

■ Illness as Thinking in Virginia Woolf's *Orlando*

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Abstract

This paper has two parts. The first part discusses how Gilles Deleuze and Felix Guattari renew the concept of illness by overthrowing the psychoanalytic theory of subject and desire. Psychoanalysis misunderstands illness to the extent that it reads illness in a negative way. Nevertheless, Deleuze and Guattari develop their "illness as thinking" or schizoanalysis which sets desire free from the imprisonment of psychoanalysis and presents it as a force to assemble/disassemble machines. According to Deleuze and Guattari, whether as small as organs or as big as human beings, everything in the world is and should be regarded as a machine. They are connected and disconnected by virtue of desire. In this light, illness manifests the nature of life as a zone of indiscernibility by disclosing the significance of desire. On the surface, Deleuze and Guattari relentlessly criticize psychoanalysis, but their ultimate target is the commonsensical world of differentiation. What is important is not the subjectivity established by the lack caused by castration and the Oedipus complex but the forever-floating desire as the force of life which oscillates among organs, humans and machines.

Bearing this in mind, the second part exemplifies Virginia Woolf's *Orlando* in which Orlando's second oversleep diagnosed as illness demonstrates that Orlando embodies life as a zone of indiscernibility and sex as merely one attribute of this greatest machinic assemblage or one facet of this indiscernible zone. We should not put emphasis on the *result* of Orlando's sexual transformation (*either* a man *or* a woman) but on the *possibility* which life force/desire oscillates between them (*both* a man *and* a woman). With the evacuation

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of three goddesses, Woolf points out life as a zone of indiscernibility can never be stabilized by any virtue. Its nature is forever floating and it is indiscernible from other objects.

Keywords: illness, Gilles Deleuze, Felix Guattari, Virginia Woolf, *Orlando*, machines, desire

Introduction

Dr. Cawley: "It used to be that the kind of patients we deal with here. [They] were shackled and left in their own filth. They were beaten. As if whipping them bloody would drive the psychosis out. We drove screws into their brains. We submerged them in icy water until they lost consciousness. Or even drown."

Teddy Daniels: "And now?"

Dr. Cawley: "We treat them. Try to heal, try to cure. And if this fails, at least we provide them with a measure of comfort in their lives. Calm."

—*Shutter Island*

The above conversation takes place between the major protagonist, Teddy Daniels (played by Leonardo DiCaprio) and the attending Dr. John Cawley in *Shutter Island* (2010). The whole film is about a "performance" in a mental institute for Teddy who is a patient there but thinks he is a police officer, investigating a missing case there. On the one hand, from the above conversation, we know how the mental institutes treat patients relentlessly but justify their behaviors in the name of medicine (scientifically) and of bringing calm to patients (morally). Such behaviors seem mandatory to sustain the safety, stability and growth of society. Nevertheless, can we truly conceive of illness when this domain has been taken over by science's spokespeople and when patients' voices have been ignored for not knowing what they are doing? What exactly do we know about illness?

The spectrum of illness covers up numerous physical and mental syndromes with each of their own symptoms. Critics have devoted themselves to studying the meaning of illness and the role it plays in society. For example, Michel Foucault in *Madness and Civilization* declares that as illness has been stigmatized as evil and shameful, being labeled as an oppositional force not only terrifies society but also accentuates its strength and domination. In his genealogical methodology, Foucault has pointed out how in human history, society has maltreated and suppressed people who are different. Using these patients as examples, society even encourages normal/healthy people to desire their own domination. Likewise, in Susan Sontag's *Illness as Metaphor*, illness is a poignant label, stigmatizing the patient as well but it is also a medium through which critics can investigate the infrastructure of society. The deadly illnesses she investigates include tuberculosis and AIDS. Nevertheless, on the one hand, the aforesaid critics do not explore illness as it is. We never explore the cellular structure of illness by knowing illness in and of itself. We simply regard it as a cardinal prerequisite and medium behind which the structure of society is the

main point.¹ On the other hand, these conceptions of illness are very negative. Admittedly patients and society are thus suffering, but apart from these readings which are somehow stigmatizing illness and its patients, is there any positive meaning inherent in illness? Despite the fact that patients indeed have painful symptoms, *in what way* can we interpret them from a positive perspective? To put it another way, when we regard illness as negative, is it because illness is such or is it because we are taught so by the common sense in our world?

Therefore this paper will focus on the concept of illness and tries to read out some positive meanings of it by having recourse to Gilles Deleuze and Felix Guattari's conception of illness, especially the mental ones which have been (wrongly) diagnosed by psychoanalysis. The first part will explicate Deleuze and Guattari's re-reading of psychoanalysis so as to demonstrate how we can initiate "illness as thinking," how such a reading can shed new light on our previous understanding of illness, of the body's capacity and of desire, and how their "illness as thinking" puts the commonsensical world under the critical lens of examination when such a reading points out the *indiscernible* essence of life. In other words, the schizo "illness as thinking" in this paper does not conflate bodily discomforts with mental malfunction of schizophrenia; instead it should be regarded as a rhetorical strategy, pointing out how thinking thus framed can be the initial point to dismantle the world built in the name of common sense. Therefore, the second part will shift to Virginia Woolf's *Orlando* and argue how Orlando's second oversleep for seven days which is diagnosed as illness is *de facto* her practice of "illness as thinking." Orlando's oversleep triggers her sexual transformation, but, I want to argue, this scenario is not imaginary but real, by which is meant that Orlando embodies the indiscernible life force. We should not focus on whether she *chooses* to be male or female but on the essence of life which is forming multiple assemblages with other machines and with the milieu. Even though Orlando can appear in one sex only, the possibility of being the other sex is involuted as well. The schizo "illness as thinking" as a reading strategy can take her seven-day oversleep as Woolf's performative gesture, directed toward upsetting and even dismantling gender divisions of her time. In this respect, without our fully conceiving of the radical significance of desire initiated by illness,

¹ Think of SARS and the tremendous fear and agony aroused in society in 2003. At that time, people did not understand this illness as it is, like the viruses' cellular structure and how it attacked the normal cells. What people know about SARS is it is a deadly illness. Once you got it, there would be no chance to recover from it, not to mention the stigmatized AIDS. People tend to label the AIDS patients as gays, sexually loose and perverse without realizing the way that the HIV virus attacks patients' immune systems and that the patients can be infected through wound and blood transfusion, besides sexual intercourse.

we could never account for or even explore the well-disputed issue of sex, gender and sexuality in *Orlando*.

The Schizo Conception of Illness

Firstly I will define the concept of illness that I want to discuss in this paper. As I said, this terrain has been explored by many great thinkers and I will not cover physical injury and sickness along with their physical and mental symptoms. In other words, illness, in this paper, will not be regarded either literally as catching a cold or having diarrhea or metaphorically as the prophecy of apocalypse yet to demonize the illness and the patient as the aforesaid critics argue. Instead, I will have recourse to Deleuze and Guattari and their re-reading of certain *conditions* which have been diagnosed as illness by Freudian psychoanalysis. From their two *Capitalism and Schizophrenia* books, Deleuze and Guattari have stood ardently against psychoanalysis whose job is to unveil the signifier causing the trauma of the analysand. Deleuze even satirizes psychoanalysis by saying “The only important thing for Freud is that the horse be the father—and that’s the end of it. . . . All the real-desire has already disappeared: a code is put in its place, a symbolic overcoding of utterances, a fictitious subject of enunciation who doesn’t give the patients a chance” (*Dialogues* 80). In *Anti-Oedipus*, he and Guattari claim that castration and Oedipalization are the cornerstones of psychoanalysis and by means of them, subjectivity can be formed and desire can thus be channeled and domesticated (being harnessed by the yoke of “daddy-mommy-me”).

However, from Deleuze and Guattari’s perspective, the nexus of psychoanalysis’s misinterpretation lies in misunderstanding of desire. According to them, “psychoanalysis is taking part in the work of bourgeois repression at its most far-reaching level, that is to say, keeping European humanity harnessed to the yoke of daddy-mommy and *making no effort to do away with this problem once and for all*” (*Anti-Oedipus* 50). Thus, Deleuze and Guattari intend to revise the way of conceiving of illness by rereading the way of conceiving of desire. If we want to understand illness, we have to understand desire first and desire has everything to do with its traits of floating and passing between organs. In *Anti-Oedipus*, they provide three modes of desiring-production in contrast to psychoanalysis: the desiring machine, the body without organs, and the nomadic subject (1-22). Besides reshaping the meaning of the subject, which is the residue or leftover when desires as forces go astraddle over each other (88), they also argue that the desiring machine “is related to a continual material flow (*hylè*) that it cuts into”

(36) and wherever desires pass through organs, these organs are free to diminish their original functions and attach themselves to new ones and become bodies without organs (9). In other words, the inauguration of thinking our bodies' capacity is triggered by the forever floating desire. Wherever desire goes, the organ which it connects will be devoid of its primal function within the original domain of organization and organism and will be connected with others. When desire fades away or "dries," the connection will be broken off.

Such an eternal process of assembling and disassembling other organs is the sheer praxis of machines and such experiences are real in our everyday life. For Deleuze and Guattari, desire is not something lacking, as psychoanalysis says but "a machine, and the object of desire is another machine connected to it" (26). Desire plays an important role and organs can be understood as machines which are ready to be assembled/disassembled when the floating desire attaches them together or separates them apart. According to Adrian Parr, "desire is viewed not just as an experimental, productive force, but also as a force able to form connections and enhance the power of bodies in their connection. . . . Deleuze defines desire accordingly in his work with Guattari as *assembled or machined*" (emphasis added; *Deleuze Dictionary* 63-64). Machines are thus connected to other machines when desire floats: "Everywhere *it* is machines—real ones, not figurative ones: machines driving other machines, machines being driven by other machines, with all the necessary couplings and connections" (*Anti-Oedipus* 1). Deleuze and Guattari exemplify a baby sucking its mother's breasts to explicate how the baby's digestive machines (the stomach and other internal organs) and the sucking machine (the mouth) are now connected to the milk-producing machine of the mother (the breasts). Machines are connected to other machines. As they say, "An organ-machine is plugged into an energy-source-machine: the one produces a flow that the other interrupts. The breast is a machine that produces milk, and the mouth a machine coupled to it" (1). What Deleuze and Guattari try to point out is how the residual subjectivity of humans in contrast to the subject-centered psychoanalysis stresses the floating-oriented desire and how it acts on the organs, organism and organization.

In addition, the connection and disconnection do not just take place among the real objects as machines (organs, humans). They also stress the milieu in which assemblage/disassemblage takes place: machines form assemblages *with* and *within* the milieu. The famous example that Deleuze and Guattari use is the becoming-horse of Little Hans in which Hans is not suffering from castration complex by witnessing the "peepee-maker" of the horse but is situated in an assemblage with the horse, the omnibus and the street. As they argue, "Little Hans's horse is not representative but affective. It is not a member of a species

but an element or individual in a machinic assemblage: draft horse-omnibus-street. . . . Is there an as yet unknown assemblage that would be neither Hans's nor the horse's, but that of the becoming-horse of Hans?" (*A Thousand Plateaus* 257-58). What they emphasize is we should now focus on how the floating desire assembles/disassembles machines in milieus in multiple ways. What is in charge is not the subjective consciousness of humans but desire as the force of life. In every condition, desire maneuvers the milieu of assemblage/disassemblage in which every machine is thereby involuted or unfolded. Take Hans as example, Deleuze and Guattari thus argue, "The street is as much a part of the omnibus-horse assemblage as the Hans assemblage the becoming-horse of which it initiates" (263). And when every organ and every human being acts as desire goes in the milieu that desire manipulates, we are not the "thinking thing" in the Cartesian *cogito* but desiring machines. As desiring machines, we are all maneuvered by desire and are thus situated in the terrain of life as the biggest machinic assemblage, or the other Deleuzian term we can use is the plane of consistency. As such, life is a zone of indiscernibility in which every part of it is connected/disconnected by means of desire.

Nevertheless, the conception of indiscernibility is what psychoanalysis threatens people with, by cautioning them that if they fall into the trap of situating themselves in the middle, the indiscernibility would become a very horrible condition because they will not be able to distinguish illusion from reality. Deleuze and Guattari paraphrase psychoanalysis, saying: "if you don't follow the lines of differentiation daddy-mommy-me, and the exclusive alternatives that delineate them, you will fall into the black night of the undifferentiated" (*Anti-Oedipus* 78). In psychoanalysis, you are either normal or you are sick; there is no middle between these two extremes. However, in Deleuze and Guattari, there is no need to fear the condition of being indiscernible because it is the prototype of life. What matters is not whether we have the capacity to distinguish one thing from the other but how life can never be settled down as one thing *once and for all*. Admittedly, Deleuze and Guattari give such anti-psychoanalysis study a proper name, schizoanalysis, because according to psychoanalysis, the symptoms of schizophrenia as syndrome include hallucinations and delirium. When the schizophrenic is unable to distinguish illusion from reality, under *normal* circumstances, psychoanalysis would propose treatments. However, for Deleuze and Guattari, the *incapacity* of the schizophrenic brings forth life as a zone of indiscernibility because desire is oscillating among multiple forces, among different plateaus on the plane of consistency. Indiscernibility is difference in and of itself and Deleuze and Guattari's schizoanalysis encourages people to think beyond normality and rationality. For them, thresholds can be crossed and bound-

aries can be traversed and it becomes the reason why they would claim that there is no need for us to choose to be “a parent or a child,” “man or woman,” and “dead or alive” (75) because every possibility is involuted within this zone of indiscernibility as long as desires go.

However, we should bear in mind that Deleuze and Guattari do not argue that a person can be in both of these conditions *simultaneously*. Rather, they argue that one can exist in one condition only (dead *or* alive, man *or* woman, a parent *or* child) but the possibility of being the other condition has always-already been involuted within the present condition (dead *and* alive, man *and* woman, a parent *and* child). It just needs some occasions or catalysts *proper* to initiate, to unfold the possibility of becoming-alive, becoming-woman and becoming-child. As Deleuze says, “The child in us . . . is contemporary with the adult, the old man and the adolescent. Thus it is that the past which is preserved takes on all the virtues of beginning and beginning again: it is what holds in its depth or in its sides the surge of the new reality, the bursting forth of life” (*Cinema 2* 89). For Deleuze and Guattari, psychoanalysis assists to establish a commonsensical world by suffocating many different or sick thoughts. The world as such, including the desire to strangle desire and to pursue normality, is running reticently, silently and manipulatively. What tortures patients and even maltreats them is not so much the specific discipline (science and medicine) as the commonsensical world in the name of which science and medicine justify their behaviors. In this sense, psychoanalysis is just an ostensible target. By means of disclosing the radical meaning inherent in illness, Deleuze and Guattari eventually intend to expose the brutal nature of the commonsensical world. As they say, “If desire is repressed, it is because every position of desire, no matter how small, is capable of calling into question the established order of a society: not that desire is asocial; on the contrary. But it is explosive; there is no desiring-machine capable of being assembled without demolishing entire social sectors” (qtd. in Seem xxiii).

In this light, illness, if we accept this term temporarily, in schizoanalysis of Deleuze and Guattari, is not entirely negative. They are intrigued in knowing how illness can open up the body’s boundary and its capacity wherever desire flows. For them, the schizophrenic is experiencing the intensive journey when the territory of his/her body is open unto forces: “He [the schizophrenic] does not confine himself inside contradictions; on the contrary, he opens out and, like a spore case inflated with spores, releases them as so many singularities that he had improperly shut off, some of which he intended to exclude, while retaining others, but which now become points-signs (*points-signes*), all affirmed by their new distance” (*Anti-Oedipus* 77). We can thereby argue the schizophrenic is be-

coming alive-woman-child when forces penetrate his/her body. In that process, s/he has to resonate, oscillate and vibrate with these forces and every symptom diagnosed as ill or even abnormal turns out to be the attribute of a machine while the schizophrenic is experimenting on assemblages: “[t]hese [states of the schizophrenic] are often described as hallucinations and delirium, but the basic phenomenon of hallucination (*I see, I hear*) and the basic phenomenon of delirium (*I think . . .*) presuppose an *I feel* at an even deeper level, which gives hallucinations their object and thought delirium its content—an ‘I feel that I am becoming a woman,’ ‘that I am becoming a god,’ and so on . . .” (18).

In addition, we have to bear in mind that what Deleuze and Guattari mean by “becoming-woman” does not really mean a man has to take on some surgery to become a woman biologically. Rather, it means to shatter the self-boundary when desires flow through the body and by that time, it is possible to imagine other (mal)functions of organs when our commonsensical world is held in suspension and when the essence of life as a zone of indiscernibility is disclosed. As they say, “the actual, lived emotion of having breasts does not resemble breasts, it does not represent them, any more than a predestined zone in the egg resembles the organ that it is going to be simulated to produce within itself. Nothing but bands of intensity, potentials, thresholds, and gradients” (19). Therefore, when Deleuze and Guattari ask a bizarre question for every psychoanalyst: “Was it possible to denounce Oedipus-as-myth, and nevertheless maintain that the castration complex itself was not a myth but in fact something real?” (83-84), the answer will be absolutely yes. It is because after we conceive of their inspiring theory of machines, castration is merely an intensive process to dissemble the penis as organ; it is now wide open to be attached to other places and organs. In this sense, illness can inaugurate new possibility and especially inaugurate multiple ways of assembling the body’s capacity to act. For Deleuze and Guattari, it should be understood as becoming. It can be viewed as a process to see how the body, *as* and *on* the plane of consistency, can register different forces and how through this becoming, the body’s mortgagor (not its owner or master) can be deformed under the prodigious collision of forces.

Thus, we can understand why for Deleuze and Guattari, the core issue to investigate illness is not how the subjectivity is determined by castration and Oedipus complex as psychoanalysis claims but how desires encounter each other and as such how the subjectivity becomes just the residuum of desires. According to them, patients are not suffering for lacking something but are truly conceiving of the multiplicity inherent in life when being deployed in the milieu of desire production. In this light, it is not hard to imagine that patients are thereby awfully misunderstood and maltreated and it becomes quite clear why Deleuze

and Guattari intend to criticize the commonsensical world and the principle and criteria that establish it. Psychoanalysis is not identical to the commonsensical world but it is identical to the hegemonic world established in the name of common sense. In this respect, Deleuze and Guattari's illness as thinking can shed new light on our previous understanding of being normal and being sick, and their conception of indiscernibility points out the significance of oscillating and becoming among different forces and plateaus. Thus, in the following section, I will exemplify Orlando's second oversleep diagnosed as illness to demonstrate that her "illness" can be interpreted in terms of bodily experimentality and that her sexual transformation is indicative of the essence of life as a zone of indiscernibility.

To Sleep or Not to Sleep—That Is a Question

Being one of Woolf's famous publications, *Orlando* has been widely disputed. Besides the well-known issues of trans-gender and trans-genre, Woolf's spoof of biographical writing, her creation of different writing styles for different literary periods, the stream of consciousness technique and urban modernity in the early twentieth century, there is actually an issue left unexplored by critics: Orlando's mysterious sexual transformation. In the text, the narrator tells us that after sleeping for seven days, Orlando wakes up and suddenly he becomes a woman. The whole process is without any pain or bewilderment, nor with any struggle or even surgery. When critics neglect this part or simply read it as the mandatory scenario to further explore the contentious issue of sex, gender and sexuality, in the face of such an "abnormal" situation, how are we able to explain this puzzling event, not as an imaginary scenario but as something real? If this transformation is initiated by Orlando's oversleep and it is diagnosed as an illness, to what extent can the schizo "illness as thinking" assist us to conceive of Orlando's "illness"?

Before Orlando's second oversleep, he is simply a rich courtier, serving Queen Elizabeth and following the severe gender norm. At that time, sex for Orlando is partitioned off and stabilized and there is no way for him to imagine the possibility of changing it. For example, when the story takes place in the sixteenth century, he is attracted by a nameless ice-skater (only later do we know it is Sasha). From the latter's costume, Orlando cannot tell whether the ice-skater is a man or a woman but he still precipitates to fall for that person instantaneously:

But these details [of the ice-skater's appearance and costume] were obscured by the extraordinary seductiveness which issued from the whole person. . . . He called her a melon, a pineapple, an olive tree, an emerald, and a fox in the snow all in the space of

three seconds—he did not know whether he had heard her, tasted her, seen her, or all three together. . . . A melon, an emerald, a fox in the snow—so he raved, so he stared. When the boy, for alas, a boy it must be—no woman could skate with such speed and vigour—swept almost on tiptoe past him, Orlando was ready to tear his hair with vexation that the person was of his own sex, and thus all embraces were out of the question. (*Orlando* 36)

From the above passage, we know that Orlando thinks in terms of gender difference: no women can skate as well as men and he worships her in those literary clichés as his predecessors did to their muses. In addition, he thinks of nothing else but the heterosexual coupling: certainly he will not embrace a man. Nevertheless, even though Orlando still abides by the mainstream (patriarchal/chauvinistic) culture and even feels perturbed by any violation of the rules, little by little, he encounters different people whose “uncommon” behaviors indicate the vague division between sexes. Orlando is next attracted by a man, the Archduke Harry, who is dressed as and (mis)taken as a woman by Orlando. He calls himself the Archduchess Harriet and in such a restricted society, the persistent and ravenous pursuit of the Archduchess Harriet to Orlando is very uncommon. However, Orlando does not meditate on the radical meaning of his pursuit because it is annoying so much so that he decides to take on the mission of Ambassador to Constantinople (113-14). Right now, Orlando is still restricted in the gender terrain which is demarcated by sex, so he flees away. However, everything changes after his second oversleep.

According to the narrator, Orlando's oversleep happens twice. The first one happens when the Russian princess Sasha abandons him and the second happens when Orlando is in Constantinople as an ambassador and the day after the coronation of his dukedom. In the text, Orlando oversleeps for seven days and his secretaries summon doctors to diagnose Orlando's “illness”:

Next morning, the Duke, as we must now call him, was found by his secretaries sunk in profound slumber amid bed clothes that were much tumbled. . . . No suspicion was felt at first, as the fatigues of the night had been great. But when afternoon came and he still slept, a doctor was summoned. He applied remedies which had been used on the previous occasion, plasters, nettles, emetics, etc., but without success. Orlando slept on. . . . And still Orlando slept. Morning and evening they watched him, but, save that his breathing was regular and his cheeks still flushed their habitual deep rose, he gave no sign of life. Whatever science or ingenuity could do to waken him they did. But still he slept. (127-28)

From this paragraph, we know sleep over a commonly-accepted course of time is diagnosed as illness so his secretaries summon doctors to examine him and try every possible way to wake/cure him but in vain. However, after seven days, Orlando wakes up normally and he, from head to toe, becomes a woman smoothly:

“He stretched himself. He rose. He stood upright in complete nakedness before us, and while the trumpets pealed Truth! Truth! Truth! we have no choice left but confess—he was a woman” (132). Usually, the normal response to such a tremendous change within seven days is “to ring the bell, to scream or to faint” (134). But when Orlando wakes up, from the narrator’s description, she reacts calmly to what happens to her: “Orlando looked himself up and down in a long looking-glass, without showing any signs of discomposure, and went, presumably, to his bath. . . . The change [of sex] seemed to have been accomplished painlessly and completely and in such a way that Orlando herself showed no surprise at it” (133). Then, how are we able to explain the radical meaning of this transformation which is accomplished without any pain or surgery? Or contextualizing this question in my argumentation, how are we able to read it in a machinic way when such a transformation is triggered by Orlando’s oversleep and conceive of it in terms of schizo thinking?

In this respect, I would like to argue that Orlando’s oversleep for seven days which is diagnosed as an illness is simply her experimentation on “machining” her body’s capacity. As I argued earlier, life is a milieu in which every machine is assembled with or disassembled from other machines. Life is an indiscernible zone; life is the biggest assemblage. Notwithstanding different attributes are attached to each of the machines, we still can bear witness to life force which is oscillating among them. So is Orlando. Sex is just the attribute that Woolf chooses to manifest Orlando as a zone of indiscernibility; in Deleuze and Guattari’s schizoanalysis, everyone is bisexual and, as I have argued, we should not interpret it in terms of biological organization (whether one has two sexual organs or not) but in terms of how life force is oscillating between sexes. We can have one sex *only* at one time but the transsexual force is always-already surging beneath the imprisonment or differentiation of common sense. As Deleuze and Guattari argue, “everyone is bisexual, everyone has two sexes, but partitioned, noncommunicating; the man is merely the one in whom the male part, and the woman the one in whom the female part, dominates statistically” (*Anti-Oedipus* 69). And the significance of schizoanalysis is that through “illness as thinking”—the truth of life force can be acknowledged: “The schizophrenic is not man and woman. He is man or woman, but he belongs precisely to both sides, man on the side of man, woman on the side of woman. . . . He is not simply bisexual, or between the two, or intersexual. He is transsexual. He is trans-alivedead, trans-parentchild. He does not reduce two contraries to an identity of the same; he affirms their distance as that which relates the two as different” (76-77). In other words, the point is not about Orlando’s being or choosing her sex but she *is* the embodiment of indiscernible and transsexual force of life.

To put it another way, even though Orlando's transformation makes a woman of her, her sex as a female is a *temporary* result of her desire. If it all depends on when and where her desire goes, we are not sure whether or not Orlando will become a man in the future because her desire never stops floating. Orlando can exist in one sex only (*either* a man *or* a woman); yet the possibility of being transformed into another sex has always-already involuted within the present condition (*both* a man *and* a woman). As Deleuze and Guattari say, "In contrast to the alternative of the 'either/or' exclusions, there is the 'either . . . or . . . or' of the combinations and permutations where the differences amount to the same without ceasing to be differences" (69-70). In other words, what we should focus is no more on the sex, the severe gender rule and the omniscient commonsensical world whose righteousness seems indisputable. Rather, in Deleuze and Guattari's "illness as thinking," sex is more like a patchwork that can be put on and taken off wherever desire is heading and that is exactly the point we should notice: not the sexual formation of man (the issue of Being in Oedipalization) or the deformation of man (understood as illness in psychoanalysis and even in common sense) but the transformation of man by the formation of nonhuman desire in man (the issue of becoming in schizo thinking). As Mark Seem says, "The experience, however, is no longer that of man, but of what is nonhuman in man, his desires and his forces: a politics of desire directed against all that is egoic—and heroic—in man" (xix). And it is because what in charge is and always will be desire. In this light, Orlando is not a subject, a thinking thing, but a desiring machine or a schizophrenic: "The only subject is desire itself on the body without organs, inasmuch as it machines partial objects and flows, selecting and cutting the one with the other, passing from one body to another, following connections and appropriations that each time destroy the factitious unity of a possessive or proprietary ego (anoedipal sexuality)" (*Anti-Oedipus* 72). Thus, it is understandable that Orlando's sex is not determined by any lack or trauma; it is determined by her desire: "Nothing is lacking, nothing can be defined as a lack; nor are the disjunctions in the unconscious ever exclusive, but rather the object of a properly inclusive use that we must analyze" because "*everything divides, but into itself*" (60, 76). Orlando's sexual transformation manifests Deleuze's philosophy of difference.

Furthermore, the cardinal meaning that Orlando's oversleep brings forth is that after her second oversleep, the illusion of common sense as entirety no longer prevails. We can regard Orlando's puzzling but smooth sexual transformation as an interstice of the common sense and Woolf exemplifies the evacuation of the three goddesses to indicate how the world attempts but fails to classify Orlando. The three goddesses, our Lady of Purity, Chastity and Modesty, have to evacuate

themselves because this real experience of Orlando cannot be interpreted by any common sense or normal creed.

In *Orlando*, the three goddesses represent each of the virtues but if we examine their exclamations carefully, we can discover that beneath the so-called virtues worshipped by humans, the brutal and manipulative nature is underlying. For example, our Lady of Purity says, "With my robes I cover the speckled hen's eggs and the brindled sea shell; I cover vice and poverty. On all things frail or dark or doubtful, my veil descends" (*Orlando* 130). Our Lady of Purity only allows the existence of innocence and non-contamination; she excludes those who are in the middle/in-betweenness. Next our Lady of Chastity says, "I am she whose touch freezes and whose glance turns to stone. . . . The highest Alps are my dwelling place; and when I walk, the lightings flash in my hair; where my eyes fall, they kill. Rather than let Orlando wake, I will freeze him to the bone" (130). Our Lady of Chastity rather represents the desire of elimination and brutality. Furthermore, our Lady of Modesty says, "Virgin I am and ever shall be. Not for me the fruitful fields and the fertile vineyard. Increase is odious to me; and when the apples burgeon or the flocks breed, I run, I run; I let my mantle fall" (130-31). Fertility, plentitude, and heterogeneous possibilities are unbearable to our Lady of Modesty; sterility and dryness become the actual virtue emphasized by our Lady of Modesty. With respect to the aforesaid exclamations, purity, chastity and modesty have been regarded as the moral doctrine of women (appearing in the image of ladies) and elevated to establish and sustain a general and commonsensical world (who are *our* ladies). In other words, in the world of common sense, humans are in the pursuit of domination ardently in the name of virtue. No wonder many great thinkers would doubt: "Why do men fight *for* their servitude as stubbornly as though it were their salvation?" (*Anti-Oedipus* 29). It is because people are brainwashed to yearn for abiding by and being praised by virtues.

Therefore, when the three goddesses observe Orlando's "uncommonness," they fail to cover up her naked body with their draperies: "Chastity, Purity, and Modesty, inspired, no doubt, by Curiosity, peeped in at the door and threw a garment like a towel at the naked form which, unfortunately, fell short by several inches" (133). They can only furiously claim:

For there, not here (all speak together joining hands and making gestures of farewell and despair towards the bed where Orlando lies sleeping) dwell still in nest and boudoir, office and lawcourt those who love us; those who honor us, virgins and city men; lawyers and doctors; those who prohibit; those who deny; those who reverence without knowing why; those who praise without understanding; the still very numerous (Heaven be praised) tribe of the respectable; who prefer to see not; desire to know not;

love the darkness; those still worship us, and with reason; for we have given them Wealth, Prosperity, Comfort, Ease. To them we go, you we leave. Come, sisters, come! This is no place for us here. (131-32)

As I said, the normal virtue that these three goddesses incarnate establishes a seemingly faultless commonsensical world. Under this circumstance, only when three goddesses leave, can Orlando wake up. It is because the importance of her sexual transformation could not be fully disclosed when common sense still appropriates the world. As the narrator says, "We are, therefore, now left entirely alone in the room with the sleeping Orlando and the trumpeters. The trumpeters, ranging themselves side by side in order, blow one terrible blast:—'THE TRUTH!' at which Orlando woke" (132). What is this truth that is not compatible with common sense? It is life that does not consist of prohibition, denial, deference and differentiation. By contrast, life consists of *indifferentiation*; life is a zone of indiscernibility. Even though the commonsensical world still attempts at classifying and repressing Orlando's *difference*, this experience is beyond the reach of their domination. We can see how three goddesses fail to cover up Orlando's naked body; their attempt *must* fail because the true essence of life is unclassifiable, indefinite and indiscernible. Orlando embodies the very essence of life.

Conclusion

"To live as a monster or to die as a good man."
—*Shutter Island*

This paper argues that Deleuze and Guattari's schizoanalysis on the one hand attempts to criticize psychoanalysis by pointing out its misunderstanding and misreading of illness; on the other hand, their conception attempts to unveil this hypocritical commonsensical world by disintegrating the hegemony of psychoanalysis and to disclose the brutal fact that the fanatic pursuit of normality is inconspicuously underlying our society and that the cruel discrimination of being different is practiced relentlessly in the name of being NOT normal or in the name of doing this for patients' own good. In Deleuze and Guattari, to misunderstand the meaning of illness is to misunderstand life. For them, the essence of life can be disclosed and thus be conceived of only when illness severs an interstice in our rational world. I exemplify Orlando's oversleep for seven days to demonstrate how her smooth and painless sexual transformation brings on the indiscernibility as the condition of life. As I argued earlier, everyone is bisexual; what matters is not the *result* of sexual transformation but its *possibility*. Deleuze

and Guattari's "illness as thinking" provides a new thinking in which common sense is no longer the prior standard by which to judge everything; it is possible to cross all kinds of thresholds, including the threshold between sexes. As Deleuze and Guattari say, "We pass from one field to another by crossing thresholds: we never stop migrating, we become other individuals as well as other sexes, and departing becomes as easy as being born or dying. Along the way we struggle against other races, we destroy civilizations, in the manner of the great migrants in whose wake nothing is left standing once they have passed through . . ." (*Anti-Oedipus* 85).

However, even though Deleuze and Guattari's concepts of floating desire and organs as machines shed new light on our understanding of the concept of illness, we have to bear in mind that there are still some irresolvable and even contra-reality dilemmas in their conception. Firstly, regarding the relation between desire and illness, we may still wonder, are they too positive to see that invalids are truly *suffering from* illness and there must be some reasons causing their trauma? Isn't it also important to cure the patient or at least lessen his/her pain by knowing the cause? Secondly, if patients are not falling sick of serious illnesses but aggressively experimenting on discovering the capacity of their bodies, why does Deleuze and Guattari's *solution* emanate from another illness (schizophrenia)? How radical can their conception be when it is simply directed from another illness and when they merely establish a new interpretation from this illness (schizoanalysis)? If we aver that it is how Deleuze and Guattari dissociate schizophrenia from the trap of psychoanalysis, we must ask why they chose schizophrenia when there are multiple mental diseases overtly confirmed by psychoanalysis and the public?

However, we can easily imagine Deleuze and Guattari's answer if they were asked. They would radically claim that if we ask the aforesaid questions, we are missing the main point. The point is not about what illness IS or means ("So *that's* what it was!" "So it's *me!*") (*Anti-Oedipus* 20), because that means there is an answer out there, a possible cure and even a standard by which to distinguish who is ill and who is healthy. Instead, for Deleuze and Guattari, they try to read out the *difference in itself*, that which is the only force of life and that which always repeats itself. Illness becomes a platform of experimentation on which body is used as a machine or as part of a machine which can be assembled or dissembled in certain desiring milieus. They not only disregard the normal way of assessing illness but also radically subvert the norms of health. If we subvert the norm of health, those who were regarded as ill are not ill any more. Then, what do we need a cure for? It is also the reason why cure is never a major concern in their conception but the modulating of the mold of health (Smith xxi). Under this

circumstance, my third suspicion about their schizoanalysis is: in what way is schizoanalysis not a tautology? We may easily fall into the tautological trap by arguing that if anyone has doubts about schizoanalysis, he or she is simply ignoring its possibility.

Nevertheless, even though there are some dilemmas in their conception, Deleuze and Guattari's "illness as thinking" can still be regarded as the point of departure to further take into account the issue of ethics. When Teddy Daniels in the end of *Shutter Island* says "To live as a monster or to die as a good man," we may start to wonder: what is the standard that defines "a monster" and "a good man" and who puts this thought into praxis? If illness can be interpreted neither in a totally negative way nor in a carnivalesque way, what choice can patients have besides the two that I just mentioned above? Can they be treated differently if we interpret illness in a different way? After all, what possibility can our society allow for the patients?

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疾病式思考：慾望機器歐蘭朵

摘要

本篇論文分為兩個部份。第一部份討論德勒茲與瓜達希關於疾病的概念如何翻轉精神分析關於主體和慾望的概念；對德勒茲與瓜達希而言，精神分析誤讀了疾病的意義。透過他們「精神分裂分析」(schizoanalysis)或「疾病式思考」，德勒茲與瓜達希將慾望從精神分析的牢籠中解放出來。對他們而言，慾望是多元、自由流動、穿越並連結起身為機器的不同器官；疾病帶出生命的本質乃是一種不可區辨的區間 (a zone of indiscernibility)。表面上，他們抨擊精神分析，但他們真正試圖要瓦解的對象，則是以區分為主的常識世界。德勒茲與瓜達希的重點不在主體性是否由閹割以及伊底帕斯情結所造成的匱乏所構成，而在於不斷流動的慾望作為一種生命之力如何在眾器官、眾機器與眾人之間擺盪。

因此，第二部份將著重在維吉尼亞·吳爾芙的小說《歐蘭朵》，討論歐蘭朵第二次沈睡不起的睡眠經驗如何被診斷為一種疾病。若運用第一部份關於疾病的討論，這次的「疾病經驗」可以閱讀成一種事件：它打開了歐蘭朵的身體並促使其流變成可隨意組裝、拆卸的機器。亦即，歐蘭朵完全無需手術與掙扎的變性過程其實帶出：性不是如精神分析所認為的是閹割與伊底帕斯情結的產物。此遠非常識世界所能理解與接受的實際經驗試圖論證，性不過是生命作為最大機器組構中的其中一個屬性，或生命作為一不可區辨之區間裡的一個面向。對歐蘭朵（甚至對德勒茲、瓜達希與吳爾芙）而言，重點不在於要二選一（男性或女性），而在於看到生命之力如何擺盪在這兩極之間的狀態（男性和女性）。如果性 (sex) 都不是永遠固定不變的標籤，遑論性取向 (sexuality) 以及社會意義建構下的性別 (gender)。吳爾芙更透過三位美德女神的退場，展現了歐蘭朵能隨不同情境而不斷流變與流轉的生命之力。

關鍵字：疾病，德勒茲，瓜達希，吳爾芙，《歐蘭朵》，機器，慾望