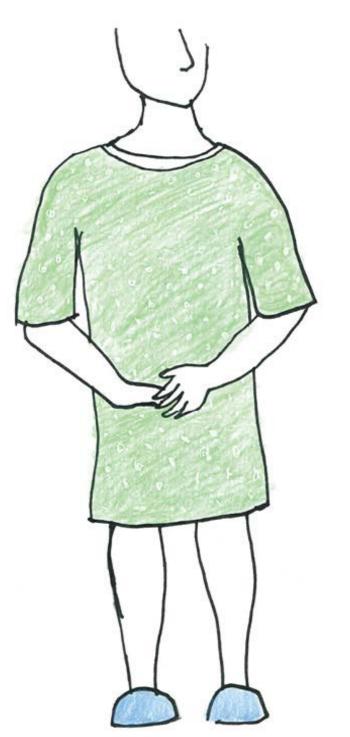
Diana: "My Psychopharmacologist and I" Figure 2







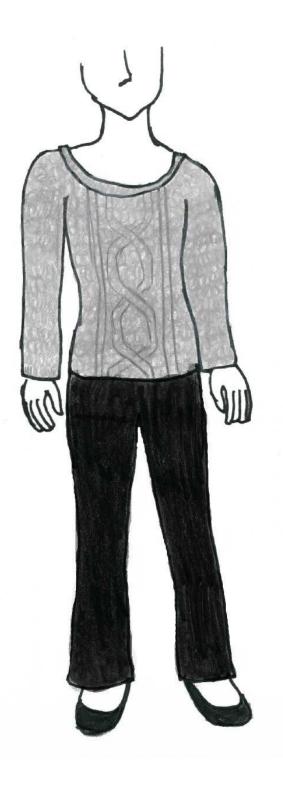
Diana: "It's Gonna be Good" **Figure 3**







Diana: "Wish I Were Here"
Figure 4

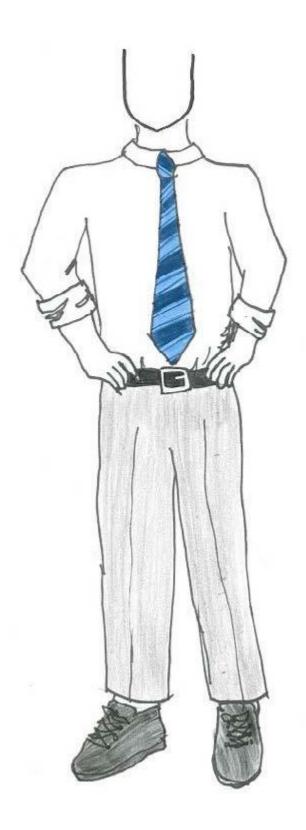




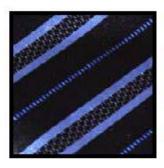


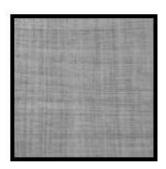
Diana: "Song of Forgetting"
Figure 4











Dan: "Just Another Day" Figure 7









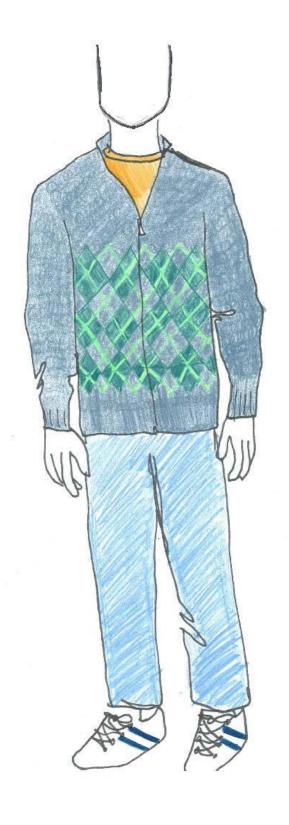
Dan: "It's Gonna be Good" **Figure 8**







Dan: "Wish I Were Here" **Figure 9**









Dan: "How Could I Ever Forget?" Figure 10



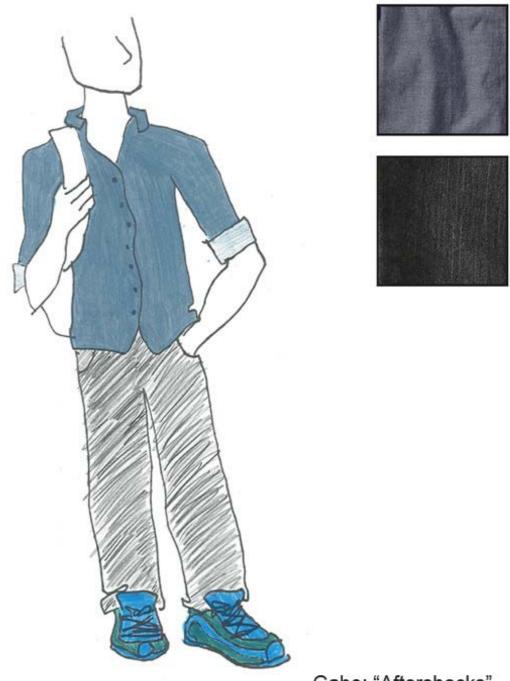




Gabe: "Just Another Day"
Figure 11

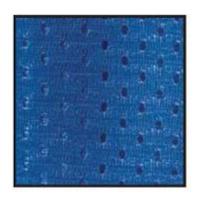


Figure 12



Gabe: "Aftershocks"
Figure 13

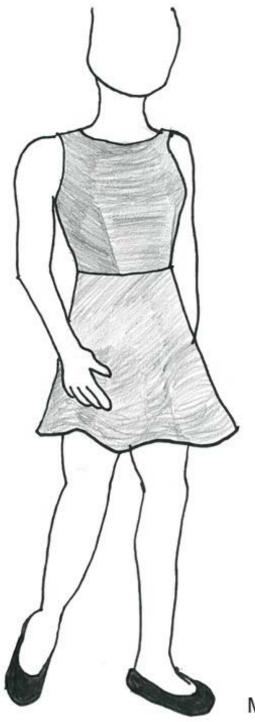




Natalie: "Just Another Day A"

Figure 14







Natalie: "Make up Your Mind/Catch me I'm Falling"

Figure 15





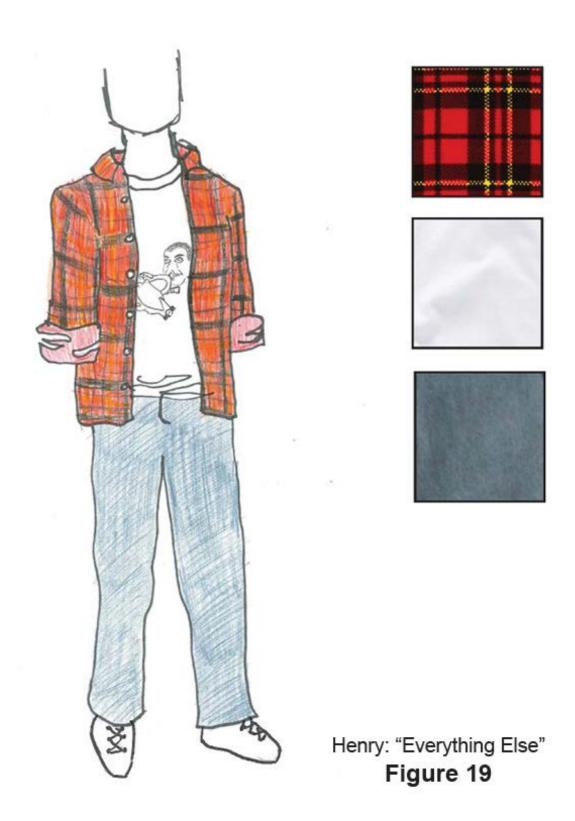


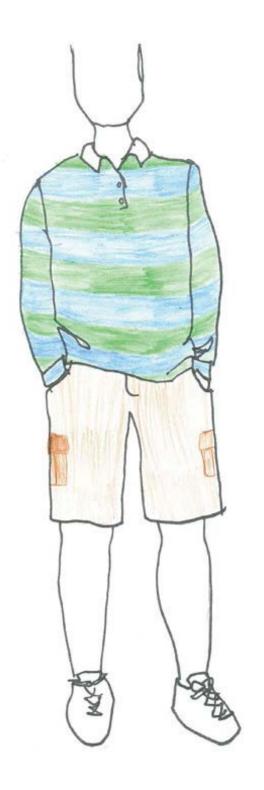




Natalie: "I've Been"
Figure 17









Henry: "Perfect For You"

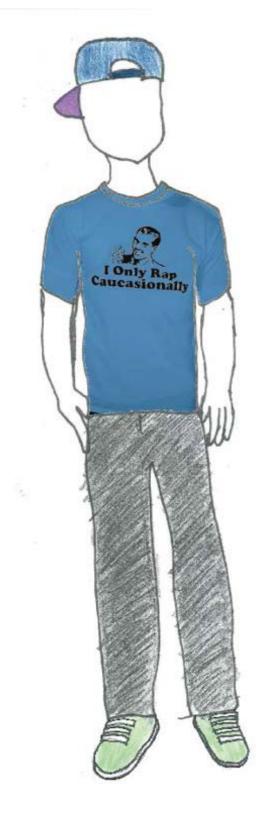
Figure 21







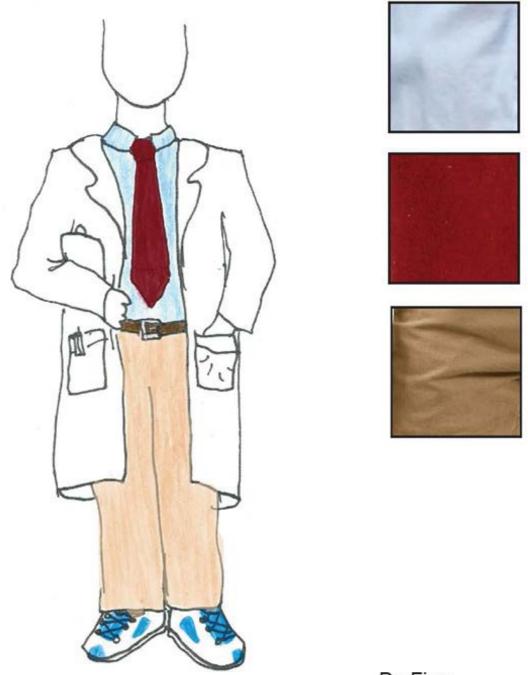
Henry: "Make up Your Mind/Catch me I'm Falling" Figure 21







Henry: "Wish I Were Here"
Figure 22



Dr. Fine Figure 23



Appendix B

Sample Research

Figure 25: Evocative and factual research for Diana



The Stepford Wives





Figure 26: Evocative and factual research for Dan



Ned Stark (Game of Thrones)





Figure 27: Evocative and factual research for Gabe

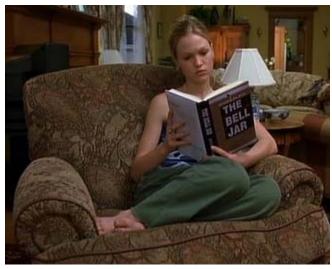


Norman Bates (Psycho)





Figure 28: Evocative and factual research for Natalie



Kat Stratford (10 Things I Hate About You)





Figure 29: Evocative and factual research for Henry

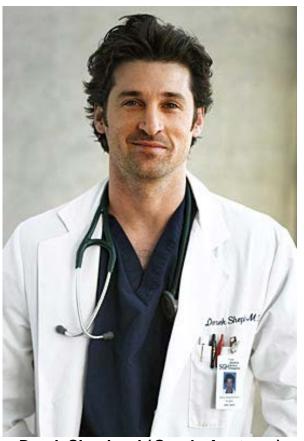


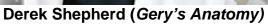
Blake, Adam, Ders (Workaholics)





Figure 30: Evocative and factual research for Dr. Madden







Mick Jagger



Works Cited

- Aho, Anna L., et al. "Development And Implementation Of A Bereavement Follow-Up Intervention For Grieving Fathers: An Action Research." *Journal Of Clinical Nursing* 20.3-4 (2011): 408-419. *PsycINFO*. Web. 4 Nov. 2014.
- Baxter, Elizabeth A., and Sita Diehl. "Emotional Stages: Consumers And Family

 Members Recovering From The Trauma Of Mental Illness." *Psychiatric Rehabilitation Journal* 21.4 (1998): 349-355. *PsycINFO*. Web. 9 Sept. 2014.
- Frye,M.A. (2011).Bipolar depression—A focus on depression. New England Journal of Medicine, 364, 51–59.
- Hoberg, Astrid A., et al. "Group Interpersonal And Social Rhythm Therapy For Bipolar Depression." *Perspectives In Psychiatric Care* 49.4 (2013): 226-234. *PsycINFO*. Web. 17 Nov. 2014.
- Hogan, Michael F., Jane Adams, Rodolfo Arrendando, Patricia Carlile, Charles G.
 Curie, Daniel B. Fisher, Anil G. Godbole, Henry T. Harbin, Larke N. Hunag,
 Thomas R. Insel, Norwood W. Knight-Richardson, and Ginger Lerner-Wren. "The
 Final Report of the President's New Freedom Commission on Mental Health."
 President's New Freedom Commission on Mental Health: Reports. President's
 New Freedom Commission on Mental Health, 22 July 2003. Web. 09 Sept. 2014.
- Keks, Nicholas A., et al. "Evaluation Of Treatment In 35 Cases Of Bipolar Suicide."

 Australian And New Zealand Journal Of Psychiatry 43.6 (2009): 503-508.

 PsycINFO. Web. 9 Sept. 2014.
- Kitt, Tom, and Brian Yorkey. *Next to Normal*. New York: Theatre Communications Group, 2010. Electronic.

- Labrecque, Lauren I., Vanessa M. Patrick, and George R. Milne. "The Marketers'

 Prismatic Palette: A Review Of Color Research And Future Directions."

 Psychology & Marketing 30.2 (2013): 187-202. Business Source Complete.

 Web. 18 Nov. 2014.
- Michels, Spencer. "Conversation: Pulitzer Prize Winners in Drama, Tom Kitt and Brian Yorkey of 'Next to Normal'." *PBS*. PBS, 14 Apr. 2010. Web. 13 Nov. 2014.
- Ormel J1, Oldehinkel AJ, Ferdinand RF, Hartman CA, De Winter AF, Veenstra R, Vollebergh W, Minderaa RB, Buitelaar JK, Verhulst FC. "Internalizing and externalizing problems in adolescence: general and dimension-specific effects of familial loadings and preadolescent temperament traits." Psychol Med. 2005 Dec;35(12):1825-35.
- Sienaert, Pascal. "What We Have Learned About Electroconvulsive Therapy And Its Relevance For The Practising Psychiatrist." *The Canadian Journal Of Psychiatry / La Revue Canadienne De Psychiatrie* 56.1 (2011): 5-12. *PsycINFO*. Web. 16 Nov. 2014.
- Singh, V., et al. "Discriminating Primary Clinical States In Bipolar Disorder With A

 Comprehensive Symptom Scale." *Acta Psychiatrica Scandinavica* 127.2 (2013):

 145-152. *PsycINFO*. Web. 22 Nov. 2014.
- Vargas-Huicochea, I., L. Huicochea, C. Berlanga, and A. Fresán. "Taking or Not Taking Medications: Psychiatric Treatment Perceptions in Patients Diagnosed with Bipolar Disorder." Journal of Pharmacy and Theraputics 39.6 (2014): 673-79.

 Wiley Online Library. Web. .
- Wals M, Riechart CF, Hillegers MHJ, Nolen WA, Van Os J, Ormel J, Verhulst FC.

"Prediction of change in level of probelm behavior among children of bipolar parents." *Acta Psychiatr Scand* 2006: 113: 23-30. Web. 9 Sept. 2014

Entitled: Next to Normal: A Costume Design Based in Psychological Research

has been approved as meeting the thesis or project requirement for the Designation University Honors with Distinction

Date Amy RohrBerg, Honors Thesis Advisor, Theatre Department

Date Dr. Jessica Moon, Director, University Honors Program