

“ONE OF THESE DAYS I’M GOING TO GET ORGANIZ-IZED”:
INSOMNIA AS THE ARRHYTHMIC EXPERIENCE OF MODERNITY

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Abstract

The proliferation of insomnia and related discourses since the 1970s has produced an expanding moral economy of sleep. The discursive field of sleep has been defined by the production of biological assumptions of the nature of sleep in the sleep sciences, their distribution through clinical modes of hygienic and pharmacological intervention into disturbed sleep, and their popularization in media discourses of risk, suffering and management. My research begins by identifying the situation of sleep as a discursive object in the sleep sciences, which I contrast with experiential representations of insomnia in the film *Withnail and I* (1987). The purpose is to dislodge insomnia pathology and instead to understand it as an arrhythmic modality. What emerges in this discourse, however, is a romanticized notion of the discordant body unable to integrate to the rhythms of capital. I then examine the role of sleeplessness in the production of white masculine suffering in neoliberal capitalism through *Taxi Driver* (1976) and *Fight Club* (1999). In contrast to this privileged form of androcentric insomnia, I then turn to biographical accounts of insomnia by Gayle Greene and Patricia Morrisoe, who narrate the effects of sleeplessness and their gendered movements through consumer culture and clinical spaces in their attempts to restore what they understand to be natural sleep. The limitations of this embrace of “natural sleep” as an object of desire is then opened in examining the epistemological foundations of the sleep sciences. The objectification of sleep in the sleep sciences proffered a means of accessing a biological substratum that would define the proper expression of sleep. Rejecting this notion of a discrete substratum, and the attendant notion of sleep debt, I close with a chapter on the way in which the spatio-temporal disciplinary apparatuses of the milieu and the functionalized day served to consolidate sleep rhythms and thus the claims of the sleep sciences. The purpose of the dissertation is to call into question the role of the social sciences in furthering discourses of insomnia as friction between bodies and the bureaucratic-functional ordering of the day. Instead I develop sleep as a biopolitical object of intervention and management, one based on the occlusion of the structuring agencies of sleep.

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Introduction: “How’d you sleep?”

To invoke sleep in everyday conversation is often as mundane as a greeting. “How did you sleep?” sits alongside “How are you?” in the legion of banal, everyday questions that people ask but to which they desire no more complicated response than an affirmative statement. However, the question of sleep frequently elicits complaints detailing deficient rest and from there a range of maladies and incursions on sleep, and then onwards to popularized forms of getting a better night’s rest: from best practices to a litany of sleep related commodities. At this conjunction, sleep is very much an element of scientific and popular *discourses*. All of these discourses are geared to capturing sleep, a highly nebulous and largely invisible, but essential form of experience and daily life. It is then situated within specific orientations, traits, and functional activity. As with any narrative form, these discourses are populated by a range of figures, including the light or heavy sleeper, the insomniac, the lark and the night owl, with each taking shape in relation to a host of normative discourses geared to its role in the constitution of the properly regulated and productive self. On one hand, the contradictory discourses of productivism within contemporary neoliberal ideology create a constant tension with its affiliated demands for responsabilization and self-care. To occupy a zone of arrhythmic or disorganised sleep thereby involves the experience of a range of debilitating symptoms, while having to negotiate these contradictions as they embed themselves within various sleep discourses. These tensions move in multiple directions. Productivism requires adequate rest all while undermining it, and responsabilization assigns both personal responsibility for shortcomings in attention or offering effective labour and the risks posed to others through improper self-management. This polarity of productivity and self-care is thus a flexible

discourse. To articulate any of the litany of complaints, from fatigue to the inability to concentrate, to depression and anxiety, in response to the posed question of “how did you sleep?” typically brings forth distilled notions of regulatory and hygienic common sense that purport to offer the ability to consolidate and reintegrate one’s bodily rhythms with the circadian day *assuming one undergoes the requisite labours to secure the foundation of the properly productive and functional self*. At its core, then, is the presumption of an ability to harmonize the sleeping self with the frenetic and boundary dissolving aspects of neoliberal life.

These interactions can be frustrating and less than helpful to an insomniac who also hears about how someone “crashes” the moment their head “hits the pillow,” or who “sleeps like a rock,” and is offered seemingly endless recommendations for a dizzying array of consumerist phantasmagoria of goods, practices, and compounds that will ameliorate their sleeplessness. These tensions form the foreground of a popularized set of discourses centred on sleep and self-help, and that are rooted in dominant conceptions of the forms, functions, and mechanisms of proper, restful sleep expounded in scientific discourses. Expressions of arrhythmic, disorganised, or simply unsatisfying sleep not only undermine the coherence of the self, but also engage a further dizzying array of discourses and methodologies that converts the condition into a seemingly impossible situation.

Sleep, and its multiform disturbances and conditions, thus represents an expansive component of everyday life, with any interaction on the subject already primed in advance through the discursive organisation of sleep. A May 2019 Google search on sleep returned 2.72 billion results, reflecting a plethora of medicalized forms of definition, risk assessments and consequences, as well as interventions. The top stories in the search were a series of articles detailing a catalogue of harmful effects from a lack of sleep: its negative impacts on circulation

(Cohut 2019); how sleep apnoea increases the risk of cancer for women (Preidt 2019); and an assessment of the risk attendant to sleeping with earplugs (Kandola 2019). The heavy presence of various popular medical websites, particularly the National Institute for Health (NIH) and the National Sleep Foundation (NSF) is intriguing. These websites offer a curious combination of an ever-proliferating discourse concerning the management of sleep, the risks posed both to sleep (e.g., the intrusive noises that lead to earplug use) and to the sleepless from its lack (e.g., cancer, circulation), and how to deal with its inventory of potential disturbances. Nestled amongst these top articles is one site that directly links to a definition of sleep. The *Healthy Sleep* page from the Harvard Medical School defines sleep as a natural pattern that is subject to age and other life factors, linked to specific patterns of brain waves and other physiological indicators (Harvard Medical School n.d.). What emerges are endless disciplinary vocabularies that define sleep and are geared to the successful articulation of sleep within the patterns of everyday life, along with alarmist consciousness-raising campaigns that inundate readers with an ever-expanding world of risk that demands their attention.

This dissertation project began with a more limited frame of examining cultural understandings of insomnia, and gradually transformed into a study of sleep and sleeplessness (the distinction between insomnia and sleeplessness is between a medicalized condition and the experience of a loss of or inability to sleep). While sleeplessness accumulates as pathology (e.g., insomnia) in the minds and bodies of sufferers, the experience of sleeplessness and the encounter with these discourses puts into relief the manner in which sleep operates as a structuring agent of the optimal subject, replete with a multitude of forms of intervention from commodity culture, pharmacology, clinical practice, and in contemporary discourses of mindfulness, wellness, and other forms of bodily attunement. This dissertation argues that these discourses position sleep as

a modality that is embedded within a regime of syncretic and antagonistic rhythms of the everyday, defined by a functional segmentation of productive, reproductive, and restorative activity, and situated within homogeneous time of the twenty-four-hour day.

Importantly, the processes of sleep are far more than some objectified model of a homeostatic body with integrated bodily rhythms, attuned to the circadian rhythms of the sun, that are then negatively affected by the social world. In contradistinction to this model, which dominates medical and social scientific works on sleep and sleeplessness, I argue that consolidated sleep rhythms grounded in the idea of the eight-hour block of sleep are a product of the interaction of biological, circadian, *and* social rhythms. The constitution of sleep as an object, in both medical-scientific and media discourses, is thus a product of an epistemological model that extricates sleep from its background and inserts it into a functionalized discourse that is itself a constituent part of the logic of governmentality. That is, sleep is a primary object in the care and management of populations geared to extracting maximal productive energies. It is the entry into disciplinary apparatuses that define, surveil, and intercede in discordant rhythms that conditions the experiences of disordered sleepers. As a result, disturbances of sleep offer an opportunity to read the history of sleep within *neoliberal* present and the *industrial* past of the nineteenth century as integral elements in the formation of sleep discourses and rhythms, rather than merely focusing on the *technological* and *bureaucratic* present of wired world analyses and conflicts with expanding and demanding schedules that dissolve the boundaries of a biologically programmed sleep function.

This speaks back to scientific and clinical discourses as they manifest in scientific texts, the media, and everyday interactions to show the ways that that they foster and disseminate assumptions of a purely biological ground of sleep. This definition of sleep is deployed within

disciplinary discourses that attribute disordered sleep to the effects of modernity or to the bad sleep practices of the subject. Moreover, the particular discourse centred on biological rhythms replicates rote notions of a denatured modernity. Believing in a disjunction or rupture between nature and modernity becomes a catch-all explanation of social ills, and undergirds problematic prescriptions for treating sleeplessness. Prescriptions for when to eat, have sex, exercise, rest (or not rest) proliferate within this programmatic biological determinism.

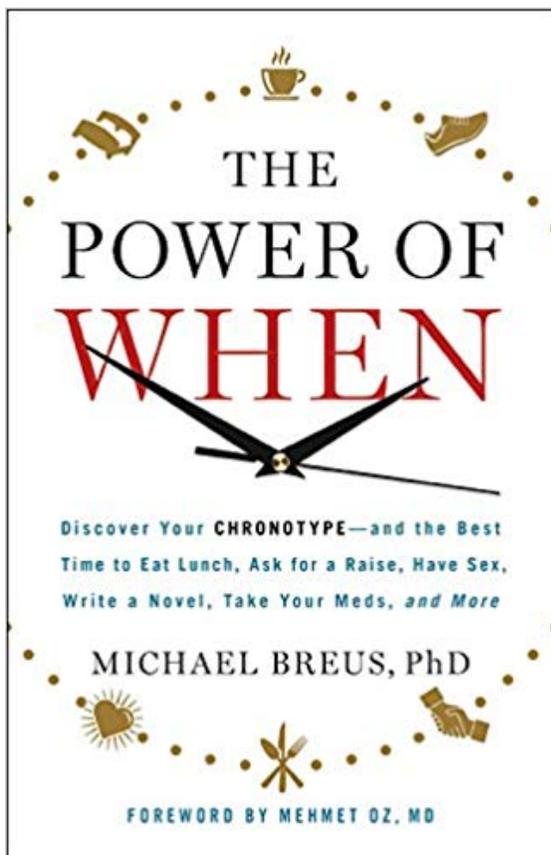


Figure 1 Michael Breus's *The Power of When* as part of the recent discourses that prescribe proper times for all forms of social activity.

However, there is something missing in these biologically grounded sleep discourses that strive to discipline and normalize subjects. Rhythms of sleep and wakefulness, and particularly their role as a structuring agent of optimal subjects, are constituted through the design, arrangement and surveillance of the orientations and activities of bodies as they move through and inhabit circadian rhythms of night and day and the spatio-temporal orders of contemporary capitalism.

These discourses secure normative patterns within biologically determinist models and work to ground social rhythms in nature, while proffering themselves as critiques or diagnoses of individuals, institutions, and modernity. Capturing discordant, disorganized, and arrhythmic modalities of sleep, disciplinary apparatuses strive to inoculate society through responsabilization for sleep.

In establishing sleep as a social discourse, this dissertation begins by expounding upon the imbrication of sleep within social, political, and economic structures. While disciplinary ideologies strive to normalize rhythms of sleep and wakefulness, the place of sleep in constituting social subjects gives it a symbolic potency. Subjective accounts of sleep are powerful because they confront normative sleep discourses. The experiences and institutional encounters of disordered sleepers problematize/destabilize entrenched, objectified accounts of sleep, creating an alternative symbolic potency by revealing the effects of the social world through the discordant body. Situating disordered sleep as an effect of modernity within sleep discourses allows us to see suffering as a locus of critique within extant social and political currents. This current has produced a striking pattern of *androcentric* insomnia narratives that provides a logic for white masculine suffering and an alibi for strident masculine assertion and violence.

Understanding the symbolic function of sleep and sleeplessness as an oppositional critique to social forms in androcentric narratives includes looking at the curious absence of sleep in most popular representations. Films such as Andy Warhol's *Sleep* (1964), which shows a man sleeping for five hours and twenty-one minutes, or *Baa Baa Land* (2017), which takes the viewer on an eight-hour epic offered as an escape from the stresses of the moment by sitting and staring "at sheep" (Thomas 2017; Warhol 1964) put into relief the aporia of sleep in our stories. Its

status as a solitary act outside conscious activity places it beyond the frame of narrative representation. The absent presence of sleep in visual representations is notable, and marked only by the repetitive processes of going to bed and awakening in the morning. A classic example of this is the twin bed phenomena of 1950s and 1960s era television programs. These shows regularly invited viewers into the bedrooms of couples to show them as they prepared for and entered their separated beds. As a young viewer, I was most struck by the likes of Dick van Dyke and Mary Tyler Moore in *The Dick Van Dyke Show* (1961-1966):



Figure 2 Mary Tyler Moore and Dick Van Dyke as Laura and Rob Petrie in *The Dick Van Dyke Show*.

In family sitcoms and dramas, the bedroom was often a central social space that usually separated parents from children, and offered insight into the relations of the dominant couple form. Reliving the era of the 1960s, the more recent show *Mad Men* (2007-2015), presented an image of a unified bedroom, if not a unified couple. Inserting the philandering husband into the domestic, suburban space of the family home highlighted the tensions within the white flight

suburbs that were expertly detailed in Betty Friedan's classic text *The Feminine Mystique*. The continuity in the role that sleep plays in organizing these narratives of domestic life is striking, even while it remains occluded from actual view. In the alternations of sleep and wakefulness there arises the properly managed and socially integrated self, yet these alternations of sleep and wakefulness are present only in negative terms in these narratives. Used as a place for preparation for sleep or for the upcoming day, the social function of the bedroom appears as a regular feature of domestic life. The naturalness of the sleep function, and the other, attendant functions of this segregated domestic space serves to organize characters and punctuate the time structure of the functional day.



Figure 3 Jon Hamm and January Jones as Don and Betty Draper in *Mad Men*.

The elision of the act of sleep in narrative forms thus creates a parallel with its situation as a zone of cessation of conscious waking activity; existing beyond the frame of conscious awareness but central to its constitution, sleep is a structuring agency of social life. This aporetic agency structures gendered social relations, lending an expansive framework to the role of sleep in social organization. By separating sleep from larger social networks through the creation of a

particular architectural space from which the subject emerges into larger social networks, sleep is used as a means of defining heteronormative domestic relations. As such, the domestic space of the bedroom doubles as a space of retreat and rest in a functionalist division of the day.

Disciplinary aspects of the bedroom are further complemented by its position in organizing social relations of domestic life. While hygienic discourses of sleep assert that the bedroom should be reserved for sleep and sex, the bedroom is a component part of both the productivist order and gender relations.

In experiences and stories of insomnia this narrative form can take a stark turn, converting biographical accounts of the desperation induced by sleeplessness into a social pathology. From the confrontation of English utilitarian productivity with the nocturnal perambulations of the fearsome and perverse Count Dracula (who, sleep scientists would now explain, probably just had delayed sleep phase syndrome), and with the dark and brooding terror of Mr. Hyde, to the incessant and consumptive activities of the modern zombie and William Styron's depressed persona in *Darkness Visible: A Memoir of Madness* (1990), the inability to sleep has haunted the margins of modernity and exemplified the threats posed with the dissolution or perversion of the productive, waking subject. Here, the figure of sleeplessness is typically solitary or, at minimum, alienated from normative social relations. Sleeplessness becomes more than a mere arrhythmic modality defined by suffering. Instead, it is a subject position linked to the negation, dissolution, or strain of normative social relations.

Popular and scientific discourses of sleep work within a governmental framework in order to define the normal and to normalize populations. The insomnia narrative forms a counter discourse through the opportunity to examine the sleep-negating effects of social organization and the institutions and discourses that work to reintegrate discordant or disorganized bodily

rhythms. That is, attending to sleep discourses necessarily entails understanding not only the constitution of normative assumptions of biological sleep and the apparatuses and spatio-temporal regimes geared to secure sleep, but also it also requires attending to the negotiated reading of these discourses by sufferers *and* the appropriation of these discourses as a means of masculine assertion within bureaucratizing, productivist, and consumerist culture.

Drawing from subjective accounts of sleeplessness or insomnia, this dissertation presents the development of a uniquely insomniac positionality and epistemology. This positionality has a dual function: it is key to establishing the limits of biological determinism and functionalist ideology in sleep discourses; and a means of understanding how the suffering attendant to answering the question of “how’d you sleep” operates as a distinctly romanticized and gendered identity position within neoliberalism. As such, the dissertation traces the shifting role of sleep and sleeplessness within popular narrative forms and biographical accounts. From there, the dissertation argues that the idea of a biological substratum that defines the objectification of sleep in the sleep sciences is invalid, and that its deployment in social scientific as well as clinical settings is little more than dogma and moral entrepreneurialism within a problem-solution complex (N. Rose 2006). The dissertation concludes that the socio-spatial organization of society works to consolidate the rhythms of sleep and wakefulness in early modernity and thus played a positive, productive role of the social in the constitution of sleep, which has been abstracted and reified in dominant sleep discourses.

The Origin of the Dissertation

To suffer from sleep or drowsiness in wrong places, such as while at work, or while operating a vehicle, is, of course, linked to the expanding field of risk discourse attendant to social awareness campaigns. It is also interpreted as a lack of interest or engagement, which leads to aspersions on the character of the sufferer. In my often-sleepless life, I have regularly encountered direct questions concerning my lack of vigorous engagement with authority. This charge of detachment or improper self-management was such a regular form of experience that I was shocked when, in a graduate seminar in the fall of 2004, Dr. Stephen Levine simply asked me why I was always so tired. In turn, the invisibility of sleeplessness as a disability, means that institutional structures rarely include means of addressing its effects. For example, as a graduate student at York University, I had to defend my Master's thesis at 9:00 a.m., despite repeated pleas for an afternoon defence. To defend a thesis on no sleep seriously undermined my ability to pay attention and to formulate coherent answers. This inflexibility of institutional structures is a regular feature of sleep-related texts. Somewhat more complicated was the fallout from the inevitable lower productivity resulting from sleeplessness: I faced disciplinary actions from the Chair of my PhD program in 2007 for a perceived lack of progress. I was berated at length by the Chair with assertions that I would never have things easier than I did as a graduate student. A subsequent petition in 2010 with the Faculty of Graduate Studies for an additional year of study based on health reasons was subsequently granted only once I revised its basis from insomnia to multiple spine injuries. The allopathic model of western medicine, with emphasis on clearly definable, physiological origins and symptoms, represents the basis of recognition in the neoliberal institution, while more ill-defined and invisible forms of disability or debility exist beyond the limits of its purview regardless of the mountains of assembled paperwork. To be an

insomniac is therefore to suffer from the experience of sleep loss and all its physiological effects, and also entails navigating productivist and disciplinary institutional structures based on the normative models of progress and classical Weberian-Protestant ethos of a world populated by shirkers, or whatever their imaginations tell them about those who show up late, appear tired or irritable, or require assistance or accommodation.

As a supplement to these experiences of daily, institutional life, I have also endured a number of largely unfortunate encounters with the medicalization of sleep. These began in April 2002, during the final month of my undergraduate degree. After years of self-treatment of my insomnia with alcohol, I had concluded that alcohol was now responsible for an inability to sleep any longer than 90 minutes at a time, with prolonged hours of somnolent wakefulness punctuating these fitful bouts of sleep. However, stopping alcohol consumption cold turkey resulted in going three days without sleep. Frustrated, frightened, and breaking down, I visited a physician. After repeatedly demanding that I go on both Zoloft and Trazadone, anti-depressants that were popular in treating insomnia, I finally relented (my medical file referred to me as “intractable”). While some relief followed, as well as a host of iatrogenic effects, I terminated the use of Zoloft nine months later, while continuing to take the soporific drug Trazadone until 2005. A subsequent physician noted that no insomniac should be prescribed Trazadone for more than three weeks due to its addictive qualities. Moreover, the waning of its effects over time had produced a gradual expansion of my sleeplessness reminiscent of Styron’s memoir, while its removal inaugurated a prolonged period of severe sleep arrhythmia. I regularly experienced periods of sleeplessness of 24-36 hours, and rarely knew when or if sleep would arrive. This period of extreme sleeplessness lasted from late 2004 until late 2007. Over this time, I encountered gatekeepers who blocked access to sleep clinics (they were deemed to be nothing

more than hygiene and drug dispensaries), a psychiatrist, a cognitive behavioural therapist, a psychoanalyst, and even a homeopath (as with others, I tried everything), most of whom sought the origins of my condition within my own attitudes and behaviours. These diagnoses all fall under the umbrella term Dysfunctional Beliefs and Attitudes about Sleep (DBAS). The assumption was that I had done something to interfere with or disturb my biological clocks, or had developed bad practices to deal with its symptoms. This medicalization and its inability to address my issues, along with frustrations with institutional life, led me to this project.

The chapters that follow are part of a response to these discourses of sleep. One goal of this dissertation is to speak back to institutions that demand fealty to their normative regimes and schedules in a way that goes beyond simple requests for flex-time or flex-space. The institutional structures that shape the functional day, the discourses and medicalisation of sleep, and the cultural definition of the spaces and times of sleep, as well popular and medical understandings of pathologies attendant to sleeplessness, point to the wide network of relations that structure sleep discourses in the twenty-first century. I interrogate the assumptions concerning the naturalness of sleep and, particularly, the assumptions we make concerning the relationship of the sleeping body to the institutionalized structures of the neoliberal present. Too often, popular and scientific discourses are limited to noting the wired present as a stressor on sleep systems, or to bemoaning the putatively unaccommodating time structures of institutional spaces that cause friction for these sleep systems. Once the model of biologically programmed sleep is in place, it is inevitable that we turn towards situating modernity as a disturber of sleep, and overlook its role as a consolidator of sleep. Underlying these truisms and extensions of works such as Paul Virilio's notion of a speeded-up modernity or David Harvey's time-space compression is a set of assumptions concerning their impacts on the biological rhythms of the body. Central to this is the

notion of a biological rhythm entrained to both the circadian rhythms of the Earth and to the repetitive structures of everyday life, thereby unifying the biological and the cosmic with a prescribed structure of social life. These assumptions—that sleep is natural and hard-wired with a specific time architecture—form a largely unexamined aporia in these discourses of a wired world and an intractable institutional structure of daily life that is unwilling to accommodate the body’s putative natural rhythms.

My frustration with the deployment of popular and medical discourses of sleep is complemented with frustrations that I developed as I delved into sleep related literature. This frustration is particularly sharp in relation to texts that purport to develop a theoretical and political analysis of sleep. For example, Simon J. Williams’s *Politics of Sleep: Governing (Un)consciousness in the Late Modern Age* (2011), attempts to get at the social and political structures that impact sleep. His work begins with the idea that the politics of sleep is largely inapparent to most of us, but that the factors of fast capitalism and time compression result in a widespread accumulation of sleep debt. The early pages of the text focus on standard problems associated with sleep loss due to “stresses and constraints” of modern life (S. J. Williams 2011, 63, R. Meadows 2005), which seem to point to a standard form of discourse rather than an aporia. More significantly, in the section “Discipline: Sleep in Institutions,” Williams sets out to establish a theoretical analysis of sleep and its relation to institutional contexts. Drawing from Foucault’s notion of the total institution, Williams notes that disciplinary structures distribute “space and control...activities through timetables...[to] impose ‘particular occupations [and] regulate the cycles of repetition’” (Foucault cited in Williams 65). From this point, Williams develops examples of prisons, asylums, and dormitories, as well as nursing homes and hospitals, as examples of institutional contexts that regulate patterns of sleep. Even here, however,

Williams posits the total institution as a disturber of sleep, rather than as disciplinary context that is an element in the history of sleep.

Williams's study gets interesting as he turns his attention to the tortured prisoners at US prisons at Guantanamo Bay and Abu Ghraib, as well as the "rough sleepers" who populate Mitchell Duneier's controversial book *Sidewalk* (1999). Drawing from Duneier, Williams argues that sleeping on the streets occurs for reasons of "saving a good vending spot, saving money or drug use" (Duneier, 161-5), to the point that "sleeping in a bed no longer feels natural" (Duneier cited in Williams, 71). There is thus an "appeal to life on the streets" (Williams 72) in which a "permanent state of tiredness or sleepiness... becomes, in effect, *re-normalised*" (Williams 72, emphasis in original). At this point, Williams establishes a parallel with Giorgio Agamben's concept of bare life: "a life, that is to say, of exclusion in which existence is pared to the bone, reduced to bare or naked life, and stripped of all rights by virtue of these very states of exception and exclusion" (Williams 73). For Williams, the comparison is troubled by the fact that the streets are obviously not an example of a camp in Nazi Germany. In his exegesis of sleep in institutional spaces and the life of the street, Williams deploys Foucault and Agamben's concepts of discipline and bare life literally, without extending how either author sought to show how discipline and bare life had been taken from disciplinary institutional contexts in order to take hold of other bodies, spaces, and populations. This is most apparent in the appropriation of Duneier's enframing of street-identified life with an entrepreneurial logic. To claim that entrepreneurialism refutes existence as bare life on the street misses Loïc Wacquant's trenchant critique of Duneier's faith in the "rehabilitative forces of the sidewalk" (Duneier cited in Wacquant 1473) and his voluntaristic reading of life on the street. From this critique, Wacquant points to the real issue at hand, which is the "parochialism of the U.S. tradition of poverty

research, [and] the unwarranted empiricist disjunction of ethnography from theory” (1470). Williams’s importation of this disjunction of theory and ethnography from American sociology and ethnography is emblematic of social science texts on sleep, and it reorients theoretical works back to empiricist accounts and biological determinist models of sleep. From here Williams follows this pattern of positivist studies with the notion that sleep “resists or exceeds attempts at governance” (79), thereby inserting a realm of nature that exists prior to the social and thus undermining his own thesis that sleep is political. This dissertation moves beyond the limitations of an American sociological model of analysis with an awkwardly appended theoretical armature.

My argument draws heavily from the works of Michel Foucault, Henri Lefebvre, and Marxist thought. Drawing from Foucault, I argue that sleep emerges from an invisible background to create subjects who are organized discursively, including but not restricted to the intervention of formal institutions. That is, sleep appears to us as a unity within a functionalist division of the day. The severance of sleep from its background, however, structures a fundamental form of misrecognition by which we define it as an object, and then seek to secure it as the basis of the consolidated and coherent self. The ensuing sleep discourses are hygienic and disciplinary, establishing the norms by which bodies are captured, regulated, and normalised. The deployment of a Foucauldian methodology is the means to argue how spatial and institutional regimes produce and secure a consolidated form of sleep as a key component in the reproduction of the subject. Foucault enables a focus on the disciplinary regimes and the planning of a milieu in the management of populations that attends to social rhythms by anchoring them in putatively biological rhythms. In turn, the entry of sleep into the “mill of speech” (Foucault 1978) invoked by the banal greeting and inserted into both medico-scientific

and social scientific research fosters a litany of sleep pathologies, works to establish a truth of sleep. As such, I work to establish the disciplinary apparatuses geared to the consolidation and normalization of sleep, as well as its armature of diagnostic apparatuses and discourses geared to assessing and intervening in sleeplessness.

In turn, Lefebvre's rhythmanalytical method provides the means to disentangle natural, cosmic, and social rhythms and their role in shaping everyday life. Situating the breakdown of rhythms in nocturnal urban spaces, we can begin to see how arrhythmic sleep offers a unique vantage point for perceiving and understanding social order, as well as the role of spatio-temporal regimes in the production of regulated bodies *and* discordant bodies that contrasts with the normative conceptions of sleep and wakefulness as a natural rhythm (Harvard Medical School n.d.). I also draw from the work of Moishe Postone, who articulates the productive elements developed by Foucault to the labour regime of modern capitalism. The result is a much more expansive account of the situation of sleep and wakefulness rhythms in modern society, an account that is broader than the delimited accounts of sleep as an object that subtend the majority of sleep discourses.

Chapter Outline

Defined in terms of function, sleep manifests as an often-invisible structuring presence of the rhythms of daily life, often existing only obliquely outside the frame of representation, and marking the concatenations of activity and rest within a circadian rhythm. Its place in relation to domestic space and its function in relation to productive rhythms appears as the merely taken for granted. Popular and scientific discourses of sleep work to sediment these normative assumptions about the timing of sleep, its best practices, and its importance as a structuring agent

of an optimal subject. Insomnia, however, as a medicalized condition ascribed to repeated patterns of sleeplessness, forms one of the more distinct and frustrating forms of experience as well as a hyper-visible element of concern in risk society. To experience sleeplessness, or to claim status as an insomniac, positions the subject in terms of suffering and frustration in accommodating the demands of the everyday.

This dissertation begins with an initial problematization of sleep as a function by confronting the establishment of sleep as an object in Kenton Kroker's historical work *The Sleep of Others* (2007) with the hysteria of prolonged sleeplessness by the characters Marwood and Withnail in the film *Withnail and I* (Robinson 1987). Chapter one traces Kroker's preliminary objectification of sleep as a means of progressing beyond the subjective refractions found in most accounts of sleep. The creation of technologies such as the electroencephalograph provided science with an architecture of sleep and access to an internal environment beyond the purview of subjective accounts. However, while Kroker celebrates technological developments as a move from the subjectivity of portrait painting to the reality of photography, a key text in the history of sleep science, William Dement's *Some Must Watch While Others Must Sleep* (1971), implicates sleep science within modernist aesthetic history of observation. While this exposition resituates the scientific gaze within modernist aesthetics, the frustrations expressed by Marwood and Withnail with the social rhythms of daily life highlight their inability to subordinate their discordant rhythms through a return to nature in the form of the English countryside. Apparent in their frenetic perambulations through urban life in London to the pastoral countryside are the distinct and sometimes antagonistic rhythmic structures of the social world and everyday life. These structures articulate their linear organization with the circular cosmic rhythms of planetary life, as developed in the works of everyday life by Henri Lefebvre (1991, 2003). The repetition

of linear rhythms offers an alibi for the imbrication of social rhythms and cosmic rhythms in concepts of sleep, while offering a path to understanding insomnia in terms of what Theodor Adorno refers to as the “social pathogenesis of schizophrenia” (Adorno 1946/2005). The purpose of this chapter is to give a preliminary exposition of some of the tensions embedded within sleep science claims regarding the separability of sleep as an object from the social world, and to establish sleep as a social rhythm.

The ongoing disturbance of sleep represented by insomnia carries with it a series of tensions. While the film *Withnail and I* highlights the physiological impacts of a lack of sleep, the discord this creates with social rhythms, and problematizes assumptions embedded within sleep discourses, it also presents a romanticized image of sleeplessness as a critique of capitalism and capitalist social relations. The purpose of Chapter Two is to examine the ways that insomnia has lent itself to a romanticization of sleeplessness as a distinctly white masculine modality of suffering within neoliberal social and economic structures, and the resulting deployment of this suffering in critiques of institutional life, the productivist logics of consumerism, and gender relations. The starting point of Chapter Two is an exposition of the romanticization of insomnia in philosophical discourses from the likes of Emile Cioran (Regier 2004). Cioran establishes a privileged form of epistemology within the omnipresent gaze of wakefulness in insomnia, which parallels similar arguments from Emmanuel Levinas (1978). Cioran’s epistemological appropriation of insomnia subtends the characters of Travis Bickle in *Taxi Driver* (1976) and Jack in *Fight Club* (1999), who are insomniacs situated respectively at the advent of neoliberalism and in the midst of its full consolidation. For both figures, sleeplessness and insomnia are physiological responses to the disciplinary demands of labour, while Jack further advances a populist conception of the demands of consumerism and its supposed distortion of

masculinity. The resulting expressions of violence mark not merely the advancing forms of androcentric reaction, but the symbolic importance of insomnia in locating physiological impacts of injustice and suffering. The purpose of this chapter is to further highlight the manner in which sleep and sleeplessness discourses are a nodal point in social and economic processes.

While the previous chapters highlighted the forms of discord embedded within sleep discourses, Chapter Three examines memoirs by two women, the journalist Patricia Morrisoe and professor of English Gayle Greene, both of whom encounter insomnia as a more quotidian phenomenon. These authors trace the gendered experience of insomnia in everyday life and map the clinical-pharmacological, spatial, and consumerist methods geared to the restoration of sleep rhythms. As such, their positionality as gendered, consumer, and psychological subjects who navigate medical and popular discourses of sleep offers an opportunity to assess the limitations of popular and medical discourses of sleep from the perspective of sufferers instead of typically diagnostic accounts from those in the sleep sciences or their popularisers. Encountering an array of disciplinary models of treatment, both women reject many of the abuses of power and oversimplified models of treatment that define clinical and consumerist discourses. However, Morrisoe and Greene reflect Stuart Hall's notion of negotiated critique insofar as both strive to secure sleep by embracing elements of sleep discourses. Morrisoe pursues pastoral medical-scientific discourses in her pursuit of quietude and extraction from the social world in rural life, while Greene adamantly advocates for greater dedication within scientific research to finding pharmacological treatments to intractable sleep problems. As a result, both Morrisoe and Greene replicate assumptions of a biological form of sleep that has been deformed by modern urban agglomerations or unspecified elements that have damaged the sleep system.

While the first three chapters lay out a mapping of sleep discourses from the perspective of sufferers of sleeplessness and insomnia, the question concerning the validity of biological explanations of sleep rhythms remains. Chapter Four is a detailed treatment of monographs produced within the sleep sciences. This chapter traces the manner in which the field defines the internal bodily environment and the coordination of rhythms that produce sleep, and their entrainment to external environmental conditions. Alongside measuring technologies such as the EEG, which offer a vision of an internal environment that regulates sleep, the use of experimental methods such as the cave experiment purports to strip the subject of all environmental forces. This results in a belief in the ability to access a biological substratum of human existence free from environmental distortions, and the ability to describe an autonomous sleep system that defines a bodily will to sleep. From this juncture, solving sleeplessness becomes a matter of assigning human activities a place in maintaining this most important of rhythms, or in their interruption or perturbation. In this chapter I ask whether attempts to extricate historicized bodies from the social environment fail on two fronts. The first involves the importation of disciplinary models geared to replicate daily exertion within the confines of the cave experiment, and the second resides in their claims of normality in their test subjects. This chapter makes the central claim that it is impossible to separate sleep from the social and political, or from historicized bodies. This leads to problems in both the diagnosis of the source of the problem and in the assumption of naturalness in the dominant forms of expression of sleep and wakefulness rhythms.

In Chapter Five, I return to Kenton Kroker's history of the sleep sciences and his narrowing of the sleep archive to fit the assumptions of late-twentieth and early twenty-first century sleep science epistemology. Opening the archive to include the historical transformations

and reorientations of domestic space within a functionalized time structure of urban capitalism, I argue that the consolidation of sleep in modernity precedes the emergence of technologies of lighting that are so often cited as the cause in the shift from the two-sleep structure of Medieval Europe to the eight-hour block of sleep in modernity. Drawing from the rhythms of Coketown in Charles Dickens's *Hard Times*, I contrast the place of sleep within an emergent spatio-temporal order with Kroker's attempt to align Dickens's portrayals and hostilities to sleep with nineteenth century phrenological studies of sleep. While Kroker situates nineteenth century discourses within a progression towards the objective definition of sleep, I work through Foucault's notion of the invisible background to locate the consolidation of sleep within the industrial rhythms of Dickens's texts. I close with Moishe Postone's (1993) work on time and capitalism, demonstrating how these structures produce a consolidated form of sleep that is then normalized through the planning of a milieu and the design of space. Furthermore, the entry of sleep into the "mill of speech" (Foucault 1978) in the late-nineteenth century represents a pastoral form of truth-telling power overlooked in Kroker's selective archive.

The scientific understanding of sleep and its distillation in popular discourses is central to the emergence of a rationally organized, biological subject and to the management of populations. Sleepless people appear as deficient and potentially disturbed or pathological figures, necessitating active interventions to secure the regulated norms of sleep in the governance of populations. The elusive presence of the sleeper and sleeplessness, and the haunting of forms of biological absolutism in the sleep sciences is the basis of my dissertation, which works to differentiate the place of insomnia within social and political discourses, economic processes, and disciplinary apparatuses. In rearticulating sleep to its invisible

background, I work to question dominant medical and social scientific appropriations of a biological substratum that defines expressions of sleep.

To reiterate, my argument is that sleep is a social and political object, rather than merely a medico-scientific one. Sleep as an object exists within a range of disciplinary, clinical apparatuses and media discourses geared to the constitution of productive, responsabilized individuals. The consolidation of sleep within the rhythms of daily life and the deployment of disciplinary apparatuses seeks to secure or reconsolidate sleep at the level of the individual. Contemporary sleep discourses primarily work to constitute sleep as an autonomous object impaired by the boundary dissolving elements of modernity. I will argue, rather, that the dispersion of these sleep related discourses and their critique of modernity form negotiated and oppositional readings that are a result of the conjunction of sleep discourses with the invisible networks that articulate sleep and the social world.

Chapter One: “My Heart is Beating Like a Fucked Clock”: The History of Sleep Science and the Problematics of Nature

The purpose of this chapter is, first, to establish the constitution of sleep as an object within the sleep sciences. I draw from the extensive work of Kenton Kroker and his *The Sleep of Others and the Transformations of Sleep Research* (2007), in order to establish the manner in which sleep came to be conceived of as a pre-social, biological entity by which we then come to explain the social world of capitalist modernity. I will show how this distillation occurs in and through forms of social understanding to open the question of how sleep arrives as an object with defined parameters, which forms the basis of how we come to think, and speak, of our sleep. From there, I will raise questions concerning these logics through an explication of the experience of insomnia in the film *Withnail and I* (Robinson 1987), wherein two drug-addled artists in London in the 1960s struggle to restore sleep. Through their manic experiences and modes of expression, there emerges an understanding of sleeplessness as a form of arrhythmic exclusion from the putatively eurythmic organization of a functional society. This posited eurythmia is an implicit feature of the spatialization of time in the urban world. From this exposition of different forms of rhythm and their interactions, I look at how sleeplessness is subsequently more than merely an intrusion upon biological rhythms.

This introductory exposition of insomnia takes shape through an interpretation and discussion of Henri Lefebvre’s (1991/2004) notions of cyclical and linear rhythms in relation to the film *Withnail and I*. The purpose is to situate arrhythmic social experience in relation to established understandings of the rhythms of everyday life. The relation between cosmic/circadian rhythms and the social construction of normed sleep established through Lefebvre’s rhythmanalytical method, with particular reference to urban space and the institutions

of everyday life, enables a distinction between linear repetitions of daily life and cosmic cycles. The result is the ability to separate, in analysis, the two forms of repetition and the manner in which sleep is part of a linear pattern of social organization. Finally, I draw from Theodor Adorno's conceptions of the organic composition of capital and the social pathogenesis of schizophrenia, relating them to role of parks and their purported value as a restorative for the urban dweller as explicated by the character of Withnail. My argument is that in the confrontation of sleeplessness of Marwood and Withnail in the film with the evidentiary model proffered by Kroker, we can begin to see the manner in which sleep science occludes the social in its attempt to naturalize the linear, functional and repetitive rhythms of capitalist modernity with nature through bodily rhythms and cyclical patterns of cosmic rhythms. Furthermore, the proffered return to nature as method for restoration of sleep is subjected to cynical rebuttal by Withnail, and satirized in their pursuit of more natural surroundings. I conclude by referencing/discussing Lefebvre's notion of the twenty-four-hour philosopher, and the critical capacities of insomnia through the accumulation of wakefulness. It is in this celebration of wakefulness that we can begin to trace the problems of androcentric insomnia that form the basis of Chapter Two.

Modernity, Progress, Sleep

Norbert Elias, in *The Civilizing Process* (Elias 1939/1994), writes a history of the modern world as a product of successive refinements in the technologies, styles, and methods of comportment, as well as shifts in the moral universe. Elias tells of how Europeans successively took hold of their bodies in order to produce a stabilized, hygienic, and refined subjectivity. Amongst these analyses, "On Changes in the Bedroom" depicts the emergence of shame in regards to both the

sequestration of sleep and the attendant codes for appropriate attire. Situating the appearance of the nightdress at the same time as that of the fork, Elias speaks of a progressive “sensitivity” concerning things that had proximity to the body (139). While Elias locates these changes in “advanced feelings of shame” (140) attendant to European civilization, the relevant point in his text is that the privatization of sleep involved the removal of the conditions of sleep from spaces of socialization and into segregated units within domestic space. Following Elias, the introduction of the bedroom and nightdress signified a shift in material practices of sleep, and thus the removal of “the most intimate and animal aspects of human existence from the sight of others” (138). With this phrase, Elias spikes historical transformations in the structure, experience, and shape of sleep within both material historical processes and changes in the moral universe, while imbuing this process with both a notion of progressive refinement and nostalgic reverie.

Elias’s brief foray into historical transformations in the practices of sleep foregrounds the intersection of values and spatial practices in the emergence of modernity. These shifts track alongside the historical shift away from the model of “two-sleeps,” in which sleepers in the pre-modern and early modern eras engaged in segmented forms of sleep, and into a model of consolidated sleep patterns. Elias evades any relation to structures of power and bodily regularization, or to the ways that patterns of sleep were eventually tied to newly conceived notions of biological nature. In contrast, Foucault’s 1976 lectures at the Collège de France identifies the emergence of a micromechanics of power at this time. Grounded in the “instruments that form and accumulate knowledge, the observational methods, the recording techniques, the investigative research procedures, the verification mechanisms... [that] cannot function unless knowledge, or knowledge apparatuses, are formed, organized, and put into

circulation” (1997/2003, 33-34). This model of disciplinary power, emerging in the seventeenth and eighteenth centuries, first took hold of the body in order to understand its functions in order to better extract and direct its productive energies. The transmogrification of sleep thereby takes on additional significance as a defined object of knowledge through which disciplinary power flowed. The panoply of disciplinary apparatuses targeting sleep forms the basis of a new form of extraction and accumulation strategy that was grounded in bodily practices. Thus, the initial problematic for the transmogrification of the practice of sleep resides in the manner in which bodies were taken a hold of, and made docile, in the progressive governing of bodies.

Emerging from disciplinary apparatuses that seek to regularize sleep for the purpose of extracting time and productive capacities, a new form of power is grounded in the patterns of sleep. The accumulation of observable data becomes the means for a putative hold on biological life that then establishes normed patterns from disciplined bodies. These patterns are then distilled back into bodies, and form the background for defining endemic illnesses that “sapped the population’s strength...wasted energy, and cost money, both because they led to a fall in production and because treating them was expensive” (1997/2003, 244). That is, the progressive taking hold of sleep, vaguely defined as an “animal” process by Elias, forms the basis of new practices that are then recuperated in their mass to establish norms of sleep that are attributed to hidden architectures within the body. From a biopolitical perspective, the overriding concern is the deployment of technologies that establish norms and regularize populations. Segregated sleep linked to “animal” processes is just this kind organization of life processes that constitute organized, productive bodies. As Foucault indicates, biopolitics emerges as a form of power-knowledge in which the currents of the mass of the population are assembled from the technologies of the body. The result is the accumulation of data by which the normed sleeping

subject takes shape, for which a two-fold deployment of this knowledge-power takes shape. The first involves the assignment of biological life into segregated structures of time and space, along with prescribed modes of comportment, for the production of normed sleep. The second function of the normative is to constitute the background against which sleeping monsters appear. From this defining background, nineteenth century practices of public medicine centred on hygiene and the normalization of knowledge (244). Thus, the transformation from the early modern period of Elias to nineteenth and twentieth century modernity entails the consolidation of sleep as a biopolitical object wholly constituted as a biological entity removed from the social, which is subject to interventions and modifications.

As a result of the anatomical and biopolitical conjuncture, it becomes possible to see the transmutation of sleep as part of a regime of what Foucault refers to as governmentality. In the *Birth of Biopolitics* lectures in 1979, Foucault described the practice of governmental reason as that which took hold of and worked through nature. Expanding upon his work in *The Order of Things* (1966), Foucault's notion of governmentality presents the production of norms not as some sort of organic process in which the established norm is reflective of the social totality. Rather, the norm is the product of a defined, disciplinary practice of knowledge production in which the mean is taken as nature and then deployed in the constitutive process of subjectification. The result is what Lynne Huffer refers to as a problematization of life itself as a "historically contingent...conception of life [that] forces us to engage with the materiality of the traces of the past through which we construct our present understanding of ourselves" (2017, 67). For Huffer, the entry of life into history and the reclamation of its mechanisms within the realm of explicit calculations (66) forms the basis of a conjuncture in which the matter of bodies is enlisted within the practices of governmental reason. Governmentality is thereby linked to the

historicization of nature, as witnessed in Elias's narrative of progressive refinement and sequestration.

Sleep Grifters: Nineteenth Century Sleep in Twenty-First Century Historiography

The emergence of sleep as a defined object of knowledge and a disciplinary practice followed an ill-defined path. Concerns with bodily heat comingled with conceptions of female susceptibility to overstimulation and a host of other issues in the late nineteenth century, in what amounted to a speculative topography of interventions in the growing area concern around sleeplessness. In his reading of sleep research in the nineteenth century, Kenton Kroker delineates the trajectory of the constitution of sleep as an object. For sleep to be taken as a field of inquiry it had to appear as a differentiated object, one that is easily known as something that is tangible, an image, or an idea (2007, 3). He situates practices deployed prior to this constitution of the field as unscientific, fumbling-about that represented a fundamental misunderstanding of sleep. For Kroker, there is no such thing as knowledge of sleep proper prior to its establishment as an object that can then be taken hold of, measured, and understood. The problem for Kroker was that sleep had eluded the nineteenth century discipline of physiology, because it was understood as a “temporary and passive diminution of life itself” such that it was situated “outside the realm of the vital forces” (5). As an “annihilation of experience” (4), sleep failed to appear as a tangible or discursive object of concern. This, along with an unscientific reliance upon subjective accounts of sleep and sleeplessness, resulted in “refraction” (5) that undermined the potential for sleep to emerge as a proper object of scientific research. It was only with an emergent reliance on the “testimony of instruments” (5) that sleep as a proper object emerged in the twentieth century. The study of the

sleep of others was thus the necessary prerequisite for constituting a scientifically valid field through this (positivist) science for dummies narrative.

The delayed appearance of sleep as an object was further muddled by the historical concern with dreams, according to his narrative. The first chapter of Kroker's book runs from Plato and Aristotle to Descartes and Locke, to note the ways that dreams occupied the interests of philosophers, Christianity, and Indigenous nations. Dream studies required no third-person observation, offered no understanding of sleep proper, and were thus hokum. The concern here for Kroker is to narrate a tangentially related, historical curiosity and to point to the role of dreams in the philosophical history of reason as, amongst other things, "exemplars of the irrational that threatened to undermine the new social order grounded in the individual's exercise of reason" (18). This preoccupation with dreams ran into the twentieth century with figures such as Sigmund Freud and Henri Bergson, each an obstacle to the formation of experimental method, even though Freud did represent a functionalization of the logic of sleep that Kroker valorizes. What Kroker's historical peregrinations do is provide a mapping of the historical curiosities and interregnums that he then contrasts with the emergence of sleep sciences grounded in a biological theory of sleep. The epistemological shift to the study of sleep as an object is differentiated from these speculations and fancies with dreams through what Nikolas Rose refers to as a "biology of depth that discovered underlying organic laws that determined the functioning of closed living systems" (2006, 15). The object proper is, as Kroker puts it, is easily identifiable as a differentiated object, definable on the terms of objective instruments that determine the underlying structures that produce visible and measurable rhythms of daily life.

Kroker's primary attribution in the establishment of sleep as an object resides in the introduction of electroencephalography (EEG), which was first deployed to study sleep in the

1930s. Its ability was to “situate different waveforms [in the brain]...by time, (292) and thereby provide a temporal architecture of sleep. Citing Alfred Loomis, who first used EEG in his privately funded Tuxedo Park, NY laboratory in the 1930s, these recording devices established the necessary distance from an “undisturbed” sleeping subject “in its natural habitat” (290). Furthermore, these EEG readings provided an architecture of sleep: a series of differentiations of brain wave patterns in sleep that enabled differentiation within the object of sleep itself. Beyond the myriad technical instruments and the structuring of a space of surveillance, there was no ability to broach the subject of how the gaze, through the many transformations and intrusions necessary to construct this “natural habitat” conditioned and impacted the sleeping subject.

Thus, we have two key elements in the historical development of sleep. First, there is the material history of sleep and its attendant transformation/consolidation, and, second, the targeting of sleep as an independent object of scientific inquiry geared to the production of knowledge of sleep as a biological entity. The resulting normed definition of sleep and proper sleep practices became the basis of pragmatic interventions into sleeplessness in order to restore functionally defined rhythms of sleep. Kroker’s simple notion of objectivity and its implication in the function of power is embedded in the title of his text, which represents an obvious parallel to a classic text of the sleep sciences. Kroker’s *The Sleep of Others* and William Dement’s *Some Must Watch While Others Must Sleep: Exploring the World of Sleep* (1972) encode the vantage point of the external observer as the ontological ground for the instrumental exploration of sleep. While Dement’s title goes further to assert a categorical demand on the other to performatively sleep, what emerges is the central position of the researcher in the production of sleep as an object. Dement expounds this position through his narration of a pivotal moment in the constitution of sleep research: Eugene Aserinsky’s observations in 1952, when he partnered

polygraph recordings of sleeping subjects with observations of eye movements. While this scene has entered the lore of popular understandings of sleep, what is significant is the hyperbolic positioning that Dement ascribes to the event. Aserinsky's discovery was "*the* breakthrough—the discovery that changed the course of sleep research from a relatively pedestrian inquiry into an intensely exciting endeavor pursued with great determination." Dement then supplied the appellation REM to "define the phenomenon that my colleagues and I had observed" (1972, 25 emphasis in original). In the constitution of sleep as a measurable and observable phenomenon, Kroker and Dement proclaim a particular set of mediated relationships between science, technology and the sleeping body.

On the Continuity of Watching

While it seems as though we are on a journey with Kroker into the land of biological science proper, he uses the EEG and Aserinsky's observations to create a curious parallel. These technological devices and scientific modes of distanced observation were akin to the introduction of photography in the nineteenth century, which "liberated the production of certain kinds of images from the artist who drew and painted" (292). The separation of sleep from the sleeper obviated the need for the refracted images of the creator and thereby removed representation from the social and cultural realm, while technology reproduced the real verbatim. Beyond the radical failure to understand the structure of perception in forms of aesthetic judgment (Crary 2001; Charney & Schwartz 1996; Friedberg 1994), the revocation of the role of culture and the social in scientific knowledge plays oddly when contrasted against the inspirational source for his text. In this regard, Dement indiscriminately populates his volume with a series of images taken from Pablo Picasso's "sleepwatcher" series of paintings and sketches spanning roughly

from 1904 to 1968. While Dement leaves the assorted graphs and recordings for the end of his text, he regularly inserts these images of men watching women in luxuriant states of sleep.

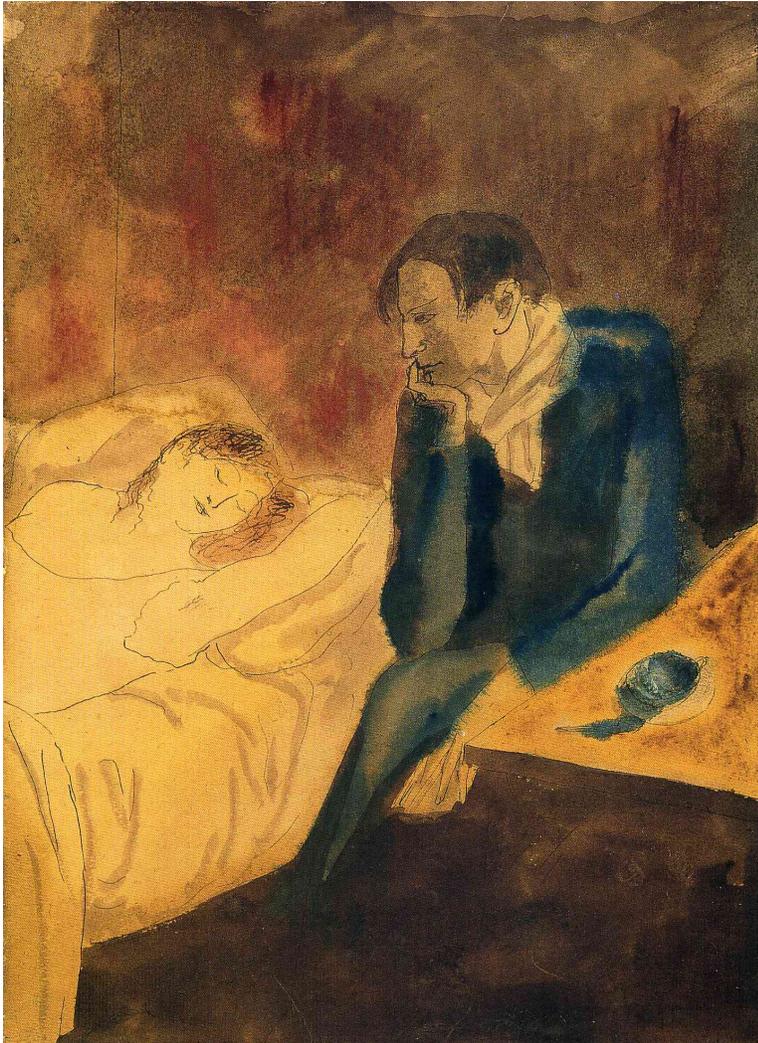


Figure 4 Pablo Picasso. Sleeping Woman. Meditation (Contemplation). 1904. Museum of Modern Art, New York.

The implication of cultural representations of sleep with the scientific rendering of the neutral object creates a number of tensions within the text. In one sense, they function to rearticulate the newly exposed hidden architecture of sleep to the multitude of historical signs and meanings that have accumulated on the sleeping body, and in another the images serve as a romanticization of the object of study. While the images are likely mustered to support a romantic vision of the work of the sleep scientist, this conjuncture creates a further tension wherein the evacuation of

cultural meanings through discourses of the invisible realm of biological structures exists alongside the discrepant continuity of Picasso's hyper-sexualized imagery of the observed, and the melancholic imagery of the observer, throughout Dement's text. These images foreground the false resolution of the Kantian antinomies of reason in scientific approaches to sleep. That is, Picasso's images form an ongoing commentary on the relation of observer to observed in the judgment of objects of perception, wherein forms of understanding work to organize the object and its appearance within the apparatus of medical recordings.

In his analysis of Picasso's Sleepwatchers series, Leo Steinberg describes *Contemplation* (1904) as follows:

The girl lies in a pool of light, one raised arm cradling her head. She lies within arm's reach, yet almost glides away, and her wall-papered corner dissolves in the warm glow of noonday sleep. It is the painter's figure that conveys an oppressive awareness of circumstance. Dusky blues ink even his cup and hair. His cold shadow contrasts with her brightness; his sitting up with her lying down; his solid frame with the tremulous trace of her skin. Their opposition is total. And as her radiance suggests the pure bliss of the body, his perplexed consciousness becomes a condition of exile. (Steinberg 1972)

Steinberg describes a luxuriating and excessively embodied female subject engaged in the blissful act of sleep, from which he then distinguishes the brooding and gloom-filled watcher.

While Steinberg notes that the "watched sleeper" was an antiquated and overdone subject in the history of art, he observes that Picasso had appropriated this "universal theme as though he had found it within closed doors in his own private depths. So that the *watch-sleep confrontation enters his work almost like a confession*" (95 emphasis mine). As such, Picasso's work is much more than a romantic image embedded in Dement's text: it represents a homology of medical scientific epistemologies and aesthetic modernism. Medical scientific practice is implicated in aestheticized modes of seeing that are historically grounded in late nineteenth and early twentieth century visual art as a part of what I will refer to as a discursive practice. This formation centres

on the distinct spatialization of sleep in domestic space, the relation of watching to sleeping, and the masculinized apparatus of knowledge production. While this relation of externality forms the basis of a knowledge-power dynamic, the inclusion of Picasso's works in Dement's text foregrounds the fiction of Kroker's appropriation of the photographer and other recording technologies as a means of capturing reality free from refraction and the intervening presence of the mind of the observer in constituting knowledge. Picasso's works highlight the presence of the observer, and thus of the function of mediation not only in the sleep of the sleeper, but on the social networks and institutional practices that strive to know the sleeper and, by extension, sleep.

The delineation of the sleeping body as an object of study by Dement follows the path of the nineteenth century biology and its discovery of a historicity proper to nature (the time architecture of the sleeping object). However, the inability to resist, as well as the significance of, the cultural depictions in Dement alludes to an ongoing presence of the historical accumulations of meaning attached to sleep. More significantly, the heightened awareness of the relation of the watcher and the sleeper that Picasso foregrounds is dissolved in the objectification of sleep by Dement-Kroker. The result of this is that Picasso's works form a sort of spectre of the text, in which the elision of cultural refraction at the heart of the constitution of the object remains omnipresent, always lurking in the forthcoming pages. The appearance of a historicity of nature that disaggregates the object from the "continuous space that imposed the same chronology upon [things] as upon men (sic)" (Foucault 1966/1994, 368) points to the way that the field of biology separated bodies from their context in order to define them as autonomous assemblages of regulated, natural processes. The diremption of the objectifying gaze located in the dispassionate and distantiated observer mirrors the exteriorized gaze of the watcher in

Picasso. Dement and Picasso thus share a similar episteme as sleepwatchers in the extraction of differential truths of sleeping subjects. The question, then, is what is the relationship between the observer and the observed, and how does Picasso's works help to problematize the very processes that Dement strives to valorize through their inclusion in his text?

Steinberg notes that representations of sleepers in post-Renaissance art followed a general theme of sleeping as a passive state that exposed the sleeper to intruders, who could be "tender or murderous" (99). Further, early sleep studies often took the shape of experimental insomnia, where sleepers (both animal and human) were subjected to continual interference or intrusions upon the return of sleep. In contrast, Picasso's sleepers were never "awakened, startled, or taken advantage of. They nod in daylight and incur no intrusions...Picasso's sleep-watching encounters are not accidents but juxtaposed states of being" (101). Picasso's images thus foreground the contrast of sleep and wakefulness, and the emergent epistemological shift in observation in order to pose "wakeful questions to the dream-life" (104). Thus, the confession sought by Picasso links to the world of dreams that Kroker separates from science proper. Yet, his sleepwatchers images foreground the mutual implication of watcher and watched, the wakeful and the sleeper, in an epistemological dance of extraction that occurs within the transformations of the practices of modern sleep.

This analysis of Kroker's text thus sets the stage for understanding sleep as a distinctly social relation in which concurrent, yet often antagonistic, trends work to define the truth of sleep in a confessional relationship with a natural habitat or spatial and temporal architectonic. Yet, in contrast to the objectification of sleep and the establishment of its naturalness, there is retention of social relations within knowledge production in the sleep sciences, and a discordant form of accumulation in the gaze of the wakeful observer as is highlighted in the Picasso images

in Dement's text. In turning to the film *Withnail and I* (1987), I will highlight the manner in which presumed articulations of sleep with nature dissolve under extended periods of frustrated wakefulness. Rather than offering a restorative function, nature and domestic space assume a toxic presence that forecloses the possibility of sleep rather than offering its warm embrace. Moreover, the appearance of monsters within the putative natural habitat of sleep confounds the functional rendering of sleep and its situation in the reproduction of the everyday.

***Withnail and I* and Insomnia**

Locked in a sixty-hour spell of unbroken wakefulness and drug induced delirium, and horrified by the everyday regime of urban life in London, Marwood, in the 1987 film *Withnail and I*, opines that his "heart is beating like a fucked clock." For Marwood, even a broken clock tells the right time twice per day, but his arrhythmic heart is incapable of achieving even the kind of minimalistic exactitude found in paralysis. As such, Marwood's wakeful existence is defined by a general drift towards what he calls the "realm of the unwell" as he falls out of step with the oddly discordant but repetitive rhythms of daily life. His articulation of suffering is marked by a two-fold exclusion. The first is from the presumably natural circadian rhythms of sleep and wakefulness. The second exclusion is from the repetitive structure and institutions of everyday life. The intersection of these two forms of exclusion not only define the experience of the insomniac, but also present questions concerning the relationship of the sleeping body and sleeplessness to the reinforcing but differential rhythms of everyday life.

Chronic insomnia entails a protracted inability to fall asleep or sustain restful sleep. The insomniac body undergoes a variety of physiological stresses stemming, in part, from increased levels of hormones that further erode the possibility of drifting off into sleep. These

physiological stresses conjoin with an accumulation of social, economic and psychological stresses and anxieties, and this totality of intersections between the biological and the social is directly related to other, mutually reinforcing conditions such as substance abuse. In this way, Marwood's portrayal anticipates the stark narrative presented by William Styron (1990) in the telling of his experience with insomnia and substance abuse (for Marwood it was illicit drugs, while Styron took prescription medications for sleep). Styron's narrative points to how he found himself taking triple the recommended dose of Halcion, for a period far longer than its stated maximum of one month, which led to an addiction that was a predictable result for so many undergoing excessive pharmacological treatments for the condition (1992, 49). The result of these reinforcing conditions is a devolving sleep pattern, such that the hours of wakefulness extend beyond the confines of the twenty-four-hour day and sleep, however fitful it may be, lasts for as little as an hour or two before another prolonged period of wakefulness begins. Even when sleep is attained, an insomniac sleeps differently than non-insomniacs insofar as they do not descend into deeper stages of sleep. Prolonged wakefulness of thirty hours or more creates physiological sensations that include burning limbs, blurred vision, intense cranial pressure as well as a fugue-like state, and eventually states of mania, as witnessed with both Marwood and Styron. The accumulation of wakefulness thus produces a discordant body at odds with both circadian rhythms and the repetitive patterns of everyday life. Extremely long periods without rest or years of suffering culminate in dementia or despair, thereby associating insomnia, somewhat problematically, with clinical depression and popular conceptions of schizophrenia. The production of despair in insomnia often leads to a kind of fatalism wherein no relief or hope exists. For Styron, this sense of doom or deep depression results in the "knowledge" that this was

a condition unto death (50). Yet, with the exception of the extraordinarily rare case of Fatal Familial Insomnia, death is one thing that insomnia refuses to deliver.

Under these conditions, it is no surprise that extant narrations of insomnia centre on stark portrayals of suffering and/or social pathology. The question of differential levels, types, and experiences of sleep and wakefulness rhythms thus opens possibilities for understanding sleeplessness (popularly known by its clinical designation as insomnia), as well as its deployment as a modality for understanding biological, social, and cosmic rhythms. In conjunction with *Withnail and I*, Henri Lefebvre's rhythmanalytical method opens up the possibility of a twofold reading of sleeplessness. The first reading is of the critical capacities of a twenty-four-hour watchfulness of Lefebvre's insomniac philosopher (the positionality of the insomniac and its accumulated experiential knowledge). This reading exists in tension with a second, in which arrhythmic sleep accumulates as a pathological state that results in an incoherent state of being. The tension between these modes of interpretation produces a related accumulation of watchfulness that cultivates social antipathy towards the modes and structures that sustain the rhythmic practice of everyday life. That is, the experience of sleeplessness is not merely the production of a condition known as insomnia. Rather, it opens up a realm of perception of both society and its structures, as well as of the condition itself. These perceptions accumulate and become a social positionality, one that often lends itself to defined relations to the social world and its rhythmic processes and disciplinary apparatuses of sleep hygiene, the appropriations of naturalness of sleep by that world, and discourses of madness or schizophrenia by those suspended in arrhythmic states.

Arrhythmia, Insomnia, and Lefebvre's Everyday Life

Lefebvre's *Rhythmanalysis: Space, Time, and Everyday Life* features two instances where he draws upon insomnia to articulate his understanding of rhythms. The first, in "Seen from a Window," depicts the insomniac as an apparition that turns on a light in a window in the desertified realm of nocturnal urban life. This eruption of presence in the night is otherwise marked only by the ongoing march of traffic signals that serve as vestigial signs of social regulation on the void of irregular nocturnal activity (1991/2004, 30). Lefebvre then posits insomnia as a methodological tool that, once introduced, threatens the regime of everyday life with collapse. Firstly, insomnia is the upsurge of an unexplainable, dream-like solitary and unregulated spirit from within the void and upon which social regulation attempts to leave its mark. In the second and corollary instance, insomnia is an outpouring from this void that escapes social regulation and creates what Lefebvre calls "another everydayness" (1991/2004, 75), which he then dissolves in ellipsis. This other everydayness is rendered invisible by the ellipsis and is therefore incomprehensible on the terms of everyday life, an incomprehensibility that Styron simultaneously underscores and then attempts to render in the title of his text, *Darkness Visible*. This incomprehensibility means that the threat to the social order is neither rational nor revolutionary in intent. It is, rather, a physiological culmination of the irrationality of the rational as outlined by Max Weber, but Lefebvre's analysis points to a much more complex structure of relations that goes beyond mere friction between bureaucratic life and the embodied individual.

Rhythm, as the basis of everyday life, is the combination of linear movements and cyclical repetitions, which bring together the mechanistic, rational, and structural elements of social life, leisure, and work with cosmic or organic cycles. The cosmic is manifested most clearly in circadian rhythms of night and day, in the production of what Lefebvre calls "differentiated

time” (2004, 78). This differentiated time is marked by repetitions that produce variations and effectively mark off measures of linear time as cyclical time. The movement from differentiation to dialectical unity in the cyclical repetition of linear movements marks a shift from antagonism to synthesis. In “The Critique of the Thing,” Lefebvre begins by arguing that the relationship between the cyclical and the linear is one of an antagonistic unity:

Cyclical repetition and the linear repetitive separate out under analysis, but in *reality* interfere with one another constantly. The cyclical originates in the cosmic, in nature: days, nights...monthly cycles, etc. The linear would come rather from social practice, therefore from human activity: the monotony of actions and of movements, imposed structures. (2004, 76)

The conjoined interference of the cyclical and the linear is articulated most clearly in “Seen from the Window,” where Lefebvre argues that recurring rhythms, such as the daily appearance of shoppers or schoolchildren at certain times of the day, compose cycles:

[O]f large and simple intervals, at the heart of livelier, alternating rhythms...The interaction of diverse, repetitive and different rhythms animates...the street and the neighbourhood. The linear...consists of journeys to and fro: it combines with the cyclical, the movements of long intervals. The cyclical is social organisation manifesting itself. The linear is the daily grind, the routine, therefore the perpetual, made up of chance and encounters. (2004, 30)

In this latter exposition, social organization emerges from linear activity in its transformation into cyclical repetition. His notion of *linear repetition* is at the heart of this shift, in which cyclical repetition takes on properties of social organization, while supposedly remaining distinct from nature. Thus, cosmic rhythms give form to the transformation of the linear into repetitive, cyclical forms that are the basis of social organization. Thus far, there is little to distinguish Lefebvre from the organicism of Émile Durkheim (1893/2014) or the naturalness of society in Friedrich Hayek (1960). The linear forms repetitions through infusion with the cyclical: hourly demands and social practices compose rhythmic regimes in their repetition across days, weeks, or seasons. What is significant here, however, is the manner in which the rhythms of social life

become implicated in natural rhythms, which naturalize aspects of social rhythms through the antagonistic unity of macro-scale rhythms of social organization and cosmic repetitions and the conception of a persistence of traditional cultural forms into modernity. In Lefebvre's second volume of the *Critique of Everyday Life*, he adds more detail to this distinction. He notes that the link between cyclical and linear repetitions form through the superordinate status of the cyclical to the linear time scales of social life (1961/2002, 48). The result is that customs that have been historically linked to cyclical time are "deeply rooted" and persist in their cosmic form, despite "anti-nature" attempts toward emancipation from these rhythms (2002, 48-9). The Lefebvrian link between cyclical and linear repetition thereby anticipates a common assumption in both popular and medical discourses concerning the arrhythmic experience of sleeplessness: that the rhythms of sleep in modernity are natural insofar as they represent deeply rooted rhythmical segments of time. Those who seek to free themselves from the established pattern of sleep and wakefulness, or who experience sleep alienating social structures of time, are thereby working against a vestige of a premodern nature at the heart of the modern world. The antagonistic unity of the cyclical and linear thereby renders the linear elements of everyday life as potential disrupting agents of those deeply rooted rhythms.

Ultimately, despite his questionable assertions concerning premodern nature and its persistence into modernity, which reside at the heart of biological modernism's (Chapters Three and Four) appropriation of nature in the structuring of sleep rhythms, Lefebvre's definition of rhythm separates out a dialectical unity of cyclical and linear movements and their differentiation as both cosmic and social patterns, as well as repetitions and ruptures (what he refers to as "moments") that are discernible in the structures and patterns of everyday life. Alternations between diurnal and nocturnal rhythms conjoin with the simultaneously random and organized

tasks of work, leisure, motion and rest. More specifically, he argues that the body becomes the organic focal point of this regime, of a “regulated time, governed by rational laws” that “impose themselves on the multiple natural rhythms of the body...though not without changing them” (1991/2004, 9). To understand the structure and functional role of sleep in the constitution of differentiated time, and the locus and import of the insomniac within those rhythms, makes necessary the development of multiple layers of intersecting rhythms. As such, Marwood’s arrhythmic heart, and thereby the experience of sleeplessness, becomes the focal point of understanding how regulated, rational patterns, natural circadian rhythms, and movement through urban space interact to produce sleeplessness as an arrhythmic accumulation of wakefulness that appears in contradistinction to naturalised conceptions of biological sleep rhythms.

Arrhythmia as Supplement to Everyday Life

Withnail and I begins with Marwood leaving his flat at dawn for breakfast at a local diner. As he broods over his meal, Marwood watches as greasy eggs are slapped between slices of white bread and then consumed by various patrons. As the egg yolk oozes from between the slices of spongy-looking bread, Marwood retreats in horror behind the daily paper, where his gaze lands upon a newspaper headline, “Love made up my mind, I had to become a woman,” and a look of panic enters his eyes (the absurdity of this particular horror and Marwood’s fear of Withnail’s gay uncle represent some of the more irritating parts of the film). Marwood thinks to himself, “Thirteen million Londoners have to cope with this, and baked beans and All-bran and rape? And I’m sitting in this bloody shack and I can’t cope with Withnail” (Robinson 1987). There is no reprieve for Marwood: the external world offers the horrors of the mutually reinforcing,

mediatized landscapes of the everyday, and his dwelling place, shared with Withnail, is oppressive. This domestic oppressiveness is most clearly articulated in a subsequent scene when they attempt a foray into the kitchen to tackle the accumulated detritus and rodents that emanate from its festering piles of kitchenware and moldering food stuffs. Locked in a state of despair and having retreated from the public world, domestic space often takes on oppressive and toxic resonances for those locked in patterns of sleeplessness.

Despite its position as part of a discernible rhythm of daily life, the diner does not represent a eurhythmic space for Marwood. Eurythmia occurs when rhythms “unite with one another in the state of health, in normal (which is to say normed!) everydayness; when they are discordant, there is suffering, a pathological state” (Lefebvre 2004, 16). In a eurhythmic state, the movement across differentially segmented portions and landscapes of the day (the movement from the time of sleep in the dwelling to the entry into the world and the institution of the diner/the newspapers) would be experienced as a smooth transition across functionally organized spaces and times. The diner represents an urban institution that produces and is situated within the timed segmentation of everyday life, yet, despite its observable role in the diurnal rhythms of city life, the diner simultaneously serves to remind Marwood of his arrhythmic state and leaves him pondering the possibility of how anyone can function according to these socially organised yet discordant rhythms. This suffering and the accompanying external stance to the rhythmic reproduction of everyday life in the diner manifests itself both as horror and as a positionally defined rejection of the elements that conjoin the diner with a harmonious, eurhythmic social order.

His perception of the scene points to a negativity at the heart of the production of everyday life, such that the diner renders eurythmia impossible even as it produces the rhythms of

everyday life. However, there is a significant shift in the understanding of pathology in this sequence. Marwood's experience shifts the discourse of insomnia away from diagnostic pathologies of cause and their relation to the symptoms of sleeplessness. Instead of opening a question as to a relation of cause, and thus an affirmation of a persistent cosmic rhythm of sleep and wakefulness in the modern social order, his reactions constitute an embodied, arrhythmic assessment of the regulated rhythms of daily life: these rhythms proffer a productive, urban existence, but are simultaneously incapable of assimilating the arrhythmic subject (Marwood) who inhabits but is not of this landscape and its segmentation of time.

Lefebvre further argues that the media, manifest in the paper that Marwood ducks behind, produces a deceptive fullness in this regime. The media represents the promise of understanding the everyday, through the reproduction of a moral universe, but instead offers a simulacrum of "empty words" and "mute images...a present without presence." Lefebvre's critique of the mediatised day dovetails with Marwood's musings on the way in which rape and All Bran enter the flow of everyday life as information, thus "fabricating, introducing and making accepted the everyday" (1991/2004, 47). Marwood's compulsion to flee from the everyday forms a metaphorical extension of the nineteenth century concern with the overstimulating effects of modernity. Writing in 1860, Isaac Ray warns of the "hematological consequences of the increased dissemination of newspapers and, therefore, of mental activity" (Scrivner 2014, 110) that would otherwise colonize proper leisure time. Marwood's flight, however, is from everydayness qua the everyday. Marwood is not overstimulated, rather he is suffering from an embodied rejection of the integrating structures of everyday life. In a sense, the dominant position of the media stalks our intrepid explorer, but arrhythmia, as a modality, denies the legitimating role that the media plays in the repetitions of everyday life. Instead of banal banter

on the mediatized present, this manufactured present torments him to the point of hysteria. To see ongoing states of sleeplessness in this manner is to understand it as an unresolved, and potentially unresolvable, mode of sensitivity producing a seemingly endless succession of triggers from the social environment. To read the social from this space is both an indictment of its inexorable, conjoint march of cyclical and linear repetition.

Additionally, the diner is not a matter of a universe of polyrhythms, wherein multiple, but not necessarily harmonized, rhythms co-exist, and the subject is a self-reflexive constituent of modernity. The question is not whether there is a differential experience of everyday rhythms anchored in the space of the diner, but rather a question of how sleeplessness results in a form of differentiation and distantiation, an inability to conjoin the self with the cyclical repetitive rhythms of social organization. Arrhythmia, like the Derridean supplement, cannot be incorporated into the whole as a complementary existence. For Derrida, the supplement “intervenes or insinuates itself *in-the-place-of*...If it represents and makes an image it is by the *anterior* default of a presence...As substitute, it is not simply added to the positivity of a presence, it produces no relief” (1976, 145 emphasis in original). That is, rather than reading the presence of arrhythmia, in the body of the insomniac, as a direct corollary to the irrationality of the rational order, Marwood’s existence as an insomniac is coterminous with his drug use and his position outside of the social order.

Circadian Rhythms, Normed Sleep, and Urban Space

Of particular significance to the analysis of arrhythmia is Lefebvre’s positioning of this fatal disorder as a void that reigns over urban space between the hours of 3 a.m. and 4 a.m. For Lefebvre, the penetration of diurnal rhythms into the night represents an accumulation of the

activities of wakeful life (the ordered regime of capital). However, these displaced diurnal rhythms are simultaneously transformed and their pace is slowed to the point that they often dissolve into a void. The figure of sleeplessness, in turn, emerges as an unregulated figure in this transformed space. In “Seen from the Window,” Lefebvre observes, “(t)he night does not interrupt the diurnal rhythms but modifies them, and above all slows them down...[Yet at o]ther times, there is no-one at the lights, with their alternating flashes...and the signal continues to function in the void...before the façades that dramatically proclaim their vocation as ruins” (1991/2004, 30). There are two important aspects to this passage. The first is the way in which daytime rhythms persist into the night, only to eventually dissolve. Lefebvre further asserts that, “arrhythmia reigns, except for rare moments and circumstances” (2004, 31). Thus, while Lefebvre does not assign a cause, symptom, or effect to arrhythmia, he does assign it its own place and time: at four o’clock in the morning in the inactivity of the streets and the light in the window. This is the darkness from whence Marwood emerges onto the street at the beginning of the film. Marwood’s arrhythmic appearance on the streets is thus a matter of a hostile entity that does not share in the “miraculous charm” (1991/2004, 73) of the advent of dawn and the restoration of diurnal rhythms. Arrhythmia becomes the negation of cosmic rhythms, and the social order appended to it.

The cosmic rhythm that modern, capitalist society associates with sleep is that of the circadian alternations between day and night, which pivots on the notions of falling asleep (in the evening) and awakening (at dawn). Other attributes have been interpellated into this rhythm, such as the Enlightenment project’s situation of knowledge and consciousness within the day, light, and awakening. The premise of the circadian rhythm, whether it is associated with a natural cosmic or socially determined order (or with a residual aspect of former natural cosmic rhythms

of the premodern era in the linear rhythms of modern life), is that the body accumulates a “sleep need” through the progression of the day. While this need accumulates, the presence of the light of day suppresses the urge to sleep. With the onset of night, the body succumbs to sleep and dispels its accumulated need, while darkness and infra-bodily rhythms hold the sleeper in this state, despite a steadily decreasing sleep need. This common understanding of the circadian rhythm thereby posits a sort of seesaw to produce an image of a homeostatic being capable of an optimal functional existence.

The first question concerning the association of circadian rhythms with the sleep/wake cycle is thus how this is produced as a putatively natural rhythm. The sleep sciences (Chapter Four) have developed a set of chrono-biological explanations for a functional explanation of sleep. The conception of the uninterrupted block of nocturnal sleep remains at the core of this understanding and subsequent approaches to insomnia. The psychopharmacological approach, in turn, seeks to medically alter the levels of serotonin in the brain through the use of antidepressant and other drug regimes in order to discipline unruly bodies back into a consolidated pattern of nocturnal, normed, sleep. When prescribed to insomniacs, drug regimens are often presupposed to help increase a damaged or permanently altered level of serotonin in the brain. The problem, of course, is that the proliferation of psychopharmacological treatments for insomnia, and the off-brand use of drugs designed for conditions such as depression, rely upon drugs that often have negative consequences for the individual consuming the products, as outlined by William Styron, and for the environment as a whole (such as declining fertility rates for fish swimming in seas of SSRI drugs).

Non-pharmacological approaches to insomnia tend to focus on sleep hygiene, where the insomniac is blamed for her or his condition on the premise that insomnia is a product of bad

sleep habits. Sleep hygiene ranges from telling the sufferer to avoid substances such as caffeine and chocolate, and to implement set wake-up times in the morning. Hygiene will supposedly establish normed sleep patterns, yet sleep hygiene is wholly inadequate with figures such as Marwood and Withnail, who are completely dislodged in time. To prescribe a set wake-up time to someone living beyond the boundaries of the 24-hour day is patently absurd (and a source of continual complaint from insomniacs who are told to do so; see Chapter Three). Ultimately, sleep hygiene is a cynical ornamentation applied to the regime of sleep in modernity, and Lefebvre expresses a scathing critique of ornamentation in modernity. For Lefebvre, capital “erects itself on a contempt for life and from this foundation: the body, the time of living” (1991/2004, 51). Lefebvre argues that this contempt for life manifests itself in an ethic (such as the lark who endorses the productivist logic of “early to bed, early to rise”), and mobilizes ornamentation/hygiene to provide cover for its contempt.

When cyclical repetitions are afforded a superordinate status, and subjected to the antagonistic effects of social organization in modernity, a common form of hygienic discipline of bodies appears in the notion of “returns” to nature. In *Withnail and I*, Withnail and Marwood leave their flat for Regent’s Park, where Marwood comes to the realization that what they need is to escape to the country in order to rejuvenate. Withnail sardonically replies, “Rejuvenate? I’m in a park and I’m practically dead. What good’s the countryside?” (B. Robinson 1987). Withnail’s comment undercuts the traditional Anglo conception of nature as a cure-all for purportedly urban ailments, which is underscored by the mayhem that ensues upon their arrival in the countryside. While the countryside can offer an escape from the intrusive presence of artificial lighting, which is a precondition for the extension of diurnal rhythms into the night, even grand scale parks and the countryside cannot deliver the restorative promise assigned to them by their advocates.

Frederick Law Olmstead (the famed landscape architect and designer of Central Park) aptly summarises the dominant cultural understanding of the park when he lovingly surmises, “(T)he enjoyment of scenery employs the mind without fatigue and yet exercises it, tranquilizes it and yet enlivens it; and thus, through the influence of the mind over the body, gives the effect of refreshing rest and reinvigoration of the whole system” (Rybczynski 1999, 258). Influenced by the British picturesque, landscape, and park design, Olmsted articulated the nineteenth century ideology of moral improvement through contact with a cultivated nature. The park was to be the salve necessary to soothe distempered and disordered souls in the expanding and discordant urban world. The narrative of *Withnail and I* explicitly critiques this notion of restoration through re-immersion in rhythms of nature.

Lefebvre rejects the functional attributions to the park and countryside even as he retains a belief in the primacy of cosmic rhythms. The park is offered as a sort of still life or homeostatic image that purportedly harmonizes other modes of urban existence through reference to nature. Marwood’s attempt to restore a rhythmic existence through inhabiting a naturalized landscape is what Lefebvre (2004) critiques as a sort of vestige or parody of nature, and fails to take into consideration the fact that each image or succession of images of the park or country hides a polyrhythmic world. For Lefebvre, the still life image that functionalist ideologies present through the park misses oscillations found in nature. Lefebvre’s critique has two levels of meaning. Firstly, the park is not nature and therefore cannot restore a cosmic rhythm. The park is a social institution of modernity that is proffered as a harmonizing and naturalizing influence, and is actually a parody of nature offered as its continuity. Secondly, the image that we have of the park is caught up in notions of landscape and still life imagery, which elide the oscillations contained therein in favour of attributing to it a fundamental role in restoring the energies of the

worn-out labouring classes. The myths embedded in images such as Thomas Gainsborough's 1750 painting *Mr. and Mrs. Robert Andrews* proffer a simulacrum devoid of the linear rhythms that constituted them, instead favouring the image of nature and, by extension, cosmic rhythms as a restorative for the supposedly intrusive rhythms of urban life.



Figure 5 Thomas Gainsborough. 1750. *Mr. And Mrs. Robert Andrews*.

Ultimately, the park cannot deliver nature as was conceived by Olmsted and it is therefore unable to restore a rhythmic existence to the suffering insomniac, including Olmsted's own lifelong chronic insomnia.

Dressage: Capital, Nature, and Sleep

In the *Grundrisse*, Karl Marx argues that the worker requires ten to twelve hours of rest in order to sufficiently restore the capacity to repeat labours and exchanges with capital (1973, 294).

While Marx's assertion runs counter to sleep research that points to a historically consistent level

of sleep need, Marx points to the way in which sleep was subordinated to the emergence of industrial labour as a necessary restorative of productive energies (thereby infusing Marx's work with the nineteenth century concern with energy stemming from Hermann von Helmholtz and the first and second theories of thermodynamics). While sleep itself may be natural and necessary, and the rhythms of consolidated patterns of sleep represent an invisible structuring of the processes of making linearity repetitive as I discuss above, it is an open question as to the relationship between nature and how individuals sleep within advanced capitalist societies. As I have already noted, Lefebvre understands the relationship between cosmic and linear rhythms as one of interpenetration, with socially determined linear repetitions integrating a basic subordination to cosmic rhythms. Lefebvre's conception of the institutions of everyday life is that they remain "shot through and traversed by great cosmic and vital rhythms: day and night...and still more precisely biological rhythms" (1991/2004, 73). While Lefebvre never explicitly connects sleep/wake cycles to these cosmic rhythms, the implication of his narrations of arrhythmia and conceptualisations of cosmic rhythms is such that sleep cycles and the sleep regime in capital are thus recuperated as being a part of nature. A primary problem in the study of sleep and society is thus to discern the manner in which this interpenetration of the cosmic and linear repetitive forms the heart of epistemologies of sleep in fields ranging from the sleep sciences to its popularization in the media, as well as in popular discourses ranging from film to biography. Further, the question remains as to whether this interpenetration works in such a manner as Lefebvre describes, or whether the relation is also opportunistic insofar as the persistence of cosmic rhythms offers capitalism's linear repetition an alibi for its structuring agencies and assignment of responsibility for one's sleep.

In following these two problems, I turn to Lefebvre's conceptualization of dressage. He defines dressage as a "bending" by which the subject is broken in, through a series of repetitions of linearly organized "imperatives and gestures" (1991/2004, 39). Lefebvre posits the basic structure of this regime of sleep in the tripartite division of dressage into times of "internal activity of control...integral repose (sleep, siesta, dead time) ... [and] diversions and distractions" (2004, 41). This division of the time of dressage carries with it a curious but significant parallel to the modernist, urban functionalism of the CIAM (Congrès International d'Architecture Moderne, founded 1928) plan for the functional city, which divided the city into spaces of work, residence and leisure. Like CIAM, which assigns a functional space for sleep, modern sleep science conceives of sleep in terms of functionality and segmented time. Lefebvre draws on these divisions in his functionalised typologies of dressage. All three modes render sleep as a uniquely defined activity, which occurs in a specific place (within the functional dwelling in the topography of the modernist city) and in a specifically assigned block of time (the time of repose). The obvious point then is that the disciplinary regime of modernity takes shape in the division of time within the body through the extension of time into the division of space across the city, and that these divisions attempt to fuse together the time and space of sleep.

The question, however, is how to understand the relationship between regimes of sleep and wakefulness and circadian rhythms. Theodor Adorno offers a slightly different terminology and approach to this issue. He uses the phrase "organic composition of capital" to point out the "growth in the mass of the means of production," which "designates subjects more and more exclusively as partial moments in the network of material production" (1946/2005, 229). This basic claim of the functional objectification of subjects in capital is expanded upon when he

argues that this is no mere mechanization of man. This designation is not just “specialized technical faculties, but...equally their opposite, the moments of naturalness which once themselves sprung from the social dialectic and are now succumbing to it...causes man to pay for his increasing inner organization with increasing disintegration” (1946/2005, 229-31). Adorno also problematically reproduces notions of original character traits that suffer deformations, but the organic composition of capital offers no recourse to a natural cosmic rhythm within the order of capital. Seemingly natural patterns, such as circadian rhythms, are a product of socially organised rhythms, but the unhealthy and overlapping nature of these multiple, constitutive rhythms serves to undo their organic spontaneity. That is, cyclical repetitions presumed to be operating at the heart of modern life are mere appropriations to render invisible the lie at the heart of any recourse to naturalness of rhythm. The structural organization of everyday life in modernity collapses into arrhythmic states not strictly because of some conceived deformation of an underlying nature, a bending that goes too far, but because the tensions that structure our movements through everyday life produce social and individual disintegration alongside the naturalness that they initially produce. Rather than a social order that produces friction through an improper appropriation of natural rhythms, the disintegration of the individual is a constituent process of its dialectical production. Adorno calls this process the social pathogenesis of schizophrenia.

Adorno’s conception of the organic composition of capital and the social pathogenesis of schizophrenia clarifies the relationships between the subject, social organisation, and cyclical patterns. Instead of an imprint on a vestigial remnant of a different rhythmic order, Adorno points to how adaptation to the rhythms of capital conjoin with an internalised, intuitive naturalness. Linear repetition is thus not simply shot through with cosmic cycles; rather it is

validated by reference to these cycles. The point here is not to say that there is no such thing as a cosmic rhythm, but that there is no possibility of discerning some supposedly natural wakeful/sleeping rhythm that could be organically mapped onto these cosmic rhythms. The analytical separation of cosmic and linear repetitions cannot lead us to a natural body and the assumption of a cosmic understanding of sleep is removed from linear repetitions of social life.

Arrhythmia and Pathology

In the *Critique of Everyday Life Volume I*, Lefebvre argues for a critical re-positioning of the philosopher. The philosopher must be a “witness to alienations, and their judge... Keeping his [sic] vigil by night and day... [they will] not be satisfied simply to study the development of ‘human nature’; he will want to help it, negatively at least...by removing whatever may obstruct its fragile needs” (2008, 98). The notion of constant vigil establishes an equation between sleeplessness and the critical philosopher, and the critical potentiality of sleeplessness lies at the core of many of its articulations. Some of these characteristics of vigilance and watchfulness form from androcentric appropriations that sustain the antipathies of typically white masculine subject positions in the critique of society (Chapter One), while other appropriations are more idealistic. I would like to briefly explore these appropriations to develop an initial formulation of the critical capacities and vantage point that sleeplessness offers.

In his interview, “On the Utility of Insomnia”, Emmanuel Levinas (2003) argues that insomnia is significant insofar as it represents awakening, which is counterpoised to the negative attributes of sleep and falling asleep in Enlightenment thought. This strand of thinking dovetails with a dominant mode of cultural thought, which sees sleep as a penalty for being awake. Sleep is thereby equatable to a lack of consciousness and the sleep of reason. Awakening has thus been

afforded a significant role and importance in modern thought, insofar as it represents the termination of sleep and the emergence of the light of awareness. However, the experience of sleeplessness is the antithesis of awakening, as it is more aptly defined as the accumulation of wakefulness. Awakening, when it occurs, represents an interruption of sleep, an inability to achieve a state of satiation concerning rest, which supposedly offers the ability to experience the world attentively and with the requisite focus. While awakening represents the cessation of sleep, and the fulfilment of a restorative process, sleeplessness holds awakening in abeyance and when the sleepless person “arises,” they do so in a state of disturbance. Moreover, in insomnia there is no recourse to some sort of Levinasian “search by the awakened for a new, more profound, philosophic sobriety” (2003, 127). Taking Styron, Marwood or Withnail as figurations of the twenty-four-hour philosopher, it is obvious that they bear no resemblance to philosophic sobriety.

Upon the failure of Marwood’s hygienic attempts at restoration in Regent Park, we see him ruminating on his relationship to time while taking a bath. On the wall above his tub is the iconic movie still from Harold Lloyd’s *Safety Last* (1923) in the bathroom of their flat.



Figure 6 Harold Lloyd. *Safety Last!* 1923.

The image shows Lloyd holding onto the minute hand of a clock high above the city street. Thus, while insomnia begins as a light in the window above the street at 4 a.m. in Lefebvre's text, the film suggests a new metaphorical residence for the sleepless. The image of *Safety Last* symbolically shifts the sleepless from the secure confines of domestic space, proffered by Lefebvre's image of the light in the window, into the liminal space suspended above the city street, but without the structural support and perspectival vantage point offered by the window or

the balcony that so often figure in the constitution of the modern subject.¹ While sitting in the tub, Marwood offers his own translation of this anxious and precarious existence:

Speed is like a dozen transatlantic flights without ever getting off the plane.
Timechange. You lose, you gain. Makes no difference so long as you keep taking the pills. But sooner or later you've got to get out because it's crashing then all at once the frozen hours melt out through the nervous system and seep out the pores. (1987)

Marwood's arrhythmic endgame situates insomnia as a form of accumulation of fatigue and terror that results from his precarious grasp on the measured, rhythmic tick-tock of the clock.

The use of substances (caffeine in the diner, drugs in the flat) is intended to manage this existence, or to extend it further, but these attempts at an alternative drug hygiene results in the further accumulation of fatigue and sleep loss in the body of the insomniac.

As is the case with Marwood's narration beneath the image of Harold Lloyd, sleeplessness represents an accumulation of wakefulness that leaves the insomniac with not only a precarious grasp on time but also a physically felt accumulation of frozen hours within the body. Nathaniel Kleitman, in his history of experimental insomnia studies, examined the critical capacities of subjects who underwent periods of forty to 115 consecutive hours of wakefulness. While he noted that pain, delusions, and buzzing in the head accompanied these periods of accumulated fatigue and that pain figured as a cause of insomnia, he also noted that mental capacity remained the same while attention waned (Kroker 2007). That is, the early efforts at experimental insomnia, geared to determining the ability to function on minimal sleep, found that many of our capacities were dulled or damaged by prolonged periods of sleeplessness. These findings overturned the Romantic vision of the nonsleeper, as well as the (militaristic, productivistic) dream of the minimal or malleable needs of the soldier or worker. In this sense, sleeplessness

¹ See Jonathan Crary's *Suspensions of Perception: Attention, Spectacle and Modern Culture* (2001) for his analysis of the balcony in Monet, and debates about the role of the window in the constitution of the bourgeois subject with the advent of the horizontal perspective of modernist architecture in the 1920s.

represents a heightening of modern subjectivity proffered by Walter Benjamin in his 1936 essay “The Work of Art in the Age of Mechanical Reproduction” (1955/1968). For Benjamin, the modern subject is defined by a liberation of judgment attended by an attenuated ability to focus, thus rendering the insomniac as a more extreme manifestation of his mediated subjectivity.

In conclusion, this insomnia-based re-writing of the critical philosopher of Lefebvre and Levinas opens up questions about the positionality of the sleepless and the forms of knowledge they accumulate. From the balcony, the attentive subject purportedly can listen and look at the rhythms below in order to “dig beneath the surface, [to] listen attentively... [in order to see] the *objects* (which are in no way things) polyrhythmically (2004, 31). Marwood and Withnail, as well as Styron, do not occupy such a site. The solidification of wakefulness in the body typically entails an attenuation of the ability to pay attention or to form and recall memories. They also exist in a heightened state of terror insofar as their tenuous grasp on time is palpable, to the point that the heart that Lefebvre cites beats arrhythmically. To depict them as just such a philosopher is to attribute a romanticized interpretation of the exclusion and alienation of the sleepless, and to become susceptible to the forms of androcentric insomnia developed in Chapter Two. However, they are not purely pathological. They bring forth critical approaches to the spaces and rhythms of everyday life. The experiences of Marwood and Withnail thus define an insomniac experience as an arrhythmic exclusion from the production of differential time. They are held in suspension and removed from the spatialization of that time in urban forms, and yet a simultaneous immersion and immiseration within the street, the diner, or the park.

What emerges from this preliminary analysis of cyclical and linear repetitions is a number of key questions concerning the situation of sleep and sleeplessness, and the latter’s pathologization as insomnia in contemporary society. The first has to do with the assumption of

an underlying nature (a cyclical rhythm) that shapes the bodily rhythms into modernity, and the oft-reported negative impacts or impingements of the modern social world on the individual's rhythms. Are these rhythms separable and is the social world relegated to a purely negative role in the structure of sleep? Secondly, what are the impacts of the pathologization of sleeplessness as insomnia? In reading insomnia as pathological, schizophrenic, or "madness," what does the condition offer the contemporary world as a means of not only understanding sleep, and further, what does it offer to society as a cypher for reading itself? What kind of criticality does it offer and to whom does it offer it? Thirdly, what kinds of knowledge accumulate in the experience of sleeplessness? How does the precarious experience of the loss of sleep rhythms itself structure a pathway through institutions of daily life (the family, work, medical science, etc.)? If we are to restrict the Romanticizing impulses of sleep loss and sleeplessness, both in its sleep machismo and critical philosopher modalities, how can the experience of insomnia not only open up an understanding of not only the normalizing rhythms of society, but also the disciplinary apparatuses geared to individualizing responsibility for the adequate care of the self in modernity? Finally, of these disciplinary measures, what role does the various forms of sleep research, clinical treatment, and their popularization play in terms of our understanding of sleep and its presumed naturalness or consolidation through bodily and cosmic rhythms? It is this question of the construction of sleep as an object of sleep research that I now turn. The forms of knowledge it produces are key to the deployment of institutional forms of what Michel Foucault refers to as power-knowledge in the discipline and regulation of a managed population.

Chapter Two: The Madness of Insomnia: Androcentric Tropes of Psychic Breakdowns and Social Antipathy

Any important disease whose causality is murky, and for which treatment is ineffectual, tends to be awash in significance. First, the subjects of deepest dread...are identified with the disease. The disease itself becomes a metaphor.—Susan Sontag. “Illness as Metaphor.” 1978.

The Abuses and Appropriations of Schizophrenia

Popular cinematic portrayals of interminable or prolonged sleeplessness tend to utilise the arrhythmic experience of everyday life as grounds for the development of schizophrenic masculine characters in a moment of crisis. These narratives typically congeal the symptomatic presentation of insomnia into a pathological condition, in which the frustrations, fatigue, and overall suffering induced by sleeplessness are put into violent motion in an urban milieu. The result is an articulation of four positions and spaces: masculine identity and its crises; urban space under neoliberal capital; the condition of insomnia and its symptoms; and madness. These narratives situate insomnia as the means to measure capitalist modernity for its effects and affects on normed and regulated existences of male bodies. The dominant representations of insomnia typically begin with a presentation of symptomatic aspects of insomniac experience, with its attendant fatigue and desperation, as part of a fundamental break with the cyclical reproduction of a rested and productive individual and the social order to which that individual is slotted. As a figure breaking from the dominant order, the insomniac is prone to romanticization, and to criminality. As such, this chapter works to further establish the relationship of sleep within the socioeconomic order of neoliberalism, and to show how insomnia has become defined as an androcentric form of suffering, operating as a sort of “red pill” by which a purportedly misandrist social form comes into view.

The standard trope of the cinematic insomnia narrative structures a subject without boundaries: a schizophrenic, almost always masculine subject who struggles to accommodate the rules of normative behaviour, or who rejects them entirely in what is often a fit of revulsion and disgust, and whose state of constant vigilance and privileged perception constitutes the vantage point from which social antipathies, particularly misogyny, emerge. The vast majority of these cinematic figurations are not expressly concerned with examining the experience of insomnia. Rather, these narratives typically deploy characters who are fully constituted insomniacs from the beginning. Reified figurations of the insomniac establish a character defined by suffering and constituted by a distinct positionality and mode of perception. This casts the character as an outsider who is antagonistic towards the normed routine of daily life, to the point that the symptomatological representation of insomnia begins to appear as a mere necessary formal device, rather than as an element with its own significance. This appearance is deceptive. The symptomatological rendering of insomnia is the necessary prerequisite for establishing these figures: it proffers a necessary truth claim concerning the physiological suffering of the male insomniac at the hands of the world into which he is thrown, and produces the expansive time architecture through which he moves. These relations and perambulations undergird the unstable epistemological ground of the masculine insomniac.

As Jonathan Crary argues in his text *24/7*, “[s]leeplessness takes on its historical significance and its particular affective texture in relation to the collective experiences external to it, and insomnia is now inseparable from many other forms of dispossession and social ruin occurring globally” (2013, 18). What the cinematic narrative puts into question is the relation of the sufferer to those collective external experiences. How these figures interpret their world from within a space of abject suffering and delusion is central to how they orient themselves towards

those forms of dispossession. As a result, the insomnia narrative opens up affective critiques of the social totality from within a space where there is no conceptual clarity, and which is marked by a generalized loss of affect. These critiques occur at the thematic level and feature the delusional syntheses that inform white masculine social antinomies. Masculine figurations of insomnia dissolve the organized structures of the diurnal day and, in a state of perpetual motion, reconfigure standard criticisms of the modes of dispossession that define the neoliberal era. Thus, these narratives are not some entry point to a more significant exploration of a crisis in masculinity or a means for reading the environment for forces that destabilize consolidated patterns of sleep and wakefulness. Moreover, they are not a means to point to the sleep disturbing effects of the new social order. Instead, insomnia serves a dual function as the essential but unstable ground on which neoliberal crisis stakes its truth claim, while centring the insomniac figure in analysis repositions the critique from questions of social disorder to the orderly dispossession experienced under neoliberal capital.

The androcentric cinema narrative contrasts with the sleep disability memoir. The memoir form typically constructs a dual process of relating the experiential aspects of insomnia within the regimented routines of daily life grounded in patterns of consolidated, nocturnal sleep, along with a navigation of the institutional structures geared to intervene in arrhythmic sleep patterns. If not gynocentric, it is a qualitatively distinct genre of writing in which the experiences of women and transgender persons are much more likely to find expression, and in which insomnia is explored in its causal structures, symptomatology, diagnostics and treatment, and social impacts. The point of diversion that constitutes the androcentric narrative is distillation of social elements into some form of masculine crisis and the subsequent displacement of antagonisms and frustrations through the lens created by this distillation. The result is an

unleashing of insomniac energies into a uniquely masculine social antipathy, grounded in a twofold emphasis on madness and a privileged understanding of the social order that are not foregrounded in the sleep disability memoir.

Given that women are estimated to represent about two thirds of all insomniacs, the overrepresentation of men as insomniacs in Hollywood cinema (and as test subjects in the research spaces of the sleep sciences) is striking. The purpose of this chapter, then, is to locate the different interpretations of insomnia that facilitate the androcentric narratives of cinema, in particular a syncretic combination of the pathologization of sleeplessness and the purported emasculation of men in neoliberal capital. Exemplars of this model that are the focus of this chapter are the films *Taxi Driver* (Scorsese 1976) and *Fight Club* (Fincher 1999).² Travis Bickle (Robert DeNiro) in *Taxi Driver* and “Jack” (Edward Norton) in *Fight Club* form a set of bookends in this insomnia genre, as they situate the pathologically schizophrenic identity within the crisis years of industrial capital in the former, and in the reconfigured capitalism of a post-industrial, consumer-oriented, information society in the latter film.

This chapter begins with a discussion of Foucault and Canguilhem in order to explore the conflictual ways in which illnesses such as insomnia can be read as pathological conditions originating within the individual, and as overdetermined effects of the environment. Caught between these two shifting methods of interpreting suffering is the specific hinge of suffering out of which distinctly inward or outward looking orientations and mobilizations emerge. The chapter will then develop the androcentric insomnia figure through Emile Cioran’s postulation of

² See also *The Machinist* (2004), *Solaris* (1972), *Lost Highway* (1997), *Insomnia* (2002), *Insomnia* (1997), *Marathon Man* (1976), & *Withnail and I* (1987). Nino Ricci’s novel *Sleep* (2015) also fits this pattern as well as an episode of the *X-Files* (1994) “Sleepless” (2.04). Adrian Barnes’s novel *Nod* (2012) provides a twist on this narrative mode by situating the white male as the lone representative of reason in a world that has gone mad after an insomnia pandemic.

anima insomnia: a privileged epistemological position that is the result of liberation from the socially produced and disciplinary bind between naturalized bodily rhythms and the linear rhythms of capitalist production. The result is a personally validating form of suffering and epistemological privilege that render the insomniac as distinct from and better than the everyday masses. Using Cioran's insomniac as a model, I then examine two significant characters/insomniacs of film history: Travis Bickle and Jack. Instead of reading Travis's mental instability and psychopathological violence as a reflection of a broader social disorder, the first section will situate him within a quest for functional subordination in the social and gendered divisions of labour and reproduction. Opened up onto an expansive range of accumulation afforded by insomnia, Travis enters into a series of crises that resituate the source of personal disorder into the ideal, while the ambulatory nature of insomnia opens a spectacular form of accumulation that leads to further crises. In turn, Jack's fatigue induced collapse leads to a schizophrenic splitting of his subject position in which the liberated, anima insomnia portion of his identity navigates the bureaucratic structure of neoliberal capitalist modernity. It is within these rationally ordered institutional spaces that Jack's movements are structured and out of which new, correlative modes of association of masculine suffering conjoin with the sufferings wrought by his condition. Again, rather than merely locating the source of suffering at the level of masculinity, I will show how these movements and modes of correlative thought narrate insomniac suffering as the means for developing and understanding suffering as a distinctly masculine experience.

Of Disorganization and Pathology

One of the key questions in this chapter concerns how cultural understandings of insomnia open up to pathological and androcentric terms. The first part of the task, then, involves laying out a conception of the pathological and its relation to bodily and social organization, and ultimately to the notion of the abnormal. It is the works of Georges Canguilhem and Michel Foucault that most expressly establish the genealogy of these terms, which I argue form the epistemological foundations for encoding insomnia within cultural common sense. Their historical frameworks situate insomnia not as an illness with a causal psychological or physiological pathology, but as a condition in which a secondary sense of pathology emerges out of the relations the sufferer has with the socio-political space he inhabits. Canguilhem's work traces diagnostic thought in nineteenth century medicine, where questions of etiology become questions concerning the relation between individualized pathologies and anomic social structures. Thus, instead of looking to understand the condition itself, one reads the individual and the social for meaning through the manifested condition, thereby providing the grounds for the exponential growth of meaning structures through the figure/ground dialectical relationship. In contrast, Foucault's genealogy develops the nineteenth century concept of the "condition," whereby structures of illness are read as internal deviance or disorder. What these two genealogies proffer are the dominant epistemological foundations for reading and understanding psychological conditions and individual suffering.

In his discussion of the late nineteenth century neurophysiologist Hughlings Jackson, Georges Canguilhem presents a confluence of positivist modes of social and biological organization, the purpose of which is to create complex hierarchies of control that dominate differentiated and complex social and biological structures and functions. In this schema, the

order embedded within the larger social totality shapes the orderliness of the individual. Jackson's schema establishes a pathological state that is not the result of decompositions or diminutions of physiological states or processes (that is, within a material, biological origin); rather, it involves a dissolution or loss of *control* over these functions. In this sense, poorly governed elements are situated as part of an overlapping network of social and biological organs, and these elements of disorganization are bound in mutually affective relationships. The dissolution of control is thus a result of the liberation of a dominated function (such as the usurpation of sleep by wakefulness in the diurnal organization of the day), unmoored from its functional subordination to the larger organism, and the concomitant re-emergence of a more reflexive, unconscious modality. Jackson articulates this individual manifestation to an externalized social disorder. The properly subordinated order of sleep and wakefulness is thereby subject to potential pathological disruptions without the proper organizational symmetry in the social whole. Jackson's logic enables a Janus-faced ability to read from the manifestation of illness inwards to the unintegrated social body and its improper management of the self, or to read outwards to judge or condemn the reigning social order for its detrimental and readable affects upon the physiognomy of the individual.

However, Jackson's template for understanding deviance as a pathological condition rests upon the singular suffering of the individual, which creates a theoretical gap or separation of the suffering subject from the environment. In contrast with a more properly medical pathology, which defines a causal structure for an illness or disease, the pathological as established by Jackson or Francois-Joseph-Victor Broussais situates the pathological as "*pathos*, the direct and concrete feeling of suffering and impotence, the feeling of life gone wrong" (1991, 137 emphasis in original). The open-ended definition of a suffering wrapped up in a "life gone wrong" creates

a distantiating hinge within the notion of pathology. This hinge moves beyond the homology of the individual and the social, in which the sufferer subsequently translates the experience of suffering into the terms of a fundamental disjuncture or antinomy between the sufferer, and the worldly, urban context of his life. Instead of individual disorder manifesting as a mere reflection of social disorder, wherein the former subsumes the latter, the sufferer moves out of his delusion to create new connections, meanings, and attributions in the space of the social. The Jacksonian hinge is thus a means to move between the homologous reading of subject against environment (the objective gaze), and the subjectivist reading of the environment as a wellspring of suffering (the subjective gaze). The resulting insomniac epistemology relies upon the unstable and hollowed out life of the sufferer for the attribution of meanings. It puts into momentary abeyance any notion of a structural, formal determination of the illness itself through the forms of the sufferer's existence within the narrative, while retaining a problematic linkage between the two that enables slippages to occur. In opening with the life gone wrong motif, the narrative opens a space to insert the suffering body as potentially deviant from, or reflective of, social disorder: a body that is qualitatively distinct, yet lends itself to translations into the register of a world gone wrong.

What is the foundation upon which a loss of control can occur, and how can we interpret this loss of control? Foucault's notion of the condition best articulates the male insomniac's loss of control. As noted by Foucault, the appearance of the pathological in psychiatric discourses of the nineteenth century entails a dispensation with bio-medical notions of illness in favour of what is known as "the condition." The condition, which Foucault attributes to Jean-Pierre Falret circa 1860-1870, is "a privileged psychiatric object... [one that] is not exactly an illness with a starting point, causes and processes; indeed, it is not an illness at all. The condition is a sort of permanent

causal background on the basis of which illness may develop...In other words, the condition is the abnormal basis upon which illnesses become possible” (2003, 311-12). The condition opens the possibility of deviance from norms that originates from within rather than from without. In the insomnia film, insomnia typically appears fully formed from the beginning of the film: it perfectly occupies this space of the abnormal that does not occupy a legitimate place as a medical condition. It is thus the pathological ground on which further manifestations of mental illness or madness take hold, while its presumed traits form an initial disjuncture in the functional subordination of the social body. The condition centres the narrative within a subject defined “by a general disturbance in the play of excitations and inhibitions, by the discontinuous and unpredictable release of what should be inhibited, integrated, and controlled” (Foucault 2003, 312). In contrast to the Jacksonian notion of a liberated function, the condition as it comes down from Falret represents the chance emergence of a form of disorder or suffering that lacks the kind of overdetermination found in Jackson. It is thus possible for insomnia tropes to consolidate insomnia as a condition (Falret) upon which subsequent articulations of madness evolve, while insomnia as pathology (Jackson) validates any subsequent movement from mental illness to the milieu through a slippage in which social and individual disorder are understood as mutually constitutive. That is, the insomniac occupies a space where he is both an a priori but unstable and delusional subject (the emergent), and the effect of the liberation of functions that should be controlled through social organization (socially induced desynchrony resulting in schizophrenia).

Insomnia is thus the ground on which “madness” develops and implicates the individual sufferer and the social in a shifting matrix of unstable knowledges and meanings. Interestingly, the nineteenth century psychiatrist Moreau de Tours articulates these elements in his definition

of madness as “that particular state of our nervous system in which the barriers of sleep or the barriers of wakefulness, or the double barrier constituted by sleep and wakefulness, are...breached at a number of places” (Foucault 2006, 282). The link between the delusions of madness and the rhythms of sleep and wakefulness is all too common. It is thus that de Tours can expressly link sleeplessness and madness as the result of the dissolution of the functional division of the normatively sleeping self. Sleep is the boundary point where “external life ends and internal life begins,” and thus the foundation of the liberal, bourgeois subject and its supposedly stable orientation. Any breach of this foundational distinction can only result in an “irruption of dream mechanisms in the waking state [that] will induce madness” (282).

The Androcentric Logic of Insomnia

The historical record of those afflicted with insomnia is a veritable “who’s who” of tyrants, Fascists, and totalitarians. This uncomfortable list starts with the likes of Hitler, Stalin, and Mao. In his minor turn, Emil Cioran (1911-1995), a prolific essayist and insomnia memoirist, developed a cogent template for specifically androcentric articulations of insomnia. Cioran was born in Romania and migrated to Berlin prior to World War II, where he was a supporter of National Socialism, and ultimately ended up in Paris after the war. Willis Regier notes that Cioran’s early works developed an understanding of insomnia as a noble affliction that highlights the pains and ecstasies of solitude, and the sufferings of modern, urban existence (2004, 995). Insomnia is thus a form of a heroic, but fatefully futile, struggle with everyday urban life. This depiction is common to androcentric insomnia literature. Cioran’s observations highlight an overall dread as each day is slowly killed in advance as the early morning hours creep onwards in an interminable succession, while daytime hours are spent in a haze. The

foreknowledge of exhaustion, the violent encounter with the social structures of the capitalist day, or the likelihood of a very late awakening, all serve to undermine any of the marvels associated the potential of a new day.

Cioran's insomnia onset occurred around age seventeen and remained with him for the rest of his life. His writings on the subject are interwoven into his tracts published between the 1930s and the 1970s. In these texts, he combines a variety of astute observations of the experience of insomnia with notions of alienation that define separation from, and antinomy towards, society. In particular, insomnia was more than a complex of symptoms with a range of negative effects on mood or perception. Rather, it was a condition that afforded the sufferer a differentiated mode of perception and a privileged epistemological positionality over those masses that thought they saw clearly by the light of the day. These sufferings attendant to animal insomnia provided a foundation for distinguishing insomniac "man" from animal, and sufferer from the mass of humanity.

For Cioran, insomnia begins as a state of suffering. In a typically melodramatic form, he expressed a desire for death from within the state of "despair, entrapment and vertigo" (1005) imposed by his chronic sleeplessness. As Cioran notes, insomnia produces a range of obvious symptoms such as fatigue and bodily pains, along with attendant frustrations in dealing with the rigid structures of bureaucratized and rationalized capitalism. Cioran thus creates a hysterical body that expresses its pain and suffering in ever louder and more extreme forms. For Cioran, insomnia was an abject experience in which all aspects of identity and self were washed away. The manifestation of this dissolution of identity was brought on by suffering and despair (Regier 996), while he also ascribed it to an agency of "ingenious torturers" who left him "stupid, dazed, without memories or anticipations" (1000).

Insomnia thus appears *ex nihilo* and proceeds to lay waste to the identity of the sufferer, who is then left to cobble together the sources of that suffering. Cioran's insomnia encloses suffering in a figurative form of "ingenious torturers," which invokes Descartes and externalizes suffering in the Jacksonian mold. The shifting register from the pathos of suffering to an externalized and coherently organized source of suffering is indicative of the ways in which the delusional figure of the androcentric insomniac resituates himself in relation to that suffering. As Felman notes in her citation of Foucault's discussion of the *malin genie*, instead of acknowledging a state of delusion, Cioran ultimately "behaves, not like a madman panic-stricken in the face of universal terror, but like an equally shrewd adversary always on the alert, constantly reasonable, and never ceasing to be the master of his fiction" (1978/2003, 49). His heightened state of perception inaugurates a key question concerning the position of the insomniac. For Felman, the epistemological position of madness represents a "blindness *blind* to itself" (36) that unreliably constitutes the external bureaucratic structure from the naïve belief in his own conceptual certitude.

Once Cioran reclaims insomnia as an intentionality of a distinctly different form of existence, he has not only externalized the source of his suffering but he has also repositioned himself as an agent invested with new capacities afforded by the source of his suffering. Felman, in her discussion of Derrida's reading of Descartes, notes that the "disqualification of delirium [in Descartes]...[is] the objection of the non-philosopher, which is temporarily accepted by Descartes, only to be surpassed by the hypothesis of universal sleep and constant dream" (45). Cioran's dismissal of delirium similarly denies him the appellation of philosopher, which he fervently desires as he situates insomnia as the true possessor of the primal lux of the day. Cioran's androcentric register thereby forms the basis of the androcentric thematics of the

insomnia film genre, whereby the unhappy consciousness of the sufferer constitutes internal tensions as an external diremption for which the sufferer subsequently possesses a privileged vantage point from which to know this external disorder. These thematics resituates sleep within a state of universal sleep, and dreams within the body of the masses, the entity/agency to which he attributes the primary source of his suffering.

In *On the Heights of Despair* (1934), Cioran further inscribes insomnia with a perambulatory function in which he wanders the “night streets like a phantom” where he “howls his distress” (996). From these “pains and ecstasies of solitude” he derives “bounties of...insight” (Regier 2004, 996). Cioran thereby claims a privileged epistemological position within a specific time architecture and motility afforded by insomnia, which is significant on two fronts. First, while insomnia represents an inability to maintain a restful and regular pattern of sleep *at any point in the day*, the time of the insomniac is almost always represented as the time of darkness. It is the presentation of wakefulness during the hours normally associated with sleep that makes palpable the wakefulness of insomnia as distinct from that of the regular rhythms of everyday existence. From the space of darkness, Cioran lays claim to the “true primordial light” (1002) of sunrise as a possession made from extended wakefulness, in conjunction with the privileged status of thought that occurs as “vigils in darkness” (999). The result is supreme knowledge: by dissolving the boundaries of sleep that structured the circadian discipline of the body, but leaving the masses unconscious and unthinking, the insomniac is able to “wrest time from nothingness” (1002).

While the masses are subject to systems of control that bound and orient their identity and their activities through their desire for sleep and the demands for optimized, attentive labour, the insomniac usurps these boundaries. Unable to exist functionally within the alternating world

of light and dark, and freed from the delusions of sight offered by the primal lux of the day, the insomniac occupies a privileged positionality that facilitates denunciations of the automatist masses. Pain and suffering thus conjoin to produce the usurpation of the biologically coordinated body of capital, and construct a figure who is intrinsically resistant to its rationalized structures. Unconstrained by the time-based architecture of sleep and wakefulness that shapes and determines everyday life for most individuals, Cioran asserts that he is able to consciously occupy the stillness of night and that this arrhythmic modality thereby represents a privileged form of distinction. Cioran thus defines what I am calling *anima insomnia*: the privileged combination of a liberated thinking alongside perceptions of society produced through increased mobility that enables an insomniac ontology that distinguishes “man” from animalistic masses (999).

Cioran’s *insomnia* narrative thereby derives an androcentric register from a phenomenology of *insomnia*’s attendant sufferings that is paradoxically blind to its own blindness. Pain and suffering are the masochistically embraced primal wound by which Cioran separates himself from society. He is thus both “chosen and criminal” (1004), eerily confirming Sontag’s diagnosis of conditions without clear etiologies. Much like Freud’s ego who rides the wild horse and believes that the horse’s actions are a product of its will, Cioran reclaims intentionality from within the dark recesses and stark sufferings that he ascribes to *insomnia*. The inability to sleep is thus transformed into a reclamation of lost time “that never would have [otherwise] belonged to me” (1002). The richness of his suffering, his “exalted and sanctifying pain” (996), is the foundation of a newly liberated function of thought now free of the disciplinary strictures of sleep. The androcentric register is thus constituted from the diremption

of the subject from the social whereby pain and suffering mark the differentiated subject and establish an orientation defined by hostility towards the source of suffering.

Sleepless Men Go Boom

Taxi Driver and *Fight Club* are uniquely positioned at the advent and the height, respectively, of neoliberal capital accumulation, with its attendant crises of masculinity. *Taxi Driver* centres on a working class cabbie, Travis Bickle, who navigates the crumbling streets of New York City in the mid-1970s, a period marked by stark breakdowns in the social order. Decaying civic infrastructure, high unemployment, rising crime rates, and a political class seemingly incapable or expressly unwilling to do anything to rectify the situation were characteristic of New York City at this time (this was the year of President Gerald Ford's infamous rejection of New York's plea for financial help that the *Daily News* translated as "Ford to New York: Drop Dead" in its banner headline). It is through Travis Bickle's incessant cruising of these "mean streets" of the city, where he is simultaneously immersed in the rhythms of city life and yet removed from it all by virtue of his position within his cab, that he and the audience gain access to the lurid, spectacle of decay. As the film begins, Travis enters the dispatcher's office for the taxi company, for which he supplies a voice-over narration: "All my life I needed a sense of some place to go...[to] become a person like other people." The story launches a quest narrative, in which a surplus of wakeful existence opens questions concerning the means to articulate a coherent sense of self from a space in which the structural boundaries that sustain the self no longer exist. Thus, through Travis we have the unstable articulation of what Stuart Hall (1978) refers to as the respectability politics of working-class culture, whereby the subject grounds himself through

articulation within the social division of labour, with an expansive time architecture through the eruption of prolonged wakefulness.

Ultimately, Travis is unable to locate a habitus for this surplus in labouring. Instead, his accumulation of ambulatory movement through the city streets forms the crux of his ensuing crisis. After his initial attempt at anchoring his identity through labour, he shifts his focus on functional subordination to hetero pair bonding with the “blonde goddess” Betsy, a political campaign coordinator played by Cybill Shepherd, the object of his muted desire. This second attempt at anchoring implodes when he unwittingly takes her to a porn theatre on their first date. Confused, sleepless, and alienated, the film returns to his apartment where he occasionally watches daytime soap operas, as though studying them for the code to a yearned-for habitus. Unable to locate himself within the social world through the structure of heteronormative pair bonding, Travis turns his attention to the mean streets and starts to fixate on what he sees as sources and symbols of social anomie: a Democratic senatorial candidate and a young sex worker. When the Secret Service foils his attempt to assassinate the Senatorial candidate who is seemingly uninterested with Travis’s concerns with crime in the streets, he turns to a teenaged, white sex worker (Iris, played by Jodie Foster), whom he “saves” and restores to her family by engaging in a bloody massacre of the men who profit from her sexualized body: the pimp, the owner of a hotel, and the john. The thematics of the film emerge from this always-already delusional character seeking belonging through labour (excessive work as a cab driver) and then through heteronormative masculinity, and concluding in the excessive and explosive violence. What began from an inability to sleep ends in spectacular violence and the restoration of familial order, via an ironic subversion of standard heroic tropes.

In his analysis of the social significance of illness and disease, Michael Taussig points towards the always embedded relationship between illness, the sufferer, and the socio-environmental context. As such, Taussig raises question of the overall inadequacy of medical-scientific explanations of illness. As he states, these methods “can state the ‘how’ but not the ‘why’ of disease,” where questions of pathology are answered but the question of ‘why me’ is met with inadequate discourses of probability” (1992, 85). Taussig’s analysis draws out the salient point that the body is more than just a “mosaic of biological entities. It is also...[an] important repository for generating social meaning” (1992, 86). The task in analysing illnesses, for Taussig, is one of restoring a broader social meaning to symptoms and relating the illness back to its condition of possibility. In *Taxi Driver* we see insomnia functioning as a primary figuration in launching an elemental trope that not only establishes the types of characters that we see, but also situates his disorganized, arrhythmic sleep as a delusional modality through which sufferings become metaphors for the inability to normatively inhabit or gain recognition from regulated social spaces. As a metaphor, insomnia becomes abstract and takes on associated structures of meaning, which is the basis of the Jacksonian diagnostic method of reading social disorder through the disorder of the individual. Significantly, a pattern emerges in which we can identify the contours of a distinctly androcentric appropriation of the suffering associated with insomnia, and the manner in which insomnia as a condition figures both mobility and social antinomies. In Travis, we have a character who throws himself into productive activity in an attempt to fill the void created by insomnia as he attempts to “become a person.” For Travis, the dissolution of the socially organized twinning of diurnal rhythms of light and dark with sleep and wakefulness brings with it a mode of endless accumulation, and places him in a state of perpetual motion in decadent urban landscapes. The phenomenological experience of insomnia, with all of

its attendant frustrations, despair, and invisibility forms the basis of an unrecognized suffering that, once put into motion, syncretically binds to other forms of suffering. These two registers, that of the place and motility of insomnia, along with the thematic articulation of the sufferings of the narrator, forms the basis of a dual system of meaning in the film.

The androcentric insomnia narrative answers the question of “why me?” through a series of transferences enabled by the mobility and paranoia of the sufferer. The resulting themes reveal a social meaning for symptoms through conventional modes of thought concerning gender roles and the contradictions of neoliberal capitalism, a curious persistence that is not fully explained through such language as atavism or an impoverished political imagination. The result of these thematic navigations is the construction of a tropological structure whereby schizophrenic social antinomies affecting Travis are the result of a denaturing process that alienates white males from a social position that supplied both respectability and the ability to control or regulate one’s own environment. The threats posed by sectors of society comprised of the “scum”, bureaucracy, and women, form the central motifs in the answer to the question of “why me” according to the narrators. Echoing Travis’s categorization of the disordered milieu, Sabine Haenni (2010) foregrounds the urban crisis of the 1970s, which is defined by both the loss of middle-class white urban residents to the suburbs along with the manufacturing jobs that once shaped a significant part of New York City, in the formation of Travis’s physiological symptoms. Bobbing across the surfaces of a schizophrenic society, Travis Bickle is left without the organizing structures that would enable him to consolidate his identity, or, as he states, to be a real person. His inability to consolidate into a coherent subjectivity is thus the precursor for insomnia, such that Haenni reads insomnia as the phantom presentation of the bigger social issue contained in the milieu.

However, the syncretic reading of Travis and his milieu moves too quickly and thus renders insomnia as a largely inconsequential means to a greater meaning structure, which shifts meaning away from the pathos of the suffering individual into an abstract conceptual register that is, itself, reliant upon the observations and categorizations of a character in the throes of madness. As Shoshana Felman succinctly notes, “[t]he philosopher ends up getting his [sic] bearings, *orienting himself* in his fiction: he only enters it in order to abandon it. The madman, on the other hand, is engulfed by his own fiction...the subject of pathos is a subject whose position with respect to fiction...is not one of master, of control, of sovereign affirmation of meaning, but of *vertigo*, of *loss of meaning*...[i]t could be said that madness...is the *non-mastery of its own fiction*” (1978/2003, 49 emphasis in original). Holding off on reading the thematic presentation of anomic disorder as the cause of the ailment, a manoeuvre that resituates the truth in the milieu and depends on the narrator’s thematization of it, opens the possibility of reading the figuration of the pathos of insomnia more closely. Foregrounding the aspect of suffering as articulated by Jackson, the assumption of a *loss* of meaning at the level of the narrator, rather than an endless production of it, interrupts the production of meaning by the protagonist and refocuses meaning in the positionality of this arrhythmic “subject” and its embeddedness within neoliberal capital.

From the Crisis of Accumulation to the Crisis of Masculinity in *Taxi Driver*

As previously noted, *Taxi Driver* begins when Travis enters a taxi dispatcher’s office for a job interview. Travis tells the dispatcher that he is unable to sleep and therefore desires long hours of work to fill the expansive hours of wakefulness. However, he finds that this intensification of labour is inadequate at filling the void. He expresses his dilemma in his discussion with Wizard

(a driver played by Peter Boyle) at a diner where the drivers converge for their breaks. Travis, following his mission of “being a person like other people,” tells Wizard that he is concerned about “some bad ideas in his head,” to which Wizard responds with a functionalist discourse on labour and identity. For Wizard, “you take the job and that becomes what you are. You do a thing and that’s what you are.” Confronted by this liberal understanding of subjectivation from functional location and modes of accumulation, Travis replies that it is “the dumbest thing I ever heard.” While Wizard’s fatalistic final retort is that we are “all fucked” and that there is no choice beyond the one he’s offered (Wizard meet Weber, Weber meet Wizard), Travis’s rejection points to the inadequacy of absorbing excess energies afforded by prolonged wakefulness through an immense accumulation of labour.

The Gordian Knot that Wizard is unable to adequately solve is the problem of alienated labour developed by Karl Marx. In the *Economic and Philosophic Manuscripts of 1844*, Marx analyses the ancillary production of self-estrangement in the larger production process. The dilemma is that labourer confronts the product of his labour as an alien and hostile entity. For Marx, the split between the labourer and the product of his labour results in a hollowing out of existence, such that the “greater his [sic] product the less he is himself” (1844/1988, 72). Travis’s insomnia is a capitalist ideal insofar as it dissolves the boundary limits of bodily reproduction, thereby freeing up a bounty of hours for productive activity: a promise that lurks at the forefront of much sleep science research today. As Travis fills his bountiful, but hollowed out and affectless wakefulness with labour a crisis emerges: his unleashed productivity only furthers his alienation. As a result, “the *abstract* existence of man [sic] as a mere *workman* who may therefore daily fall from his filled void into the absolute void—into his social, and therefore actual, non-existence” (1844/1988, 86). The initial eruption of a disturbance in the narrative is,

then, not the product of anomic disorder. Rather, the condition of insomnia opens up an expansive time architecture, for which Travis, through a working-class respectability politics, attempts to fill through labour. The scorn that Travis heaps upon Wizard's functionalist ideology represents a visceral awareness of the limitations of labour, while the question for Travis only deepens. How is he to become a person like other people when the dominant mode of identity consolidation offers no reprieve from suffering?

Greg Bird points to the problem of alienation, accumulation and identity in his analysis of *Homo approprians*. Bird notes that John Locke's *Second Treatise on Government* "fundamentally revolutionized how property was conceived...[as being] constituted in the very activity of the modern liberal subject" (2018, 38). This activity of producing property entails more than just a material appropriation of the commons; it also involves an appropriation of "one's own *person*" (38 emphasis in original). Travis's crisis of accumulation therefore occurs at the site of the production of the subject. The resulting crisis of alienation indicts the functionalist and adaptive ideologies of Herbert Spencer. In Adorno's 1968 lectures *Introduction to Sociology*, he argues that the primary importance of Spencer resides in his articulation of a social tendency towards integration, including those of formerly marginalized groups such as the industrial proletariat of the 1830s and 1840s (2000, 24). This social dynamism, based on the rationalization of ever larger social units that is at the core of modernity, results in an unceasing process of adaptation to the system, making individuals into a "microcosmic replicas of the whole" (41). Adorno's lectures, delivered during the tumultuous months of May and June, 1968, locate a fundamental disjuncture in the Spencerian theory of integration, adaptation, and differentiation that defines the ethos presented by Wizard. This disjuncture is located, for Adorno, in the homogenizing tendencies of the division of labour, which suspend processes of differentiation

that would otherwise result from the occupation of different roles in society. It is this abolition of qualitative differentiation that is the operative problem for Travis, as he is rebuffed by a structure that no longer operates in its idealized form. The problem here is that Travis's rejection of Wizard's argument does not appear on the plane of homogenization, which is what Adorno attributes as the reason for this loss of a differentiating function in the social dynamic. Rather, the problem is located in the accumulation process itself. Travis throws himself into the productive process in an extreme form, but he only accumulates more productivity, wakefulness, and alienation. The net effect remains an Adorno-esque irrationalism at the heart of the rationalization process that disrupts the social processes that defined the modern liberal subject *Homo approprians*. For Bird, "nothing rattles this subject more, nothing...could strike a more serious blow to its core disposition than that of *alienation* (2018, 37 emphasis in original). Travis's problem of appropriation of liberal subjectivity is thereby transformed into a radical philosophy in which ready-to-hand discourses of the proper subject are violently in his quest to answer the question posed to Wizard.

It is from within this space of alienation that the schizophrenic and violent trope of insomnia emerges. In a series of displacements, emerging from the void of insomnia, Travis's sufferings lead to reading the condition as a product of the environment. The first displacement occurs through his attempt at finding a place to belong within the normative heterosexual matrix. Travis's movements through the city take him past the office where Betsy works as a campaign organizer for a senatorial candidate, and he invites her on a date. However, after the date implodes when he takes her to a pornography theatre, Travis attempts to regain her interest through such normative methods as sending flowers. However, "[t]he smell of flowers only made me sicker." In addition to his cluelessness concerning conventions of dating, Travis

encounters a physiological block that causes him to recoil from normative symbols of hetero affection. The physiological, rather than conceptual, rejection of normative social positions grounds resistance in his body. However, rather than a critique, this revulsion leads to the first displacement in the fiction. Pining that Betsy was “just like the others. Cold and distant. Many people are like that, especially women. They’re like a union,” Travis’s ironic production of meanings within hetero-patriarchy foments an understanding of gender relations through a labour metaphor. This metaphor produces women as an exclusive club, and Travis reads this exclusion as a conspiracy.

The ensuing monotony of the endless days without texture or modulation becomes a defining feature of Travis’s estranged insomniac existence. He notes how “indistinguishable” days form a “continuous chain.” From within the hollow corridor of insomniac existence, where everything arrives as though from a distance and devoid of affective properties, the rhythms of daily life lose their form. Yet, in an ominous portent, Travis notes that from out of the tedium and suffering, “suddenly, there is a change.” Travis turns back upon himself and this turn facilitates a sudden recognition of what he understands to be the toxic influences of the external world upon his body. Without a medical-biological explanation for his suffering and unable to re-embed himself within the extant normative social order, Travis finds purpose and dedicates himself to fighting off his passive and sedentary life. As we watch him sitting in his apartment watching American Bandstand and soap operas, he kicks over the television set in a final ritual act of rejection of the myth of functional belonging and sets himself to the task of directing his ever-increasing social animosity outwards. In voice over narration we hear him develop his manifesto: “Listen you fuckers, you screwheads, here’s a man who would not take it anymore, A man who stood up against the scum.” In this formulation, Travis situates himself as a “man,”

with all the formal rights of citizenship, who is beset by bureaucratized social structures, induced passivity, and the “scum.” Scum is one of many terms that serve to define not only a violent, criminal class, but also a swath of the population as non-citizens. As with any paranoid politics, the space of delusion facilitates an ever-expansive set of synthetic connections.

In her study of narrations of illness, Sontag notes that the emergence of Romanticism brought with it a new figure of the bitter and self-destructive hero, “tormented by their inability to feel” (1990, 45). From out of this lack we get what she terms the modern, affectless anti-hero who is defined by dissociation (46). Travis’s quest for functional belonging, where he can be a person like other people, initiates a quest in which he orients a desire towards primary modalities of identity formation and belonging in labour and the heterosexual matrix. Unsatisfied, disaffected, and delusional, Travis translates the pathos of a life gone wrong into a world gone wrong, thereby recording thematically the syncretic link of individual and social in Hughlings Jackson along with the paranoid turn in Cioran. What we have, then, is a fundamental transference from a desire to functionally subordinate within extant social structures to a diagnosis of those structures as pathological. This transference pivots on the emergence of ingenious torturers that surround him via the media and in social interactions, and which situates Travis squarely within the contemporary moral panic concerning crime and social disorder articulated by Stuart Hall et al. (Hall 1978/2013) in their analysis of the “mugging crisis” of the early 1970s. Moral panic centres on an idea of a creeping decay of social norms, a fear of crime and barbaric criminals unconstrained by the rule of law, and, in particular, focuses fear upon an apparent disorder in the streets. Travis appends an overtly paranoid aspect to this moral panic, as a disconcerting twist in his quest to become a person. As noted by Nicola Rehling and Michael Kimmel, paranoia offers a short cut to consolidating the borders of one’s identity through a

compensatory fiction. That fiction typically centres on a pathological diagnosis of the city, which requires immediate intervention (Rehling 2009, 28, 32) through a desperate act. Unable to take out his preferred target, the campaigning senator, Travis attempts to assume the role of the masculine hero straight out of an American Western in a bloodbath as he kills the oppressors of a young, virtuous femininity (the hoped for “hooker with a heart of gold”), who is the contrasting polarity to Betsy’s cold frigidity, and is thereby returned to her rightful place in the familial order.

Thus, in the murky realm of meaning that emerges from narrations grounded in insomniac phenomenology, we have two repositories of meaning. The first, grounded in narrative thematics, subsumes insomnia into its anomic milieu. Insomnia is at once the effect of a disordered world and the figuration and evolution of a putatively regressive, paranoid politics. It structures a logic from following a figure who is blind to his own blindness, *pace* Felman, while its dialectical relation provides leads to the endless production of meaning. The second register emerges out of an initial separation of the condition from any implication within systems of control, and follows the structure of insomnia as a crisis of capitalist order, and not a reflection of disorder. The capitalist order prefigures both the anomic milieu as a crisis of accumulation and introduces a discordant note within the trajectory of meaning grounded in paranoid politics. Rather than seeking to read figure and ground (insomniac and milieu, in focusing on pathos, and in materialist rather than idealist terms, insomnia is a somatic condition that opens questions concerning the capacity for any functionalist sense of belonging. The subsumption of insomnia as an effect of anomic, environmental disorder not only delivers us into the meanings constructed by Travis, but also it suggests that insomniac bodies could find a proper place or re-establish “proper,” normative rhythms of sleep and wakefulness through the normative and positivist

restructuring of the milieu. In following the latter path, we enter the phenomenal experience of *anima insomnia* and trace its perambulations, rather than merely accepting its transferences and displacements.

The Condition of Possibility: Urban Decay and Insomnia

In one of his many turns on the experience and thematics of insomnia, Emmanuel Levinas notes that the condition makes it impossible to render “the invading rustling of existence” (1978, 61), and this inability forms the central problematic in the narrative of *Taxi Driver*. At the thematic level, the narrative is an unfolding transference from a disordered form of everyday life, premised upon its distinctly delusional mode of perception, to the broader conceptions of a denaturing process in the social order. In order to push beyond the instability and the thematic reading of toxic masculinity that evolves from this synthesis of the unstable figure and his milieu, there is one further question concerning Travis’s process of accumulation on the streets of New York City: how Travis’s insomnia creates a distinct positionality within the milieu. His distinct mode of perceptual accumulation grounded in insomnia delimits the ability to render that “invading rustling”. This enables a reading of the film that goes beyond the mutual implication of condition and environment to understand how an insomniac phenomenology produces the disorder that the sufferer is subsequently repositioned within as its symptomatic effect.

From within the pseudo-privacy of the car, one that structures a distantiated gaze upon the nighttime streets of Manhattan for both Travis and the audience, the film delivers something akin to the kind of poverty and decay tourism described by Marshall Berman in his account of the Bronx in the 1970s (1982). Ghostlike figures move about in a constant tide of often racialized and sexualized illicit activity amongst littered, steaming, and crumbling city streets. From

amongst this chaotic presentation, Travis's voice over narration tells us of how "all the animals come out at night," and while we occasionally witness passengers in his cab, the film primarily introduces the audience to his fares as disembodied remnants of semen and vomit. We see Travis cleaning up the "blood and the cum," rather than witness occupancy in his cab. The streets are thus primarily presented in the form of a diorama, with its elements occasionally passing through his cab behind the Plexiglas separating him from the back seat passengers.

Travis fills his hours driving around the city. As other drivers note, he is willing to venture where few others will go. The urban milieu becomes the defined "rustling" object of his gaze, surrounding and shaping the perceptual realm of Travis's endlessly vigilant but increasingly delusional modality. The perceptual vista of the city is perhaps the most intriguing aspect of the film. The anomic experience of the 1970s urban crisis and its pursuant moral panic concerning crime constantly presents itself as the very condition of possibility for the narrative. The urban crisis was the product of a number of historical processes that Travis reads and understands as symptomatic of a disintegration of the values that held a normative society together. The urban as diorama, however, becomes a mirror image of Travis's internal dissolution, but as a blindness he is blind to, he projects attributions onto the scene as it unfolds in typical, moralistic positivism. Rather than appropriating this homology as part of a seamless reading of each as a constitutive element of the other, one needs to read the relation as it emerges from the condition of insomnia that is the basis of any attribution of disorder in the milieu. The endlessly mobile accumulation of a spectacular assemblage of urban decay presses up against the vigilant gaze of the insomniac. While homology enables both the sufferer and the milieu to ground its anomic truth in the other, following the mode of mobile accumulation and the life gone wrong of the sufferer opens a gap between the two terms.

Mid-1970s New York City occupies an apocryphal position in the narratives of twentieth century urbanism, beset by a number of processes that were constituent elements of it: the sacking of cities by car-centric development processes; the effects of globalization and the economic instability brought about by the energy crisis; and the contradictions wrought by the American system of racialization and the gendered division of labour. The city's chief planner, Robert Moses, was central in the development and application of mid-twentieth century planning policies. These policies facilitated a decanting of middle-class whites of the city for the suburbs that Neil Smith (2008) calls urbicide, and undermined the economic base of the city. In its wake a largely poor, and much more predominantly non-white population came to define the city (for example, the former working class and predominantly Italian and Jewish borough of the Bronx shifted to 90% Hispanic and Black during this era (Berman 1982)). These processes were complemented by the loss of New York's industrial base to globalization, while the city had yet to be established as a centre of global financial capital. The recently completed World Trade Centre buildings, which would become symbols of the global financial power of the city, were largely vacant in the years following the completion of the second tower in 1971.

Scorsese's film is thus a countervailing city symphony for the end of modernism and the dissolution of embedded liberalism, and their concomitant social relations. These defined the post-World War II era, which sought to secure corporate profitability, social stability, and order, through securing markets for products by ensuring a consumer base that could absorb those products. Russian Constructivists established the city symphony genre in the 1920s, with Dziga Vertov's *Man with a Movie Camera* (1929) at its origin. Vertov's film was a celebration of the pulsating rhythms of urban modernity, with constant parallels between the perceptual technologies of film and the human body, and their movement through and within the harnessed

powers of the technologically determined and oriented city. Scorsese's film, in contrast, constantly pushes us up against the decay of mid-seventies New York City. Steaming sewer covers, cracked and crumbling pavement and sidewalks, inhabited by an apparently disorderly and racialized populace, where an innocent, white girl like Iris emerges as a sign of the corruption of innocence.

Travis literally emerges at the beginning of the film fully formed as an insomniac coterminous with the city. Travis's nightly navigations through the city streets establishes an insomniac phenomenology. He becomes eternally vigilant, while held in thrall by the disturbing phantasmagoria of the city. Thus, his insomnia induced state of dissolution renders a correlative disaggregation of the schizophrenic subject and its urban context. His status as an insomniac in a state of subjective dissolution is thus an *overdetermined* element in the narrative structure, a theme common in narratives of illness as is noted by Sontag. In her discussion of the narrative significance of tuberculosis, she notes that the illness of the individual becomes the means of judging the city as "a place of unnatural growth and extravagant passions" that render it carcinogenic, as though it produces the disordered mind of its protagonist subject (Sontag 1990, 73). As a result, paranoia is not merely a result of a delusional state of mind. Rather, it becomes a focal point and necessary device for the production of pathologies of the urban that sutures the audience to the dioramic imagery through the prevailing moral panic. As Travis navigates this milieu from within the nocturnal perambulations of the insomniac, he not only accumulates an excess of alienating labour, but also an excess of this spectacular society. He is the ultimate poverty and decay tourist from his vantage point as a mobile spectator ensconced within his cab, moving through the arrhythmic nighttime landscape of New York City streets. This second level in the crisis of accumulation that Travis's insomnia offers up as a means of reading Travis not as

a subordinated element in a disordered milieu, but as a parallel figure in the crisis of capitalist accumulation that prefigured the disorder on the streets.

Sontag's medical analogy therefore creates one further level of significance to the film that transposes the association of irrationality and madness with Travis. In his chapter on "Urban Illusion" in *The Urban Revolution*, Henri Lefebvre discusses the way the medicalised metaphor situates the urban planner. Lefebvre notes that the "urbanist imagines himself [sic] caring for and healing a sick society, a pathological space... Eventually, space itself becomes a subject. It suffers, it grows ill, must be taken care of so it can be returned to (moral) health" (2003, 157). Travis's diagnosis of the city and his mode of intervention situate him as the ultimate urban planner, making that one final intervention to correct an urban development process gone awry, and correcting the crisis that was, in part, created by planners: "[t]he urban illusion culminates in delirium. Space, and the thought of space, lead the thinker down a dangerous path. He becomes schizophrenic and imagines a mental illness—the schizophrenia of society—onto which he projects his own illness, space sickness, mental vertigo" (Lefebvre 2003, 157). Travis's desire to intervene in the disorder is not merely, or even, an irruption of atavistic masculinity within a milieu that will no longer accommodate its desires; instead, it represents the attribution of disease and the pragmatics of intervention that are the founding logic of the planner in the restoration of a world gone wrong, thereby implicating Travis's paranoia in a broader social complex of androcentric logic beyond mere toxic masculinity. The accumulation of perception from within the irruption of a dominated function and his subsequent occupation of an arrhythmic urban time architectonic leads us to a new register of the urban. His inability to render these rustlings at the subjective level becomes a means of implicating broader rationalist ideals of regulation within the state of delusion. That is, it represents a shift from a register of

personal suffering to a privileged epistemological standpoint by which Travis, as an insomniac, separates himself from and subsequently condemns the urban social milieu, its social and political structuring agents (the media, politics), and the masses who inhabit it. Thus, it is not possible to read the anomic disorder of the milieu without first having access to a figurative means to produce this specifically androcentric representation. Travis's insomnia produces the requisite inability to render the invading rustling through a figure who translates individual suffering through the androcentric lens first proffered by Cioran through the disaggregating hinge constructed by Falret's condition. Travis's eerie occupation of the role of urban planner is the product of an accumulation of the spectacle of poverty and decay through a doubly distanced and disaffected gaze of an insomniac cruising the city ensconced within his cab. The vast accumulation of perception conditions a further crisis, and the attribution of a disease metaphor to the city, which finds its release in the pathological recourse to violence.

Neoliberal Insomnia: *Fight Club*

Twenty-three years after the release of *Taxi Driver*, during which time neoliberal capital reclaimed the streets of the city, we have *Fight Club*. From within this filmic space emerges "Jack," a character whose real name is never given and who alternately goes by Cornelius and Rupert, whose experiential narrative synthesizes his insomnia with the iron cage of bureaucracy and troublesome women to form a crisis. The cure to this crisis for Jack is underground, anarchistic fight clubs. Jack is a white-collar worker and inhabitant of a condominium decorated with all the latest styles from IKEA. The opening scene of the film is a CGI trek from the inner recesses of Jack's brain out through the sweating pores of his forehead and outwards to expose the gun that he holds in his mouth. Jack's voice-over narration tells us that the "problem" begins

with a “girl named Marla Singer [Helena Bonham Carter],” for which he immediately corrects himself and retraces the origin to his suffering to prolonged bouts of sleeplessness. The layering of flashbacks establishes a dual framing device whereby Jack repositions the narrative by incremental steps as he strives to locate the true origin of his suffering, one that tumbles over the “woman problem” before locating itself “properly” within male insomnia. While the use of a flashback structure typically inaugurates an eventual return to identity consolidation, this stutter and the tone of the opening sequence infuse radical uncertainty into this narrative device.

Following Shoshana Felman’s analysis in *Memoirs of a Madman*, the stutter in Jack’s flashback represents the elusive nature of an “I” that “is always disappearing; it is a space where the *writing* of “madness” is not preceded by its *being*...in looking for the *beginning* of this being, for the *origin* of his madness, the narrator can only *re*-begin his story and his history, and discover each time that the writing has already begun” (Felman 1978/2003, 99, emphasis in original). Amplifying the logic of *Taxi Driver*, with its lack of a pre-existing consolidated subject that could then be undone by insomnia and subsequently reconsolidated through the flashback device, the reflective narration that spins out from the madness of the present in *Fight Club* is a rhetorical device that conveys the idea of ipseity by an unstable narrator. The narrative structure thereby opens up distinct registers of meaning: the first follows Jack’s narrative of reconsolidation and the second spins off from the circular narrative structure and its embeddedness in Jack’s madness.

In the origin story, Jack explains that insomnia hollowed out his experience of the real, such that “[e]verything’s far away. Everything’s a copy of a copy of a copy.” Jack relays this conceptualization through a visual metaphor that assumes Jack’s point of view from behind a copier machine that sits in front of an indistinct and blurry office scene, a Starbucks coffee cup

parading back and forth atop the machine at the front of this office vista. Life is a simulacrum, from which he passively perceives the tableau of daily events as removed, unclear and ill-defined. The metronome-like dance of the coffee cup, with its promise of clarity and cohesion, tantalizingly betrays itself in its relation to the distinctly unclear background. Later, while he is lying on the couch while watching infomercials, Jack explains, “when you have insomnia you’re never really asleep and you’re never really awake.” Jack’s expression of insomnia’s symptomatic effects on consciousness, and its creation of a third state of sleeplessness that is distinct from the dominant modalities of sleep and wakefulness, opens up a space in which the boundaries that consolidated the modern subject, as expressed by de Tours, are already gone. Without the regular, rhythmic alternation between sleep and wakefulness, the ensuing fatigue clouds wakeful consciousness, while the ensuing disordered existence deprives sleep of its restorative qualities.

The circular structure deepens the structuring incoherence that we see with the appearance of Travis insofar as the circular narrative always turns back upon itself and thus upon the dissolute and incomplete subjectivation of Jack. The concomitant hollowing out of experience crafted in the space of sleeplessness thereby induces intense and interminable suffering. Jack goes to the hospital in search of the barbiturates in order to induce sleep. Rebuffed by a physician who asserts that he needs “healthy, natural sleep,” Jack cries out that he is in pain and needs help. The physician instructs Jack to “swing by First Methodist and see the guys with testicular cancer. That’s pain.” Beyond the obvious disregard for Jack’s suffering and the reliance upon notions of natural sleep, the physician’s instructions point Jack to a real suffering rooted in a recognized, pathologically fixed illness and the social impact on normative forms of masculinity, and he situates this suffering in the distinct institutional space of the church sponsored support group.

At the support group, Jack finds deep emotional release in the sweaty embrace of a survivor (a former “juicer” played by Meat Loaf). Instructed to “really open up” to each other by a counsellor, this mode of authenticity and emotional expression provides Jack with the means to let go of all that ails him. For Jack, the effect is transformative: “babies don’t sleep this well.” The twelve-step support group simultaneously enables Jack to find recognition for his sufferings, while facilitating the abstraction and transference of insomniac suffering into the register of the masculine subject. The effect is twofold: his suffering is ameliorated when Jack recognizes his condition has become an abstract object of exchange within the support group. Thus, Jack’s institutional perambulations, unlike Travis’s street based existence, move first through a hostile medical institution, and then enter this secondary institutional space. The latter ultimately launches his delusional thinking on the trajectory that will associate his suffering with the purportedly anti-natural space of neoliberal capital, and is also one in which women, bureaucratic rationalization, and consumer capitalism (an unholy trio of ingenious torturers) conspire to weaken his potential of being a functionally coordinated identity within the alternations of the diurnal day.

Jack then replicates his psychological release in other support groups (other cancers, parasites), which offer him access to people who will actively attend to and recognize his sufferings. However, the appearance of a woman, Marla Singer, interrupts his restored and blissful sleep. As an interloper attending testicular cancer support groups (for which she asserts that she has more right to attend because Jack still has his “balls”), Jack subsequently loses his newly regained capacity to sleep. Marla is the classic castrator: she is uninterested in Jack or his attempts to control her, and mocks him relentlessly. Unable to control the woman who makes his

abstraction visible, Jack loses the newly gained fungibility of his condition and falls back into his insomniac state.

Within this restored arrhythmic modality, he meets a schizophrenic projection of himself in the character of Tyler Durden (Brad Pitt). Tyler is a self-employed entrepreneur working in a craft industry, making soap rendered from the fat cast off from liposuction clinics. On the night of their initial meeting, Tyler operates as an interlocutor for Jack, posing questions such as “[w]hy do guys like you and I know what a duvet is? Is it essential to our survival in the hunter-gatherer sense of the word?” (Fincher 1999). Tyler thus offers Jack a vision that centres on the rejection of the promises of consumer capital, the futility and the impotency associated in white collar labour, and their attendant inability to secure subjectivation and the homeostatic processes of sleep and wakefulness that presumably attend it. Instead, he offers a well-worn path to an essentialized masculinity. Tyler’s role as interlocutor translates Jack’s problem in terms of the vacuousness of the compensation given to hegemonic forms of masculinity within a hyper-bureaucratized neoliberal capitalism, where there is no ability to control and shape the world. Tyler, the figurative projection born out of Jack’s abject suffering, is the agent that facilitates a new synthetic connection between Jack’s suffering and a presumed unnatural masculine identity position within the neoliberal division of labour. While the physician represents a fundamental change in the register of meaning and suffering, Tyler takes the command to seek out a more natural rest and relocates it within an appropriation of an atavistic masculinity and the attendant notions of a proper place within a natural order. Perhaps, in order to save a lot of grief and large-scale violence, he should have run off to the woods, like Chris McCandless in *Into the Wild* (Penn 2007).

In contrast to the failure of emoting one's way to healthy sleep Tyler represents a restoration of masculinity through embodied experience: street fighting and craft labour. Initiating fight clubs offers its participants the opportunity to become unrecognizable within the normative spaces that Travis Bickle so desperately sought to belong. The buttoned down and tame daytime worker becomes an animal in the fight club, where brute force and the masochistic pleasure of the beating, whether receiving or giving, restores a properly masculine, embodied experience in a community of men. The bruises, cuts, and black eyes garnered in the fight clubs are then brought back to the daytime world and worn as a sign of disrespect for its codes. The emergent anti-respectability politics eventually morphs into "Project Mayhem:" an anti-modern, anti-consumerist and anti-finance capital organization, a pure rogue group in the Derridean sense that seeks to introduce disorder into the highly regulated street (2003/2005, 63). What we have, then, is the appearance of a well-worn reactionary response to modernity in a racialized primitivism. The group begins by engaging in small destructive pranks and culminates in the leveling of the financial district. Once Jack resolves his struggle with Tyler and they reunify into a single identity in the final scene of the film, Jack stands in the window of an office building, holding hands with Marla (who has gone from having a sexual relationship with Tyler to being banished by Jack, and subsequently restored to him by members of Project Mayhem), while they watch the financial towers collapsing from explosives set by Project Mayhem. At the primary level of Jack's narration, he resolves his narcissistic dual struggle with neoliberal capital and, with a spectral male rival for the affection of one woman as the earth literally shakes from his virulent social antipathy and restored prowess, the once rebellious Marla finally assumes her properly subordinated role at his side.

Whither the habitus?

With Jack/Tyler, the stifling bureaucratic and consumerist structures of a reconfigured neoliberal capitalism define a new world that contrasts significantly with that of *Taxi Driver*. As the film progresses, the thematic register shifts from an exposition of the pathos of male insomnia to questions concerning hegemonic masculinity and its situation in the iron cage of rationality. Raewyn Connell describes this hegemony as “social ascendancy achieved in a play of social forces that extends beyond contests of brute power into the organizations of private life and cultural processes” (1987, 184). That is, the dominant form of masculinity understands itself through its capacity to shape its surroundings, thereby overcoming Marxian alienation through an expression of power. Hegemonic masculinity is distinct from subordinated, working class masculinities that offered respectability politics and a compensating mechanism of aggression for the inability to play a determining role in political, economic, and cultural spheres. The dilemma, within neoliberal capital and developed by the film, centres on the ever-expanding bureaucratic structures, which extend financial rewards and prestige, but increasingly withdraw the ability to control social processes. White collar, white, male workers like Jack inhabit cubicles where endless procedures, surveillance, and supervision structure all aspects of working life.

For these reasons, some writers have taken the main point of emphasis for *Fight Club* as an exploration of masculinity, with insomnia again acting as a mere preliminary plot device leading to the primary issues of the film. These authors read Jack as shifting from a hegemonic masculinity to a subordinated construct as part of a downward class mobility (despite no discernible change in his status within the workplace), due to the failure of that model in the new bureaucratic-consumerist regime, and thus a turn towards a subordinated, aggressive, and

revolutionary masculinity of the working classes. In one example, Krister Friday builds an analysis based upon a quote from the physician in the book *Fight Club*, who states, “insomnia is just the symptom of something larger. Find out what’s actually wrong. Listen to your body” (Friday 2003, 19). Taking her lead from his diagnosis, and thus from a figure representing scientific objectivity within the film narrative, Friday subsumes insomnia as a mere symptomatic effect within the thematic narrative of “an atavistic notion of masculinity...[that] is first recovered and then offered the chance to regain its efficacy and reconstitute itself through revolutionary action” (7). Friday follows others, such as Sally Robinson (2011), who understand the film as primarily an articulation of white male decline, victimization, and redress for their emasculation, and inscribe within it a telos of reconstitution. Simon Lindgren extends this logic of subsumption in a queer reading of the fungibility of insomnia symptoms and testicular cancer in the film to argue, in essence, that what defines his illness is not the actual condition of insomnia, but the third term that mediates the two categories of suffering: conflicted gender identity (Lindgren 2011 , Par. 14). In turn, Henry Giroux and Imre Szeman treat the film as a means to suture a neoliberal audience to the regressive politics of the film. In their hands, the narrative becomes little more than an attempt at reading neoliberalism as an attack on masculinity that avoids the actual conditions that produce discontent (Giroux 2001). Insomnia is thus, at best, a manifestation in the real of a broader and more abstract social concern, which is read in a straightforward manner from the thematics of the film, or in a queer reading of homosocial relations. As with any form of idealist thought, this shift in the register from embodied experience within material conditions (insomnia) to the abstract (the crisis of masculinity or conflicted gender identity), with truth posited in the latter, encounters a number of stumbling blocks or contradictions. They thus read the environment symbolically for its

gendered dysfunctions *and* attribute to these dysfunctions a causal capacity in fomenting illness. They thereby shift away from the pathos of madness that insomnia encodes in favour of a Jacksonian reading of the environment.

Insomnia as the Disorder of Social Order

Following the unfolding tapestry as Jack synthesizes, judges, and acts upon the neoliberal environment is a means to ascertain the structures of meaning out of what Shoshana Felman refers to as the economy of the text (1978/2003, 111). The synthesizing mobility of the unstable narrator seemingly produces the fungibility of disparate elements, whereby one transitions from the narrative of insomnia to the paranoid politics of anti-capitalist actions and the ultimate reconsolidation of the individual. The economy of the text thereby produces a clearly androcentric register, one that situates Jack as an articulation of an atavistic form of masculinity erupting within the ever-advancing logic and hyper-constraining structures of capitalism. The involvement of insomnia as madness in the narrator's reconstruction within the circular narrative constructed by Jack, however, undermines any straightforward, sociological reading of the text. If the text is an economy, this economy folds in on itself even as it engages in the ever-expansive correlations of insomniac dream thoughts. Following Felman, we can read the text as a case of oneiric wish fulfillment grounded in the insomnia determined fugue or dream state, one that engages in delusional thought with distinct forms of condensation and resistance. We can also read the text as an instance of male insomnia in which androcentrism is born out of the social and institutional perambulations of the suffering individual as he navigates patriarchal rationality and social structures, while attending to the productive eruptions and resistances that that are not merely some return to atavism. Instead, these disruptions are encoded in the cultural logic that

links the forms of suffering and the vantage of critique and political action to a masculine subject position. The ascriptions of character traits presumed to be attendant to insomnia reproduce a cultural logic that overdetermines the masculinity of Jack/Tyler.

The purpose of this final portion of this chapter, then, is to trace the workings of reason and unreason in in order to locate the functions and significance of insomnia. Shoshana Felman's discussion of madness in literature notes how these structures integrate what Freud referred to as dream-work. Citing Freud, Felman notes that dream-work "does not think, calculate or judge in any way at all; it *restricts itself to giving things a new form*" (1978/2003, 96, emphasis in original). Freud's conceptualization of the functioning of dream-work deprives it of a specifically rational nature by noting that the express content of a dream is differently centred from the dream thoughts. The latter functions through processes of correlation and contact, shifting its attachments and attributions in a way that is clear in the rhetorical construction of the narrator, but ultimately obscure and, for Felman, unreadable (97). Thus, given the inability to produce conceptual certitude from the madness of the narrator, Felman advocates shifting to the relation the madman has to his own madness. In addition, by tracing the resistances in the text, we can then begin to posit the disruptions, motivating forces, and material forces that shape the perambulations of the narrator, and thus provide a semblance of a ground on which subsequent attributions and associations arise. Undertaking this mapping is significant because while it is not possible to locate philosophical certitude in madness, the irruption of the real within the space of madness represents a residual form of reading. In particular, the resistances and innervations it provides to Jack and his initial occupation of a fatigue induced torpor. Instead of following the narrative as it spins out from the narrator, one would instead attempt to locate the relation of the madman to the place from which he speaks both in relation to his own madness and to the

material spaces that shape and propel his movements. This topological reading entails an interruption to the figure-ground dialectical reading of insomnia through the ever-entwined relation of Jack with his milieu, and thus of a structure of meaning, in order to re-centre the reading on the moments of collapse and separation by which the production of meaning would otherwise collapse *if not for motivating forces outside of the insomniac*.

Capital Gets “Organiz-ized:” Neoliberal Insomnia

The readings that subsume insomnia within paranoid politics strive to disentangle the movements of the narrator in order to ascertain the truth born out of Jack/Tyler’s incoherent modes of thought and action. The trouble with this reading is that Jack’s perambulations seem to be constantly on the verge of collapse into torpor. The pathos of insomniac suffering is a debilitating condition that would enervate any latent social antipathy. As such, I want to follow a metaphor from Derrida’s analysis of thought insofar as thinking “runs aground,” where the correlative work of dream thoughts lose their ambulatory character. While Jack’s mode of thought lacks a proper “ground” on which to make truth claims, Derrida’s notion of running aground focuses on that “moment when a ship, touching bottom, gets accidentally immobilized. This accident is an event” (2003/2005, 122). Derrida’s notion of running aground forces a reconsideration of the manner in which we might deploy reason in order to properly centre, or ground, the dream-work of the text. The question of running aground looks beyond the analysis of Jack’s delusional thinking as a source of intentionality in the text to locate the irruptions of the real or external structures on his movements.



Figure 7 Still from Travis's apartment in *Taxi Driver*.

In *Taxi Driver*, Travis points to a poster in his apartment with the caption “One of these days I’m going to get organiz-ized!” As a play on the elusive quest for order and organization, Travis points to the desire for order from within his disordered life. In comparing the milieu of both *Taxi Driver* and *Fight Club*, there is an obvious and distinct difference in the appearance of order and disorder. Whereas *Taxi Driver* depicts a world of chaos, in the latter film the city primarily appears in the form of sanitized and regulated office spaces and the equally sanitized and glass encased world of the condominium, alongside the abandoned production zones of industrial capital. It is a world defined by the interiors of a functionally coordinated cityscape. As an unnamed metropolis centred on finance capital, *Fight Club* is a metaphorical presentation of New York City. As the city became a centre of consolidated financial power towards the end of the 1970s, inaugurated by the cycling of Saudi/OPEC oil revenues through New York investment banks (Harvey 2007, 27), Mayor Ed Koch (1978-1989) sought to advance the “Good Business Climate” so dearly cherished by neoliberal ideologues. The good business climate typically entails the implementation of policies (anti-labour, low tax, unhindered mobility of capital) designed to deliver high levels of profitability to corporate/speculative capital. The second aspect of this climate involves the production of a safe or secure space for the free mobility of upper-

and middle-class functionaries within this system. Emerging out of the moral panics about “street crime” (and thus panics about race) in the 1960s and 1970s, was a concomitant dedication to “order” and what Koch repeatedly referred to as the problem of “quality of life issues.” For Koch, along with all those commuting through the denuded spaces of the city, a good business climate entailed a freedom *from* the disturbing vistas and peoples of *Taxi Driver*.

But it was Rudy Giuliani’s administration (1994-2001) that developed the authoritarian policing methods that would ultimately remove these unsightly and unwanted figures from the streets. Giuliani’s administration accomplished this systematic removal in part through what became known as broken windows policing, as well as zoning ordinances and redevelopment. Broken windows, a still-spreading ideology and policing practice, was first articulated in George Kelling’s and James Wilson’s manifesto (Kelling 1982). Their work reformulated Garrett Hardin’s (1968) “tragedy of the commons” argument to assert that the presence of “disreputable and obstreperous” (Harcourt 2001, 125) people in the streets undermines the stability of neighborhoods. That is, the appearance of disorder promoted criminal activity amongst these disordered folks where otherwise, they argue, none would exist. Channeling their inner Durkheim, these authors postulated that a tolerance of disorder and non-normative behaviour was the source of larger social disorder and crime, thereby leading to the conclusion that manifestly undesirable people represented potential criminals-in-waiting who would set off a whole set of criminal dominoes. Thus, the only option was to unleash a galvanized, heavily funded and violent police force upon the streets to produce the desired order, clearing the expressways of mobility for the functionaries of capital.

As a mid-level bureaucrat in a large corporate entity, Jack’s employment invests him with the capacity to occupy the new, gleaming condo towers that spring up in the wake of this socio-

economic reorganization and its subsequent waves of speculative development. His occupation places him in the role of assessing automobile accidents across the country, in order to determine liability for auto manufacturers. From within this space of neoliberal hyper-mobility, Jack articulates his best understanding of its somatic effects. In a montage sequence, we see Jack as he moves through the Sea-Tac and O'Hare airports, while the voice over narration expands, "Pacific, Mountain, Central. Lose an hour, gain an hour. This is your life, and it's ending one minute at a time" (Fincher 1999). For Jack, the incessant temporal dislocation produces a high degree of exhaustion, fatigue and, ultimately, disorientation. Jack experiences the world of neoliberal labour as one in which it is impossible to gain any sense or orientation, because he is constantly finding himself awakening in new settings or stretching wakefulness to its limits.

Intriguingly and perhaps provocatively, Matthew Wolf-Mayer provides the appellation of "somnolent capitalism" (2012, 316) to this neoliberal world that he argues is more aligned with narcolepsy than insomnia. Wolf-Mayer notes that that the structure of contemporary neoliberal/globalized capital is not that of an incessant capitalism that would never allow us to sleep. Rather, he notes that this era defines itself in terms of *intensification*: "we are meant to be alert and attentive when awake and deeply asleep when sleeping" (2012, 17). The result of this normative intensification of modalities of sleep and wakefulness in the context of an on demand economy is that narcolepsy, and not insomnia, becomes the model to understand the effects of the failures to align these desired modes of intensified existence to the structural shifts of neoliberal capital. "Narcoleptics require medication both to remain alert throughout the day and to sleep soundly through the night" (17), just as Jack sought medication to manage his own sleep needs. The result is an expanding plethora of commodities designed to facilitate the management of sleep and wakefulness in what could be referred to as a boutique-ification or lifestyle

contouring of sleep to facilitate the functional integration of the sleeping and waking subject to a constantly shifting time architectonics.

What we have, then, is the endless reproduction of an alignment of embodied experience to the spatiotemporal orders. Our own rhythms are put into question and become a biopolitical target of attunement to the “regularities of others [that] binds individuals into social formations” (13) and to disparate time zones, whether from these movements or from the demands to attune to the labour patterns of others (most typically the result of working in call centres in Asia that align with the diurnal rhythms of North American consumer society). Wolf-Mayer’s intriguing, yet obvious, linkage of narcolepsy and the intensification of modes of being in neoliberal capital represent a provocative reading of insomnia and to this form of social organization. Indeed, the so-called industrial era, running from the nineteenth century up until the era of *Taxi Driver*, centred on the consolidation of rhythms of sleep and wakefulness to a structurally defined, homogeneous day divided into the tripartite structure of productive labour, reproductive labour, and sleep, often but not always aligned to the diurnal day. Capital thus mimicked the day in order to naturalise itself. The basic question of attunement to this structure of sleep and wakefulness as a singular harmonization of capital and human nature—that is, the heavy modernity that Bauman describes—offered up a more solid external regularity of others to which the modern working, and male, subject could attune. In contrast, the new order of neoliberal capital puts a demand for attunement to externally organized and shifting matrixes that are not aligned to the diurnal day in what Teresa Brennan calls “bioderegulation” (cited in Crary 2013, 14). The effect is the expansion of fatigue as bodies are increasingly unable to adapt to these shifting time structures, and with an increasing set of anxieties that follow the exponential expansion of attention deficits.

Wolf-Mayer's conceptualization, however, finds itself on a central claim made by the sleep sciences, wherein the body has a natural need for sleep. Any short-term disruption of sleep, such as the jet-lag that Jack endures, will accumulate a 'sleep debt' that the body will inevitably repay by claiming sleep whether we want it or not. The basic problem with this model, however, is that insomnia is by definition an arrhythmic condition defined by a chronic inability to gain adequate or restful sleep. Thus, insomnia exists as a refutation of the central claim of sleep science, which explains some of the hostility that insomniacs encounter at the hands of sleep clinicians. Since the insomniac cannot locate the sleep promised as an inevitability by the narcolepsy model, and since this condition is defined by arrhythmia, it becomes difficult to disentangle the dispossession of sleep from the dispossessions enacted by the on-demand culture. That is, insomnia represents the failure of any model positing sleep as an inevitable result from the accumulation of fatigue, and is, instead, a disorderly existence within a disorderly social order. How, exactly, does the pathos of suffering appear and what path does it follow? Within the neoliberal setting and from Jack's narration of the fundamental disorientation and fatigue attendant upon his interterminal need to adapt to new time zones, we are left only with an etiological lack that curiously inverts the correlative figure-ground relation apparent in *Taxi Driver*. Unlike Travis's insomnia, Jack's insomnia emerges through an association of somatic disorder rooted in social order. In upending the correlation of somatic and anomic disorder, neoliberal insomnia takes on the structure of a crisis of a kind with those depicted by Engels in *Anti-Duhring*. As Engels notes in the chapter "Theoretical," the price for increased organization within the factory is an increased disorder outside of it (1878/1996). Insomnia represents a translation of this externalisation of disorder from the economic to the somatic: as we attempt to get socially "organiz-ized" by facilitating the mobility of capital, the regulation of our bodies

occurs through the intensification demanded by this organization. For Jack, this culminates in the dissolution of the boundaries of sleep and wakefulness as they collapse into insomnia.

The Return of the Disciplinary Apparatus

The conception of a biologically determined form of sleep that undergirds Wolf-Mayer's conception of a neoliberal narcoleptic society finds its articulation through the aforementioned physician at the hospital. His advice is that Jack needs "healthy, natural sleep" *and* he rejects Jack's claim of suffering, as Jack pleads for drugs to induce an elusive sleep. It would be within the realm of plausibility to situate the doctor's discourse as mere institutional failure. However his reliance upon naturalized, biological understandings of sleep and his subsequent condescending dismissal of Jack's claim to suffering are squarely situated within the normative operations and rationality of medicine in its confrontation with deviant populations. The insomniac represents the unruly body that refutes the central organizing principles of the sleep sciences. Thus, the response of many within the sleep sciences is to reassert the biological grounds for sleep, and to elide the complaint as a fundamental dissimulation. Unable or unwilling to offer a medical solution, the physician takes recourse to a hierarchy of suffering to further elide Jack's claim. In so doing, the physician performs a key role in production of an ambulatory insomnia. First, as we follow the origin story grounded in the pathos of Jack's suffering, Jack is merely lost in the miasma of sleep deprivation until he enters the disciplinary space of the hospital. Geared to recalibrate improperly functioning bodies, the social institution of the hospital, through its agent, withholds recognition for the condition and substitutes a different order of suffering. In this action, the physician, as a voice invested with rational

authority, dispossesses Jack of the pathos of suffering, while proffering *directions* for locating true suffering.

In sending Jack to First Methodist, the physician creates a passage through which the pathos of suffering can become abstract and enter into an exchange with a form of distinctly masculine suffering. This opening creates a substantive shift in which Jack's previous articulations move out of the condo and into the social setting of the church. Moreover, this interpersonal exchange occurs within a space imbued with anti-modernist and anti-capitalist history. As the institution of sixteenth to eighteenth century English Dissent, Methodism represents an early form of religious resistance to state practices (Thompson 1963/2013). Thus, the recommendation of the physician creates the conditions wherein delusory thought is able to grasp onto associative objects and thus create an expansive structure of meaning that ultimately leads to its transformation into a criminal condition. Insomnia becomes a fungible object of exchange as it enters into a discourse with the survivors of testicular cancer, which converts the pathos of male insomnia into androcentric insomnia. That is, from out of the space of suffering associated with pathos, emerges a new modality linking the condition to a diremption by which a social antipathy emerges that transforms pathos into an androcentric condition. As a "market" engaged in the exchange of an abstract form of masculine suffering, the church further provides the imbricative context whereby associative meanings and opportunities arise for the radical political actions of Project Mayhem.

Thus, it is not possible to situate the narrative as *primarily* one of masculine dispossession grounded in an upsurge of delusional thought and paranoid politics, since it finds its ground in naturalized biomedical reason and values concerning masculinity that are external to Jack. The place of Jack's madness, then, is firmly within insomnia as a condition and the

associative meanings that he syncretically binds to the pathos of suffering that shapes his existence. While neoliberal reorganization of society provides the ambulatory measures that disturb any previously consolidated pattern of sleep and wakefulness, its disciplinary institutions resuscitate the collapsing body in order to put it into associative contacts whereby suffering becomes abstract and takes on wholly androcentric structures of meaning. The audience follows the smooth, rhetorical level of Jack's narrative and its delusional dream-thought, by which his madness moves out of the insomniac condition and into the attribution of the cause of suffering in the dispossession of a properly masculine habitus. Jack's institutional perambulations and the subsequent fungibility of his condition are *overdetermined* by defined paths of suffering and recognition that run from the hospital to the support group, itself embedded in anti-state ideological structures. As a result, the delusional shift from the pathos of suffering to the androcentric register is conditional upon the conjuncture of suffering and mobility in and through patriarchal social structures, an ongoing reverberation of the structure of androcentric insomnia as articulated by Cioran.

What is essential in Jack's second instance of "running aground" is the manner in which readings falter on the idea that the themes of masculine suffering represent a fundamental transformation of insomnia. As Deleuze notes in his discussion of masochism, insomnia is too readily "treated as a combination of highly abstract elements subject to various transformations...[which fails] to appreciate the concrete situation" because "symptoms themselves have been obscured by a preconceived etiology" (1971/1991, 58). In following the developments of Jack's suffering, and the irruption of delusional thought from within a space of madness, it becomes possible to trace the *manner in which insomnia emerges as a condition of suffering* and the ways that the transition of pathos into masculine insomnia out of an exchange

and accumulation of meaning that does not represent a fundamental *transformation*. Instead, narratives of masculine insomnia form an unstable epistemological ground on which the condition becomes abstract and mobile, and in its perambulations shifts into the register of atavistic masculinity and social antipathy. Jack uses the loose syntheses of his paranoia to enact what Nicola Rehling refers to as the rearrangement of chaos into order, and the reconsolidation of the borders of identity through a compensatory fiction that Jack crafts out of his discourses with Tyler. Ultimately, through the of autoimmune action by which he banishes Tyler through the deployment of an extreme form of masochistic violence, Jack shoots himself in the face in the concluding scene. In the ultimate ironic gesture, he destroys the self to rid the self of the condition that undermines it, that produces it as a rogue in Derrida's analysis, and thus restore the ipseity of the self, restores its desire, and delivers itself into the awaiting arms of the once castrating female.

From within Jack's madness, we can follow the synthetically constructed rhetorical path formulated out of his dream-thoughts. Much more could be said concerning a second "running aground" in the masochistic disavowal of the misogyny and terrorism of Project Mayhem, and the role it plays in the circularity of Jack's psychic split and the circularity of the narrative structure. It is here that we engage Jack's Cartesian shrewdness in his struggles to first erase and then outwit the madness that he transfers onto Tyler. However, the function of masochism is beyond the scope of this chapter. What is essential is to point out that the full development of the paranoid politics in the film hinges on the emergence of a debilitating pathos that has its origins in neoliberal social organization, and a transition effected by the structuring agencies of that world. Emerging from within the disorderly order of neoliberal capital, androcentric insomnia conjoins the pathos of suffering with structures of circulation and exchange that transform that

suffering into a different, masculine form and ascribe that suffering to the ingenious torturers of finance capital, women, and the iron cage of rationality.

Conclusion

Insomnia is thus a condition that produces not only suffering but also, out of its lack of etiological clarity and symptomological treatment, dissolves the boundaries that structure the day. Out of this dispossession of sleep and dissolution of rhythmic, normative patterns of everyday life, the arrhythmic modality puts these figures into an arrhythmic movement through the spaces and structures of society. In *Taxi Driver*, Travis's disordered existence enters into a dialectical relationship with the disorder of the streets of 1970s New York City. Travis's quest for functional subordination ends in futility, while his endless arrhythmic accumulations of the spectacle of disorder enable him, from out of a space of pathos and delusional thought, to ascribe the source of disorder to the city. In this film, insomnia is simultaneously a figurative means to engage in the poverty and decay tourism that is the partner of the moral panic concerning crime that gripped the early years of neoliberalism. However, rather than finding the source of that arrhythmic existence in the milieu, Travis's insomnia manifests itself as a condition, and it is this status as a reified condition that makes Travis into the ideal form of understanding both the crisis of accumulation that prefigured social disorder, and to disentangle the naturalisation of insomniac suffering as a cultural register of putative masculine suffering. In turn, *Fight Club* inverts the dialectical relation of insomniac figure and milieu as ground insofar as it rests upon an order-disorder relationship. While the depiction of the pathos of insomnia opens up a phenomenological portrait of the incapacities of insomnia as a condition, the institutional perambulations of Jack depict an accumulation of distinctly androcentric meaning structures. The

delusional thought processes conclude, once again, in the attribution of disorder in the terms of a lack of habitus for the masculine at the level of the narrator produced themes of the film. These transformations from the pathos of suffering to the ingenuous torturers who are blamed for the anti-natural, anti-white and anti-masculine social order, follow the pattern established by Cioran in his model of androcentric insomnia. As such, what these and other insomnia narratives produce is an idea of insomnia that is distinctly masculine and uniquely positioned to narrate the situation of white masculinities in neoliberal capitalism—but grounded in the delusional forms of correlative thought defined by the madness of the narratives.

Chapter Three: Coming to Terms with Gender and Sleep: Insomnia Memoirs and the Politics of Suffering

In June of 2016, Kim Cattrall made headlines when she declared that she was an insomniac. Her announcement followed previous confessions by other female celebrities such as Jennifer Aniston (December 2014), and Lady Gaga (March 2010), along with Arianna Huffington's fatigue related injury (2007) and subsequent promotion of a "Sleep Challenge" in 2010. Huffington and Cindie Lieve, the Editor-in-Chief of Glamor magazine, encouraged women to "sleep our way to the top," as an ever-so coy method of promoting well-being, productivity and success. Adequate sleep thus became a central front in a neoliberal feminist attempt to "improve the status of all women in the country" (Huffington & Leive 2010), or at least for those who are driven towards capitalist forms of achievement and venerated success. Additionally, the death of Anna Nicole Smith (2007) was widely reported as the result of an overdose of the sleep-inducing drug chloral hydrate, which was mixed with an assortment of other substances. This was the same drug, along with pentobarbital, that was found in Marilyn Monroe's system after her death in 1962. Issues concerning a general lack of sleep or disturbed sleep were thereby pushed to the forefront of media discourses, at least for the obligatory moment in spectacular time. Conversely, Madonna has repeatedly professed a disdain for sleep, albeit with a recognition of the ongoing fatigue that she connects to the compulsion to work and to child rearing. Sleep thus appears in these media discourses as a necessary boundary point to securing productive activity, and as an undermining of activity that needs to be managed to its bare minimum. The compulsion to limit the seemingly unproductive (in)activity of sleep represents an underlying tension at the heart of calls for sleep or sleep challenges, with the myth-making narratives of success centred on sleep

chauvinism representing a foundational pillar of an exhausted society, and a fundamental contradiction at the heart of the neoliberal care of the self.

In Kim Cattrall's recent self-outing, she described insomnia as a "small problem" in which a "three-ton gorilla" took up residence on her chest. Her gorilla was typically "narcissistic" and "oblivious," but did not seem particularly harmful until it became a "tsunami" (DiGiulio 2016). Cattrall's intriguing metamorphosis of insomnia metaphors into a devastating force is typical of insomnia narratives. The evolution toward ever more devastating and debilitating effects to and in personal life and to the ability to work inevitably follows from the overall state of fatigue and disordered existence. For Cattrall, insomnia left her "flat" in her work, while the rigours of working six days per week put too much strain on an already fragile and dysfunctional circadian rhythm. Jennifer Aniston, in a similarly highly publicized interview on Dr. Oz (Malec 2014), noted a tendency towards distraction that prevented sleep (sleep onset insomnia) or a return to sleep (sleep maintenance insomnia), a process similarly articulated by Cattrall, in part due to the presence of sleep distracting entities such as pets, children, and a partner in her sleep space. It was, nevertheless, the presence of anxiety and the "voices in the head" that took the biggest toll on Aniston's sleep. She related how the appearance of these voices meant that "if I wake up at three in the morning I just start having conversations and they won't shut up and I can't get back to sleep" (Rutter 2014). The etiological attribution of insomnia to a restless or preoccupied mind has a long history that dates back to German physiologist Eduard Friedrich Wilhelm Pflüger who, in 1875, argued that the expansion of brain work and mental exertion produced "intra molecular vibrations of the cerebral substance...[that] continue to vibrate long after the blow which has set them in motion" (Scrivner, 72). Similarly, the English physician William Benjamin Carpenter declared that falling asleep was necessarily a product of relinquishing our wills in

order to “drop the reins’ of our thoughts” (1874, Cited in Scriver, 89). Lee Scriver describes this as the “volitional paradox,” in which the sleeper is sleepless because “he [sic] so desperately wills to sleep” (133) while caught within a zone of hyperactive thinking.

What is particularly interesting in these media depictions of female celebrity insomnia is the stock format that journalists deploy in synthesizing the experiential elements with the etiological attributions and restorative prescriptions of representatives of different sleep clinics and university research programs. Each article frames disordered sleep through clinical assertions concerning the causes of disordered sleep and the methods of its restoration, while each celebrity speaks from a position of having already internalized elements of sleep research into their own narratives. In other words, there is a twofold mediation in these articles. The first occurs in the already internalised discourses of sleep medicine as articulated by the sufferer, and the second is the deployment of sleep medicine by the journalist. These journalistic works thereby situate the brief narratives of a particular moment of individual collapse through a reifying frame that moralizes the experience into a condition located in the dysfunctional individual. The subsequent significance of these media discourses is again twofold. Firstly, the presentation of gendered experiences of disordered sleep appears in a condensed form that promotes the prescriptions of the sleep sciences in addressing a moral panic concerning sleep. Secondly, once disordered sleep is established as a case of poor self-management of the risks to sleep posed by modern life, or to the unique hormonal structure of women’s bodies, a “living wrongly” or “being wrongly” twin diagnosis emerges. Thus we get another instalment of what Stacy Alaimo calls the “things-you-can-do-at-home-to-save-yourself” discourse (2010, 92).

As such, the spectacle of celebrity culture meets the popularization of sleep research, articulated through media discourses as a disciplinary mechanism geared to women and the

problems they supposedly represent in a normatively defined spatiotemporal social order. In other words, it forms a continuity with Betty Friedan's classic notion of women as a "problem." For example, in DiGiulio's article covering Cattrall's comments on a *Women's Hour* broadcast on the BBC, she cites Philip Gehrman, an assistant professor of psychology in the Behavioural Sleep Program at the University of Pennsylvania, who notes both the stressful impacts of insomnia and the ways that "bodies get stuck in this cycle of not sleeping well" if left untreated. DiGiulio then details Cattrall's navigation of different branches of sleep medicine, in which Cattrall notes her rejection of pharmacological interventions in favour of cognitive behavioural therapy (CBT). What DiGiulio's narrative points to is a structure of what Sandra Harding calls "cultural blindness," in which breakdowns in the proffered security and rationality of modern science transforms potential sites of resistance into a turning away from one authoritative discourse for another. Modern subjects are left with a paradoxical dependence on experts to facilitate their navigation of a fractured milieu in which no mode of intervention is supreme or offers the desired security of a likely cure (Harding 2008, 60). DiGiulio thus buttresses Cattrall's decision with a reference to assertions by the American College of Physicians as to CBT's centrality and primacy in the treatment of disordered sleep, reaffirming the decision and naturalizing the process. Cattrall reiterates this discourse by claiming that she was able to regain her sanity and her ability to sleep through the strict requirements of CBT and, in effect, afforded the agency to "choose herself" (DiGiulio 2016). Sleep thus becomes one more component in the liberal project, one that is centred on the self and its satisfactions through the market, and secured through submission to the subjectivating processes of medical science.

In a Guardian article "Women More Stressed by Insomnia" (2007), Amelia Hill generalizes this discursive constellation through Meir Kryger, professor of medicine at Yale

University and the “authoritative” voice behind of *A Woman’s Guide to Sleep Disorders* (2004). Kryger situates gynocentric insomnia in biological terms as an effect of hormonal disturbances of menopause, menstruation, and pregnancy, as well as in social terms as a result of the domestic division of labour, the ever-expanding demands of careers, and the inability of women to deal with increased levels of stress. In a medical field in which white men dominate as researchers and research subjects, Kryger’s attributions highlight the male supremacist structure of sleep research and treatment (Harding 2008, 123). Kryger uses hormones to explain sexual difference and unsurprisingly makes male hormones neutral and normative. Significantly, while women have a greater tendency to suffer from insomnia (they are 1.4 times more likely to be insomniacs), CBT discourses use biological references to hormones as the basis of a sexed deficiency in dealing with stress. Unable to “fix” hormones, CBT uses hormones as a pathway to behavioral and psychological realms. That is, these problems are sexually “unique” and are compounded because easily confused women “will not even realize symptoms [of fatigue] in themselves [that] indicat[e] that they have sleep disorders.” As if unsatisfied with his dubiously gendered discourses, Kryger adds to the spectral horror of this confused and improperly rested mother who then takes her children while driving a car (Hill 2007). The spectre of the unwitting, irresponsible and undisciplined woman is thus central to the construction of a moral crisis concerning sleep, which thereby centres the crisis in the intractable and inconvenient bodies of women.

Intriguingly, Cattrall wondered, while caught up in the dissolute experience of insomnia, “Is this what it feels like to be questioning your sanity? Your mental health? I’m not crazy” (DiGiulio 2016). Ultimately, the question concerning the attribution of mental illness, psychological dysfunction, and an otherwise sexed inability to deal with hyperarousal is central

to not only Cattrall's reflections on insomnia, but also in the gynocentric sleep disability memoir. I will analyse how the ongoing discursive construction of gynocentric forms of insomnia transform a diversity of experiences of disordered sleep into a reified condition, thus rendering it open to methods of intervention ranging from the discipline of sleep hygiene and sleep restriction, pharmacology, and a whole host of consumerist options. In turn, the insomnia memoir operates as a form of politicization in response to these discourses of subjectivation, one in which we see three dominant currents: the playing out of a deepening of the mediation of by experts and an attendant politics of *ressentiment*; the appropriation and alteration of putatively objective expert discourses by what Donna Haraway calls "situated knowledges;" and the unleashing of institutional forces geared to dominate the incoherent bodies within a population that represent some sort of threat.

This chapter begins with an analysis of the situation of the gynocentric insomnia memoir as a conjuncture of medico-scientific discourses and the experiences of everyday life. This dual conjuncture opens a potential third space for a reflexive modernity. Conceptualizing the disciplinary apparatuses and their role in a disciplinary society, I thereby situate the question for recognition and the amelioration of suffering within the subjectivating projects of neoliberal rationality. I then develop the form of suffering found in the memoirs as a rejection of reductionist models of insomnia that situate it merely as conflict with the spatiotemporal regime of capitalism. Instead, I draw from Morrisoe and Greene to argue that an environment defined by noise is constitutive of insomnia, and that these noises are social and cosmic in origin. These forms of suffering then confront the pathologizing gaze of sleep medicine, and their attempts to regulate bodies according to androcentric abstractions of the normative sleeping body. The normative body thereby contrasts with the inconvenient bodies, presented by CBT practitioners

as suffering from dysfunctional beliefs and attitudes about sleep and not a biologically grounded condition. These attributions, or culpabilizations, not only assign the problem to the psychology of the individual, but also they facilitate and expand the horizon of moral panics over sleep. For CBT, the insomniac is not only pathologically sleepy, but an endemic threat to social order. I then chart the responses of Greene and Morrisoe to these conditions. Railing against the attributions of psychologizing discourses, Greene turns away from questions concerning the environment to assert a fundamentally biological origin for insomnia. The form of her response and its attendant rage is shaped by Nietzschean *ressentiment*. In turn, Morrisoe retains the link to the environment, but articulates a pastoralist ethos in an attempt to better situate the body in a natural context. Morrisoe thereby pursues a fundamental homeostasis away from the social. Both responses, I argue, follow a neoliberal logic in which the individual is turned back on the self as part of an overall project of self-care and cultivation. This chapter thus charts an institutional and social analysis of sleep discourses in part by a measurement of their typical lack of effectiveness in restoring sleep rhythms, but also leads to the limitations of ultimately embracing biological determinist sleep discourses.

The Disability Memoir

The insomnia memoir is a relatively new genre of disability writing that has its origins in Bill Hayes's now classic text *Sleep Demons*. Since its publication in 2001, further personal examinations of insomnia have emerged, including Alan Berliner's documentary film *Wide Awake* (2005) and Blake Butler's 2011 memoir *Nothing: A Portrait of Insomnia*. In turn, Mathilda Bernstein Sycamore's *So Many Ways to Sleep Badly* (2008) is a fictionalized account of disordered sleep in San Francisco's transgender community. While there are innumerable

memoirs and narratives that refer to insomnia, the insomnia memoir foregrounds the condition, articulating the sufferer's perambulations through an interminable experience of disordered sleep. The insomnia memoir thereby offers a detailed account and examination of its attendant experiences and frustrations, its subjection to disciplinary regimes, and inaugurates a distinctly insomnia informed politics.

In this chapter I will focus on two memoirs: the first is by the journalist Patricia Morrisoe, entitled *Wide Awake: What I Learned about Sleep from Doctors, Drug Companies, Dream Experts, and a Reindeer Herder in the Arctic Circle* (2010), and the second is by a professor of English, Gayle Greene, and her more simply titled *Insomniac* (2008). These two texts are significant because they not only develop the experience of insomnia and the trials of navigating everyday life, but they also constitute alternate forms of expertise through their research on the condition in and through specifically gendered relations. More specifically, Greene and Morrisoe's texts present the opportunity to examine the intersection of sexed bodies with institutional matrixes. Thus, they represent a specifically gynocentric experience and insight into the sleep sciences and their methods. Their research component also distinguishes them from the ruminations on disordered sleep that can be found in more standard memoirs (e.g., Joyce Carol Oates's *The Lost Landscape: A Writer's Coming of Age* 2016), or more pointed texts on the role of insomnia in shaping experience (e.g., Anne Carson's *Decreation: Poetry, Essays, Opera* 2006).

The insomnia memoirs by Greene and Morrisoe present us with three theoretical conjunctures. The first conjuncture concerns the constitution of a reflexive modernity (Alaimo 2010, 87; Harding 2008, 59). For Stacy Alaimo, reflexive modernity entails a modification of modernity's claims to scientific rationality grounded in objective methodologies. In its place, the

introduction of personal experience as new type of data clarifies the miasma of modernity's cultural blindness by opening an investigation of genealogies and material affects (Alaimo 2010, 87). Sandra Harding, like Alaimo, discusses the pivotal importance of gendered accounts of experience in the construction of reflexive modernity. For Harding, these accounts open up scientific knowledges to explain their principles and attendant practices, and thus show how the interactions of gendered bodies with institutions and assumptions concerning bodily natures reproduces apparently reasonable explanations for conditions (Harding 2008, 118-9), which only seem to reproduce gendered hierarchies and institutional authority.

Opening up scientific methods and practices through the data represented by gynocentric insomnia memoirs not only opens up the specificity of gendered experience within the condition, but also represents a distinct opportunity to examine how these texts represent a "new species of expert" who use methods such as "tinkering" (Alaimo 2010, 94), or what Donna Haraway calls "inflections in orientations" (1988, 86), to challenge what she calls the "gaze from nowhere." This gaze possesses an eye that "fucks the world to make techno monsters" (1988, 581). Haraway's argument points to the ways that the gynocentric insomnia memoir affords the opportunity not only to examine how the objective gaze of the sleep sciences deploys its methods in the recruitment and discipline of willing subjects, but also how the inflections and tinkering point to the constitution of a new form of expertise. This demonstrates how women perceive threats posed by modernity (Harding 2008, 50), question the effectivity of its practices (Alaimo 2010, 86), and that speaking back constitutes a feminist insomnia politics. To read these memoirs is to attend to the minor inflections in the dominant, subjectivating discourses of the sleep sciences. Locked in a seemingly interminable battle, the second and third conjunctures are thus constituted in the interplay of the subjectivating forces of the hierarchically organized sleep

sciences, and the political and moral responses developed by Greene and Morrisoe from out of the particularity of their insomniac experiences.

As Greene and Morrisoe detail, insomnia is first and foremost defined by an interminable experience of suffering and dread. In particular, the experience of disordered sleep clashes violently with the institutional orders and the productive demands of the neoliberal world (the spatiotemporal and chronotype effects). In this context, one is simultaneously supposed to manage reproductive time, with sleep understood as both a necessary reproductive activity and a state of lassitude or inactivity that marks it as an unproductive contrast to reproductive labours, to ensure the kind of satisfaction, clarity and general sense of well-being afforded by its exercise. Armed with normative expectations concerning consolidated modes of sleep (the expectation of an alternating rhythm of sleep and wakefulness, with minimal transition time and little to no bleeding of one category into the other), and sleep duration (a subjectively determined number of hours one purports to need in order to sustain the boundaries of sleep and wakefulness), the frustrated and suffering subject turns endlessly circles in suffering. This suffering arises from the experience of sleeplessness, the discourses and technologies of sleep medicine, and the proliferation of conflict or friction with structures of everyday life. The nebulously defined promise of satisfaction is thus encrusted within the subject and then mobilized as an ideal form of subjectivation of a properly functional and integratable subject. As Haraway notes, vision requires instruments and these instruments mediate standpoints (1988, 86). Here we encounter a primary question concerning the gynocentric insomnia memoir. Insofar as it details the mediation of women's voices through their attempts to work through the zones of undecidability in the multiform practices geared to restore the promise contained in the image of sleep that

would bring their suffering to an end. Restoration of normative cycles of sleep and wakefulness are thus bound up in liberal projects of subject formation and reproduction.

As Brian Massumi notes in his depiction of the function of neoliberal subjectivity and its link to failure, “the subject circles itself more and more tightly around its individual power of choice, like a dog to sleep, wrapping itself centripetally around a center of promised satisfaction. It circles in on itself, away from the social” (2015, 4). Reading Massumi’s quote through the subjection of insomniacs to pathologizing technologies such as CBT, we see the underlying contradiction at the heart of the liberal project, insofar as the individual is offered the means to turn on itself, analyse itself, and endlessly correct the self’s inconveniences. Set to this interminable task of self-refinement through various technologies, the promise of pragmatic approaches to insomnia involves just this turning away from the social to the self: both at the level of the conception of what sleep is and how it functions, and in terms of the individual’s attendant role in the production of the disordered self. The proffered ideal is a self-harmonizing subject, but the always-already response offered by the insomnia memoir is failure. Therapeutic approaches to insomnia thereby become a technology of neoliberal subjectivation. As Massumi concludes, “[t]he tired hound of self-interest, circling in for satisfaction, traces its own private vicious circle in its self-relating movements. Its sleep will be agitated” (2015, 6). The gynocentric insomnia memoir represents an amplification of this process, insofar as the mediated knowledges of Greene and Morrisoe turn them back on themselves in an attempt to “choose themselves,” as Kim Cattrall articulated, but in a process that only furthers their state of agitation.

Massumi’s self-circling process is the defining context of the insomnia memoir, but Wendy Brown notes a further political response to the conditions of a “classificatory, individuating

schemes of disciplinary society, [which] combine to produce an utterly *unrelieved* individual, one without insulation from the inevitable failure entailed in liberalism's individualist construction" (1995, 69, emphasis in original). One is either left to find the cause of suffering within the self or a "site of external blame" (1995, 67). In other words, being turned back on the self does not mean enclosure. Instead, the origin point for a regressive insomnia politics is the interactions between the sufferer and the institutional contexts that purport to know. For Brown, the construction of the external site of blame is the foundational problematic of a Nietzschean morality of *ressentiment*. Lost in that state of cultural blindness, inundated by the various means of withholding recognition of that suffering, battered by an objective gaze that renders the female insomniac as ontologically unsound in relation to a more stable, abstractly conceived, masculine subject, the pathway out of the ensuing experience of undecidability and suffering centres on a history comprised of failures that funnel sufferers in the direction of a distinctly hostile reaction. Brown highlights that the fundamental importance of the "slave morality" of *ressentiment* is that it produces an affective response to the condition of suffering that simultaneously overwhelms the experience of pain and attributes it to an external agent. This agent is then held responsible for that pain and suffering. This attribution constitutes a site of revenge that "anaesthetizes" the "unendurable" (1995, 68).

It is here that I want to situate gynocentric insomnia as it is produced within the sleep memoir: as a condition evoking endless methods of intervention geared toward the production of satisfaction in the context of scientific, medical, and commercial practices that only frustrate the quest and its drive to subordination, while it affords little in the way of adequate recognition of suffering as a social and physiological conjuncture. The experience of suffering and the quest for amelioration of that suffering is therefore not merely an individual account: the female,

(neoliberal) insomniac is on a self-directed quest for sleep, for personal consolidation and optimal functionality, in a context that simultaneously encourages the production of the disability while offering little—beyond an enforced turning back on the inconvenient, always gendered self—in the way of substantiated pathways to restoration. Thus, while the gynocentric insomnia memoir is partially a quest narrative striving to find the conditions that produce the experience of harmonized sleep and wakefulness, this chapter will situate insomnia not merely as a mirror or effect of some external disorder, or the parceled disorder connected to order. It will instead look at the insomnia memoir as a sedimented core of gendered, neoliberal social life where the generalized effects of “circling about” is both the cause of and only alternative for its agitated or disordered sleep within an institutional context that has, for all intents, abandoned the field to psychologizing discourses.

Punk Sleepers

Matthew Wolf-Mayer, in his text *Slumbering Masses: Sleep, Medicine, and Modern American Life*, situates sleep as an object of desire when he concludes that the “participation of individuals in [the] normative spatiotemporal formation is what makes society a sensual pleasure beneath the level of awareness, an object of desire” (2012, 142). In his curiously positivist and reductionist articulation of desirability with normativity, Wolf-Mayer points to the operation of desire from within the space of disordered sleep, and locates sleep within a specific spatiotemporal social order. That is, Wolf-Mayer posits normative temporal structures as a teleological aim and the fundamental wellspring of happiness by which the individual disappears into the larger social totality, a myth that writers such as Sara Ahmed eviscerate (2010). Following Ahmed’s line of argumentation, while a desire for sleep is the overarching pursuit from within a space of

suffering, any account that posits an insertion into any spatiotemporal *order* as an unconscious pleasure fails to account for the differential ability or inability of particular bodies to inhabit these normative spaces that are, as we will see below, fundamentally androcentric abstractions created by male supremacist sleep sciences and sleep medicine. Furthermore, desire linked to spatiotemporal order becomes a form of self-incarceration, following Massumi, on which the promise of liberal subjectivity is suspended.

The point of entry for the memoirs by Greene and Morrisoe is the arrhythmic space of disordered sleep, where wakefulness becomes a torturous and interminable odyssey, and the craved and yearned for pathway to escape turns the subject over to an array of disciplinary apparatuses geared to harmonize the individual to a tune sung to militaristic rhythms. The first question, then, concerns the experiential modality of living outside of the naturalized militarist and productivist spatiotemporal organization of sleep and wakefulness. While Patricia Morrisoe points to a sort of abandonment anxiety when she notes that sleep was something that, “with grinding relentlessness,” eluded her grasp (2010, 9), her articulations of the suffering imposed by her abandonment by sleep are centred in what she calls the “House of Punk Sleep” (which I will take up in more detail below). Gayle Greene develops an extensive discourse of personal suffering, which she crafts from both her own experience and from interviews with other insomniacs. For Greene, the experience of suffering begins with insomnia’s physiological effects. These effects include the oft-cited over-active brain activity discussed by Jennifer Aniston, which Greene situates as a consequence, not a determinant of, insomnia. However, for Greene, the over-active mind not an issue of “mind.” That is, the tendency to read the over-active mind as a product of an anxious personality is an error, and instead needs to be understood as an effect of the insomniac condition. In particular, Greene reads the activity of the brain that occurs

deeper in the night as constitutive of an internal environment defined by noise. This noise induces suffering and interferes with the restoration of sleep. Thus, Greene's understanding of suffering always hinges on the external world, while she continually questions the recuperation of symptoms as causal features of the condition. As such, Greene stands sharply opposed to assertions that insomnia symptoms are a product of ceaseless mental activity, as well as to contagion models of insomnia proffered by the likes of Scrivner in *Becoming Insomniac* (2014) and David K. Randall in *Dreamland: Adventures in the Strange Science of Sleep* (2012). Scrivner's text centres on the purported susceptibility of the mind to suggestion, thereby implicating insomnia in the appearance of concerns with energy that arose in the mid-nineteenth century around the second law of thermodynamics (118). Social worry about the relation between enervation and sleep loss is, in this model, the producer of insomnia, which is subsequently articulated to identity through a confirmation bias that leads individuals to embrace "those objects or circumstances that support any already possessed worldview" (124).

We can then begin with a provisional memoir-derived definition of insomnia as a symptomatic loss of control over noise. While the loss of control over internal noise defines the nocturnal disturbance of sleep, it is the irruption of external noises that foreclose the possibility of sleep for bodies that often seek sleep during daylight hours. As Greene notes, "[e]very insomniac I know remembers the scene in the film *Insomnia* when Al Pacino, crazed by the midnight sun, gets out of bed and...stares piteously through the thin shade at the glow of the Alaskan night" (320). Insomniacs often blot out sunlight with tinfoil, felt, and some carry "felt curtains and pushpins when [they] travel" (320-1). Greene describes friends who spent large sums of money on soundproofing windows, and another who "bricked up his bedroom window in a fit of rage when he found the double panes he'd installed failed to muffle the sounds of

Seventh Avenue” (321). For insomniacs, sources of sleep disturbing light and activity form an inescapable horizon of noise, which is an ever-looming threat promising discomfort through the untimely arrival of the new day. Greene’s articulation of sunlight as an environmental noise showcases the limitations of the positivistic practices of chronobiology and Wolf-Mayer’s emphasis on the spatiotemporal effect in the constitution of insomnia. The former, in particular, takes the correlation of wakefulness and sunlight as an expression of an internal biological clock (Roenneberg 2012, 160), rather than a sleep disrupting force. In turn, the latter places the source of conflict with the bureaucratic organization of the day.

Greene and Morrisoe thus articulate a pattern of concerns with both environmental and social rhythms, while their confluence creates an alibi for circadian rhythms such as sunlight through references to the oft-cited distorting effects of capitalist modernity. Henri Lefebvre, in his rhythm analytical study of everyday life, points out the conceptual distinction between cyclical rhythms, which are those repetitive patterns tied to earthbound existence and to cosmic patterns, and linear rhythms, which are the teleological and order directed activities of capitalist social organization (1991/2004). Interestingly, Greene encapsulates the conjunction of both cyclical and linear rhythms through a simultaneous reference to traffic and birds (2008, 223). Upon awakening after a few hours of sleep, Greene tells of getting up to “read the paper or watch a video,” but she would never “get sleepy once [she’s] up and out of bed, and the sky would grow light and the traffic would start up and the birds would begin their racket, and there was no point in going back to bed” (223). Capitalist rhythms of early morning traffic and street noise append themselves to cosmic rhythms, thereby conjoining capitalist modernity with the indestructible rhythms of cosmic life, which is not only a naturalization of capital but an alibi for the sleep disturbing effects of cosmic rhythms.

For Greene, the physiological and life building effects of the loss of control over noise are stark. In drawing out the attendant suffering resulting from insomnia, Greene cites a woman who contacted her after she had given a radio interview. The woman, Jacqueline, spoke of insomnia as a disability in that she was unable to sleep as a child, which made it increasingly difficult to learn in school. Problems with memory and an inability to just keep up with the daily grind of the martial rhythms of the education system meant that she was only able to graduate after she went to a school for those suffering from physical disabilities (2008, 29). These frictions with the organization of institutional life go beyond mere spatiotemporal organization effects, but it was the physical effects that she stressed when relating the worst periods of sleeplessness. When Jacqueline reached “two nights of no sleep in a row, everything hurts, the brain burns, the head aches, I have burning inside the joints, feet that become frozen. If I go for a week like this—well, you know, you get suicidal” (31). For Greene, the starkness of Jacqueline’s narrative represents a sort of ground-zero of insomniac suffering. For Greene, the importance of these issues first points to the need for inclusion in the Americans with Disabilities Act. However, the act only recognizes “a physical or mental impairment that substantially limits one or more of the major life activities” (2008, 30). Since sleep is not listed as a “major life activity” it does not qualify, though, as Greene asserts, the ability to sleep is a major determinant of every decision or project we take on, or don’t.

As such, Greene defines insomnia in part by its physiological and life altering effects and by the ongoing friction and struggle to just get through the day and its myriad noises (68). Her definition significantly alters the objective definition of insomnia rendered by the sleep sciences (Chapter Four), in which the condition is defined by the directly observable, measurable and protracted inability to gain sufficient sleep according to one’s individual sleep need. Instead,

Greene's insomnia is a condition directly linked to suffering induced by a horizon of sleep interfering noises that are both cosmic and linear in form. As such, the qualitative methodologies that Greene deploys (2008, 19), provides a first gesture towards a reflexive modernity as outlined by Harding and Alaimo. The problem, as I will argue next, is that the practices of CBT and other forms of intervention into disordered sleep turn the individual back upon themselves and this form of attribution of fault represents a failure of scientific modernity. The quest for recognition and relief thereby comes into contact with specifically gendered discourses of institutional power.

Enjoying One's Symptom: The Abuses of CBT

With the narrative of suffering and the quest for recognition we see an articulation of disordered, arrhythmic sleep as the negation of normatively conceived sleeping rhythms. This negation is the product of conflict with both linear rhythms of daily life and the cosmic rhythms to which they append themselves. Normative patterns of sleep, in turn, constitute an image of health and thus become objects of desire, as we see most clearly in Wolf-Mayer. In this image of healthy sleep, there is a curious exposition of the relation between illness and health, in which, as Roberto Esposito (2004/2008, 103) notes, health becomes a presupposition derived from the space of illness. The allopathic model that separates illness from health does so in order to pursue what Esposito refers to as immunizing methods of intervention that restore the deviant or malfunctioning body to a condition of *functional* health. Immunity entails the preventive protection of the individual from negative forces emanating from the communal realm. Immunity thereby reifies the separation of the state of illness from a state of health conceived as a pre-established harmony (in the sleep sciences, this is the sovereign will to sleep) torn asunder due to

negating social and psychological influences. In turn, the withholding of recognition of disordered sleep as an illness constitutive of disability serves to curiously reinforce this segregation. Without an etiological attribution, the source of the problem is found in either the attributes of the suffering individual or in mismanagement of the relation of the individual to some problematic element of the social, such as is found in notions of hyperarousal.

Until the middle of the last decade, the lack of an etiological ascription for insomnia resulted in its status as a secondary condition, grounded in primary conditions such as depression and anxiety disorders. The shift from understanding insomnia as a symptom to a syndrome in no way alters this landscape. Gayle Greene aptly notes that a symptom is “medicalese” for a “subjective feeling reported by the patient...which demotes the problem to *secondary* status” (2008, 60, emphasis in original), meaning that there is no recognition of disordered sleep as a primary condition when read as a symptom. As a symptom, interventions were geared to treating the larger problem, which partially resulted in the wide-scale, off-brand use of anti-depressants to treat insomnia. Each insomniac had become depressed according to sleep medicine and was treated as such. Even as the *International Classification of Sleep Disorders* reclassified insomnia as a syndrome in 2004, Greene notes that the syndrome only serves to group together a series of signs/symptoms under a category, without the attribution of a known etiology (2008, 60). The resultant lack and the attendant failure to make this connection means, once again, that the condition reverberates back upon the attributes and relations of the individual, rather than furthering of the bio-physiological investigations that Greene ties to adequate recognition of insomnia as a medical condition.

In his analysis of thanatopolitics, Roberto Esposito argues that the progressive splitting of the categories of health and illness (2004/2008, 124) forms more than a mere mechanism of

separation inviting disciplinary intervention. The splitting of health and illness, and the proliferation of categories of illness, also entail the encoding of ideas of nature that then get appended to states of health. In the instance of sleep, the idea of a biologically encoded natural sleep, synchronized with the cyclical appearance of darkness, becomes the means to naturalise the socially encoded linear times of the capitalist day. However, “the reconstruction of the natural order...constitutes the problem—how to rehabilitate nature through artifice or how to apply artifice to nature without denaturalizing it? The only way to do so successfully is to adjust preventively the idea of nature to the artificial model with which nature wants to restore itself” (Esposito 2004/2008, 127). This is key: the socially sanctioned form of sleep is not merely an object of desire, but the abstracted form that defines the purported inner natures of each person. Thus, one must first establish a state of nature as existent prior to the emergence of disturbance and illness (see also Haraway 1988).

The resulting shift, as Greene shows, is that the reified conception of natural sleep forms the basis for intervention into sleeplessness. As Judith Butler succinctly notes, “[t]he prevailing assumption of the ontological unity of the subject before the law might be understood as the contemporary trace of the state of nature hypothesis...[in which] [t]he performative invocation of a nonhistorical “before” becomes the foundational premise that guarantees the presocial ontology of persons who freely consent to be governed” (1990/2007, 4). That is, the production of a foundational identity is intricately bound to the governing of subjects. Specifically, the disciplinary apparatus geared to “restoration” of natural sleep forms appears as a delimited choice between the combination of sleep hygiene and sleep restriction therapy, which are the primary methods used by cognitive behavioural therapy (CBT), or pharmacological treatment through soporifics and anti-depressants. CBT is the pragmatic, interventionist arm of psychology

and its proponents claim that it has a high success rate for restoring ordered sleep. Greene is highly skeptical of these assertions (2008, 88). CBT methods are based on what Foucault refers to as *culpabilization* (2013/2015, 90), through a structure of knowledge that assigns disordered sleep to dysfunctional thoughts and maladaptive behaviours (Morrisoe 2010, 65). These behaviours are a problem insofar as they undermine the foundations of the proper liberal subject. Culpabilization deploys anxiety or depression as primary insomnia triggers, wherein the mind becomes overly agitated, overstimulated or simply unable to “shut off.” Thus, we can directly link Jennifer Aniston’s explanation of her insomnia through reference to the “voices in her head” to the broader institutional coordinates and epistemologies of the sleep sciences/contemporary cognitive behavioural therapy.

As previously established, anxiety is an attendant feature of insomnia. It now becomes one pole in the attribution of dysfunctional thinking (65) or hyperarousal (Greene 2008, 145). Dysfunctional thoughts typically take the form of negative investments or attributes that establish a negative relation to sleep. The premise of maladaptive behaviour theories is thus that insomnia begins through an inability to cope with some life stress, for which the sufferer then establishes coping mechanisms that entrench the condition and make it intractable. Standard examples of maladaptive behaviours include the use of stimulants to combat fatigue at improper times of day; prolonged tossing and turning during sleepless nights, or other activities that convert a sleeping space into a space of dread and anxiety; or the use of sleep disturbing electronic devices to fill the empty hours when the world is asleep. Maladaptive behaviours represent the sleep disturbing effects of the social world that we engage *improperly* in a typically unconscious manner. One specific example of the maladaptive behaviour designation appears through health care practitioners who see insomniacs as interminable whiners invested in the martyrdom (62) that

comes with the state of suffering, or who embrace insomnia as a “lifestyle choice” (Morrisoe 2010, 100). The latter attribution situates insomnia as a countercultural character trait, one that leaves the insomniac with a status “slightly higher than typhoid Mary’s” (Douglas Colligan, cited in Greene 2008, 76). One physician claimed to Greene that, “[n]o normal person lives like that...They’re all running away from something, they’re probably loners or losers or both, they just don’t want to be part of the life the rest of us follow” (76). Operating alongside the sleep machismo of the Edisons, Thatchers, and Reagans, is this conception of those unable to function as a marginal rebel figure thumbing their nose at the “normals.” Deployment of normality as a diagnostic category, however, points to the appalling moral bankruptcy conjoined to the failures of thought in sleep medicine. The insomniac becomes a target for much broader condemnation, which is preparatory for a moral crisis. Anyone involved in insomnia treatment should be able to take the four seconds necessary to figure out why insomniacs might harbour hostility to those integrated into, and invested in, normative time structures.

We now have a doubling of the productive conditions for a moral panic. The primary front for the moral panic involves the presence of the pathologically sleepy as they move about the spaces of everyday life. William Dement (1999) has been at the forefront of this particular panic, which we also saw earlier through Kryger’s work on gynocentric insomnia. This secondary form of moral panic, centring on the intractability of the insomniac as an existential threat to the neoliberal social contract, lurks beneath the concern about the endemic threat of insomnia to the security and well-being of others as they move through their daily routines. Lauren Berlant asserts that these zones of incoherence, or bodily disorganization brought on by what she calls “slow death,” thereby become an alibi for hygienic governmentality as well as moralizing against the inconvenient bodies of female insomniacs (96). As we shall see, these methods of treating the

doubly culpabilized and immoral bodies defines the approaches of CBT to both Greene and Morrisoe.

CBT practitioner Charles Morin takes the pathologizing logics and assigns them to a diagnostic category: “it’s not [merely] the stress in their lives that keeps them awake; it’s their *appraisal* of events, their ‘*perceived*’ lack of control over stressful events, their ‘dysfunctional beliefs and attitudes about sleep’” (DBAS)” (69 emphasis in original). The field of cognitive behavioural therapy has developed the two dominant, non-pharmacological methods of intervention for DBAS: sleep hygiene and sleep restriction therapy. Gayle Greene has an endless reserve of hostility for the moralizing discourses (68) embedded within these methods. Running through a litany of disparaging CBT commentaries on the mental states of insomniacs as though they were attributes, Greene notes that it is thoroughly reasonable to expect that, insofar as insomniacs are exhausted, they might use all their energy in just “getting through the day.” For Greene, it is thereby patronizing to refer to insomniacs as “self-absorbed, self-preoccupied, [and] inattentive to the needs of others” (68). Further, insomniacs are not neurotic princesses dealing with a nagging pea, rather our sensitivity to “minor discomforts” comes out of a space of suffering in which the ability to manage sources of conflict is at a minimum. The translation of Scrivner’s assertion that “insomnia is a radicalization of the mind’s susceptibility to suggestion” (118) to the gendered experience of insomnia would only further antagonize Greene or Morrisoe. Insomnia for these women is clearly something more than a “self-fulfilling prophecy” (Scrivner 118).

In order to allow the latent sleeping subject to emerge in its predetermined, natural form, therapeutic approaches thereby take the form of getting the insomniac out of the way of the naturalized compulsion to sleep. The first stage of the intervention is sleep hygiene: the myriad

bits of advice given to remove sleep disturbing activities and substances from affecting the sleep process. Separation from stimulants such as caffeine or chocolate, putting away the computer and turning off the television, and ensuring that one creates a positive and comfortable atmosphere in the bedroom, are all bits of advice that Greene summarily discards: “what kind of idiot would I have to be to have lived this long with this problem and not know this?” (5).

On the assumption that maladaptive behaviours sever the insomniac from natural rhythms, the idea is thus to re-synchronize to nature (Morrisoe 2010, 99). The most brutal technique for re-synchronization is sleep restriction therapy. As Morrisoe notes, sleep restriction “is designed to limit the hours spent in bed to the time actually spent sleeping. If, for example, you’re in bed for ten hours but only sleeping four, you’re restricted to four hours of bedtime. Essentially, you are being sleep-deprived, which makes you sleepier and more likely to fall into a pattern of sleeping more ‘efficiently’” (82). The problem arises for Morrisoe, who is “granted” seven hours in bed by her therapist, that the “mere suggestion of an alarm is so alarming I’m up for six hours. It doesn’t get much better during the rest of the week. For an anxious person, sleep restriction strikes me as possibly the worst thing you can do” (82). Greene echoes these sentiments. The reply from therapists, however, is that it is only sufficient discipline that is lacking, and that the internally programmed sleep imperative will necessarily overwhelm any degree of anxiety. In Morrisoe’s discussion with the inventor of sleep restriction therapy, Dr. Arthur Spielman, he reiterates the sleep medicine refrain that many complainants are not sleep deprived at all, since “[m]any of the cognitive behaviour techniques don’t increase total sleep time” (83). Here, failure in the method becomes further evidence of the failure of the subject. Echoing Morin and Peretz Lavie, this incongruous logic founds itself on the notion that as people transition from a frustrated 5.5 hours of sleep to a restricted 5.5 hours of sleep, the perception of their sleep

changes due to the loss of frustration. The logic of naturalized sleep relies on the notion that the body gets all the sleep it needs from its sovereign will to sleep.

Sleep restriction therapy thereby bases its methods of intervention on the two-fold process of denying sleep in order to open up a self-correcting process based on a naturally programmed compulsion to sleep, and to intervene at the level of desire through altering perceptions of sleep and sleep need (Greene 2008, 229). Relating Spielman's apoplectic tone, Morrisoe concludes her chapter on sleep restriction therapy with his declaration, "I tell them to CUT IT OUT. ALL OF IT! You're seeing an expert and I've seen everything and know everything you're doing. STOP IT ALL! JUST GET BACK TO YOUR LIFE!... You want to sleep well? Don't think about it! Don't do anything! Sleep is automatic. It's repetitive! It happens every twenty-four hours! JUST GET OUT OF ITS WAY!" (2010, 84). Morrisoe's use of all caps, and her subsequent departure from sleep restriction therapy, indicates the failure of the medico-scientific attempt to make Haraway's techno-monsters by applying artifice in order to rehabilitate nature. More directly, Spielman's authoritative diatribe points to the manner in which pre-social ontological foundations of the properly functioning and integrated subject designates an illusory space of autonomy. Spielman's argument from expertise deploys institutional power, based on scientific methods, to even more extensively imbricate the wayward subject within governmental logics, and its attendant hygienic forms of discipline. The necessary conclusion is to reassert the deficiencies of anyone unable to conform to the ontological model, which justifies Spielman's "moralizing against inconvenient human activity" (Berlant 2011, 97). That is, any failure on behalf of the insomniac is then merely representative of the failure to want it badly enough to get out of its way, or to take seriously the admonitions of the specialist who knows (Greene 2008, 86).

Morrisoe bases her rejection of CBT methods on the lack of recognition of historical narratives (Alaimo's genealogies) and experiences that produce disordered sleep, and the failure of its imposed disciplinary techniques that fundamentally alter the relation to sleep. Morrisoe notes that when she took seriously the strict rules of sleep restriction therapy, she found herself engaging in a variety of activities so as to avoid the things that she was no longer allowed to do. This converted her into a night owl as she makes "dates with people I don't even like in order to avoid what I do like, which is watching TV in the bedroom" (2010, 70). Greene further notes that stimulus control methods of CBT necessitated a pre-bedtime practice that required hours to sufficiently unwind before heading to bed, and that this represented a wholly unreasonable and impossible solution to the problem of disordered sleep (2008, 229). In other words, Greene and Morrisoe rejected the "eye fucking" gaze from nowhere that sought to discipline their inconvenient and nonnormative bodies according to the presocial ontological conception of the properly functioning subject. Ultimately, the assertion of a naturalized model of sleep along with disciplinary techniques designed to its restoration, in which sleep is a self-regulating process that incessantly strives for satisfaction, is both a product of the understanding of illness outlined by Esposito and the template for a clinical understanding of deviance as necessarily grounded in DBAS. It is in the response to the particularly gendered aspects of the governmental logics of practitioners and researchers such as Spielman that we find the structure that enables the emergence of *ressentiment*.

Severing Connections: The Rejection of Madness

As the memoirs show, the continual compulsion of sleep medicine attributes insomnia to a deficient ability to care for the self. In particular, sleep medicine asserts that women suffer from inherent, biologically scripted tendencies such as anxiety. As such, in the sleep sciences, the reiteration of gender norms figures the female insomniac in terms of a defined form of deviance from a model of sleep conceived from within the male supremacist, scientific methods and ideologies. This model conjoins the sovereign will to sleep with a pre-social biological clock. The sleep sciences subsequently strive to integrate disordered women into these male supremacist epistemological structures. Morrisoe traces the obvious origins of this nervous female insomniac back to the neurasthenia epidemic of the nineteenth century and its translation to the popular depiction of insomnia as a “torture that frequently led to suicide.” Morrisoe cites an 1888 *Washington Post* article which builds on the moral panic concerning women’s sleep: “that loss of sleep, carried to [sic] far, will produce insanity” (2010, 72). The logic of the *Post* was fostered by nineteenth century neurologists such as George M. Beard, who attributed the manifestation of sleeplessness to an “‘American nervousness’ ...brought on by increased industrialization and the vices and virtues of modern society. The majority of sufferers were well-educated middle-class women” (72). Unable to deal with the stresses of industrialization, women were, of course, subjected to the rest cure to salve their fragile sensibilities and sins against nature.

From these gendered origins linking psychological states to insomnia, Greene notes that the positivist methods used by sleep science further convolute the topography of insomnia discourses. Positivist methods require observational methods, which are used to record deviance from the established model of normative sleep that then define insomnia and the insomniac. For

example, in her survey that ranges across 1950s textbooks to conferences from the 2000s, Greene notes the ways that EEG measurements purportedly show that, while “women complain more than men about their sleep...the EEG shows that they sleep better than men at every stage of life.” For Greene, this is how we reproduce the “stereotype of the hysterical female, prone to hypochondria and to exaggerating every little thing—women! What can you expect? (2008, 72). So, while there is recognition that women are more likely to suffer from insomnia, there is also the denial of their suffering through gendered typologies. The withdrawal of recognition is perhaps the most obvious instance of the ways that objectivity in the sciences injures women (Haraway 1988, 575). Haraway persuasively argues that the structure of scientific method deployed in instances such as this structure a relationship between the institution and the complaining subject in which a “gaze from nowhere” which “inscribes all the marked bodies, that makes the unmarked category claim the power to see and not be seen, to represent while escaping representation” (1988, 581). Stripped of the ability to name their experience, to even gain recognition for their suffering without validation, Greene and Morrisoe recoil differentially from these forces of scientific-liberal subjectivation.

Furthermore, the male supremacist sleep sciences reinforce the gendering of insomnia through the predominantly male composition of their test subjects. As Greene notes in a section entitled “Where are the Women?,” 75% of test subjects in sleep clinics are male, while the existence of longitudinal studies of women are virtually non-existent. Greene cites Margaret Moline of the Sleep-Wake Disorders Center at New York Presbyterian Hospital, who notes that “studies of women’s sleep across the reproductive cycle have been few and far between...sample sizes are small, and there are differences in study design and data collection procedures that make it difficult to get a sense of what’s going on. There is very little known.” It was not until

the 1990s that they even started looking at female subjects. Before that time it was considered unseemly to watch women sleep (2008, 82-3). As such, women's bodies are measured against norms established from the study of male bodies in temperate-centric studies, and deviations from that model are then read as a propensity toward overstimulation (the improperly managed relation of the sufferer to the modern environment and the concomitant inability to manage its influences, possibly a result of the influence of hormones) or mental health (underlying neurotic-psychiatric conditions). Thus, gendered discourses of mental health separate women from recognition as insomniacs, and then target their mental health as the cause of their disordered sleep. The female insomniac is, then, ultimately a figure defined wholly by neuroses or other conditions *who is thus not an insomniac but a neurotic*. Alternatively, she is an insomniac through her difference from androcentric, quantitative models of sleep by virtue of mental illness.

Even once the sleep sciences recognized insomnia as a condition in 2005, the manner of defining it in terms of primary and secondary insomnia further imbricated insomnia within mental health discourses. In rising to the status of a recognized condition, the sleep sciences crafted the notion of bi-directionality, in which mental health issues and insomnia could act as both cause and effect of the other. Thus, the method of official recognition strengthened the link between insomnia and psychiatrizing discourses, wherein it became a node in a now vast network of conditions instead of a mere symptomatic effect. Morrisoe attributes this historical continuity as reflective of a curious set of atavistic beliefs that exist in medical practices despite "our more sophisticated understanding of the brain's biochemistry." She then cites a most curious analogy provided by one analyst who told her that long-term insomnia is "like males with impotence. You keep them focused on what's really going on in their life and not just, oh

my penis isn't working. What does impotence mean to them? It's the same with insomnia. The patient needs to get at the issues directly related to sleep" (2010, 74). Morrisoe thus supplies us with a most curious accretion of insomnia discourses that render it as a specifically gendered experience, but which is understood through masculine experience and subjectivity.

In addressing questions concerning the relation of non-normative psychological states and insomnia, Greene reflects back on her time in graduate school being defined by an omnipresent depression. In her depiction of the symptoms of depression, she notes that the one constant feature of each manifestation was the fact that it appeared with a change in context. For example, deaths of a brother or her father instigated periods of depression. However, these periods "never made all that much difference to the way I [slept]." As such, Greene summarily declares that she knows "what it feels like to be depressed, and it's not what I feel most of the time" (2008, 67). Greene uses the distinction between insomnia and depression to disarticulate the two conditions. As she further concludes, one "study of eighty-six patients who suffered chronic insomnia, 70 percent of whom were depressed, the depression significantly improved when they started to sleep better" (73). Greene thus takes the sleep medicine claim of bi-directionality, which posits insomnia as inextricably and yet indeterminately linked to mental illness, to craft an inverse directionality originating with insomnia, thereby reasserting her claim that insomnia is an independent condition.

In concluding her assessment of these psychologizing discourses, Greene notes the misattribution of the cause of insomnia to character traits that are "just as likely to be the *consequences* of living with insomnia...If you were to take normal sleepers and deprive them of sleep, randomly and unpredictably deprive them...you could make them concerned about their sleep, somatically preoccupied, socially withdrawn, mentally and psychically inactive,

indifferent and listless, and all the rest” (2008, 73, emphasis in original). Insomnia induced suffering leads to psychiatric issues, but positivist-oriented sleep sciences are unable to read them as anything other than forms of deviance that produce the condition and interfere with naturalised sleep processes. This difference in interpretation significantly restructures modes of therapeutic intervention. It is the intrinsic hostility and lack of recognition of insomnia as a medical condition, defined by suffering induced by an inability to sleep and by the encounters with a regimented, artificially constructed day, that prompts Greene to dedicate her memoir to fight this “tendency to psychologize insomnia, neuroticize it, pin it on the character, attitudes, practices of the sufferer” (12).

A Question of Voice

A fundamental question of the memoir concerns the nature of the self-presence that propels the narrative. In her text on autobiographies by women, Shoshana Felman asserts that it is impossible to be fully self-present insofar as women’s voices can be possessed by a different, male voice. (1993, 14). Felman thus argues that there has yet to be a true autobiography because women are trained to position themselves as “other,” and thus become estranged to themselves (1993, 14). While I take it as axiomatic that any form of unmediated self-presence is a fiction, this specifically gendered question concerning the mediation of the autobiographical voice opens a range of questions in the sleep debility memoir. As a form defined by its protracted engagement with social institutions geared to the production of androcentrically normative bodies, the question of how those institutional epistemologies informs the voices of gynocentric memoirists takes on an extra degree of significance. Specifically, the question arises concerning the ways that sufferers such as Greene or Morrisoe negotiate epistemological assumptions of the

sleep sciences in their writing. Thus, what we need to account for are the attendant politics of the memoir found in the “tinkerings” (Alaimo 2010) and “inflections in orientations” (Haraway 1988) as well as the forms of *ressentiment* (Brown 1995) that emerge from the confluence of the suffering body with the “heroic agencies” and “hygienic governmentalities” (Berlant 2011) that regulate their experiences. In what follows, I first examine the manner in which Gayle Greene embraces a neuro-biological understanding of the sleep-wake cycle as a recoding of scientific methods and assumptions after she has cleared away the psychiatric. I then look at the distinct turn that Patricia Morrisoe makes in her reading of sleep architecture as a geographical metaphor as she develops her narrative of the “House of Punk Sleep.” This leads to her quest to extricate herself from the urban social world in favour of a more natural or pastoral setting as a necessary extrication from the invasive stimuli of urban life.

“How Can You Be So Uninterested?”

In a sort of coming of age trope in the sleep debility memoir, Greene relates her own passage through the sleep lab. She re-counts how the literature from sleep researchers is rife with declarations concerning the inability of the conditions of the sleep lab to alter normal patterns of sleep, which is incongruous with her actual experience of the lab. Greene depicts a situation in which she is asked to sleep at a non-standard time and then given a sleeping pill to help induce sleep. As one researcher confirms for her, not only is it impossible to determine anything about a person’s sleep rhythms from one night, but also sleeping pills interfere with sleep architecture. Despite this, the sleep clinic report comes back with the designation of UARS, Upper Airway Respiratory Syndrome, or sleep apnoea, with an otherwise normal sleep architecture. UARS is the most popular diagnosis because it is the most directly and lucratively treatable condition. As

Greene notes, 93% of all visitors to sleep clinics get this diagnosis (2008, 263). During a follow-up consultation, he flatly declares, “It doesn’t jump out at me that we are looking at a physical ailment.” Greene is dismayed. Wanting to ask how he can come to such a conclusion, she asks “if it’s *psychophysiological* insomnia, what exactly does the *physio* refer to?” Frustrated by his reply that the *physio-* is the product of conditioning, she muses “[h]ow can they be so sure? How can they be so uninterested in the particulars—in our *hormones*, for example?” (258, emphasis in original). Rather than allowing for the use of hormones to explain sexual difference in a dismissive manner, Greene postulates a need to better understand hormones so as to be able to treat the condition.

Greene regularly attended sleep conferences for her research and she uses this to frame the overall thrust of her book. She notes that amongst the hundreds of papers that she “sat through at one conference and read...[there was] very little about the neurophysiology or neuroendocrinology or genetics of the problem.” As noted in Chapter One, genetics enters as an explanation of sleep architecture and sleep timing, but is not an operative element in treatment. She explains this apparent lack as a product of the fact that most “everyone who comes at insomnia comes from psychology, with backgrounds...in *Freudian* psychology.” As with all things with a scientific slant, the mere mention of Freud presents itself as a sufficient denunciation of all that is associated with his psychoanalytic interregnum. Greene cites Clete Kushida, from the Stanford University sleep research centre, who shrugs, “What the *physiological* side is, we haven’t a clue...we feel it’s there, but we haven’t been able to put our finger on it” (11 emphasis in original). Whether this is because of the tendencies of researchers involved, or because of the lucrative markets for sleep apnoea that draw research in that direction, or for other reasons, of the “\$20 million spent on insomnia research in 2005, about

\$3.8 million went to investigations of the neurobiological mechanisms and pathophysiology of the problem...The behavioural model (*change your attitude, change your ways*) has had the unfortunate consequence of discouraging research” (11 emphasis in original) into neurobiology.

Greene wants to push biological research further. She notes that sleep-wake systems have “enormous variability” (11), and therefore require a more nuanced understanding of the variables involved. Greene’s assertion concerning the variability of sleep is ill-defined, but follows a well-worn path to biological grounds of sleep. She takes the same starting point that Wolf-Mayer would a few years later by asking questions concerning the variability of sleep as a central issue in understanding disordered sleep as a function of poor integration with spatiotemporal orders of everyday life. While she refers to the differing sleep propensities of babies and to the possibility/tendency of sleep systems to wear out with age, what she does not define here is what she means by variability. Does this variability present itself as variations in sleep consolidation or duration? Of the timing of circadian rhythms?

Greene’s appropriation of biologicistic arguments asserts that insomnia is a primary condition grounded in bio-physio-neurological problems that need to be treated as an illness, and not a psychological condition. In the chapter on “The Brain of the Insomniac,” Greene outlines the basic biological tenets of the sleep sciences. She describes sleep as a diffuse system of interrelated coordinating functions that connect neurons to neurotransmitters such as serotonin and norepinephrine, amongst others. She goes on to explicate the homeostatic and circadian elements of the regulated and consolidated patterns of sleep and wakefulness. Sleep as a system inhibits arousal and has a “relatively narrow [set of] conditions of the internal and external environment” (2008, 114). Thus, Greene comes to understand sleep as a fragile, complicated system regulating stimulation and inhibition.

This is where Greene grasps hold of a fundamental contradiction between the founding, biological ground of the sleep sciences and the specifically psychological current of sleep medicine. For Greene, the current approaches to treating insomnia are based upon an *incomplete understanding of a biological sleep-wake system*, or, more specifically, a capitulation to the inability to carry that knowledge forward into modes of biological intervention. This situates Greene's work within a neo-Kantian paradigm, in which the manifestation of psychological discourses represent a contradiction that is "evidence that reason has exceeded its limit" (Foster 2007, 161). In other words, the dominance of psychological discourses for what she asserts is a bio-neuro-physiological condition represents an ongoing scientific error that can only be corrected through more complete conceptual categories grounded in the material body. In her argument, the understanding of insomnia emanating from the practice of sleep medicine is a "false but correctable" deployment of the term. Therefore, recognition of insomnia entails more than just mere recognition of suffering and incapacities: recognition also means expanding our knowledge of sleep systems in order to reorient the palliative or correctional approaches taken to the condition. Thus, we have the exposition of a basic contradiction in the understanding and treatment of insomnia, but this subjective experience is unconsciously conjoined to the androcentric assertions of sleep science and its claim to a biologically determinist sleep system.

The mediation of Greene's argument is not merely a moment of subsumption within logics developed by male supremacist scientific methods. Greene talks back through her continually expressed seething rage about the psychologistic reductionisms, whilst she disconnects from the instances in which she articulates the condition to social contexts. Instead of pushing towards a co-constitution of sleep through biology and the environment, Greene deploys scientific rationales from out of this space of rage. Angry about the attributions of disordered sleep by the

sleep sciences, she opts for a retrenchment into scientific method that drops away from the everyday life data that she offers that would, in turn, constitute a reflexive modernity. This turning away is reflective of Brown's notion of a "wariness of politics, when politics is grasped as a terrain of struggle without fixed or metaphysical referents...much feminist anti-postmodernism betrays a preference for extrapolitical terms and practices: for Truth (unchanging and incontestable) over politics...for discoveries (science) over decisions (judgments) (1995, 37). That is, Greene's turn towards a biological truth is part of an overall anti-political shift away from the kinds of more difficult conjunctures that Greene's own text points towards. There is thus a troubling at the heart of Greene's pursuit insofar as she seeks a means of reintegration into the naturalized combination of cosmic and linear rhythms that is "reiterative of regulatory, disciplinary society in its configuration of a disciplinary subject." The formative thrust of her politics is thus rooted in a "unifying coherence through the politicization of *exclusion* from an ostensible universal" (1995, 65). Floundering in a state of pain and interminable suffering and finding no workable offering from a scientific modernity caught in a moment of failure, Greene offers up a politics grounded in the assertion of Truth. These politics are shaped by an embrace of the position of suffering that seeks its cause (1995, 68), all while striving for a better technology by which the liberal subject can then bring back to itself in a final act of reconstitution.

Disarticulating the Sleeper from the Social

Morrisoe's memoir takes a distinctly different path from Greene's pursuit of biological etiology, yet culminates in a similar disjunction with the social. Here, Morrisoe tinkers with the term sleep architecture in rendering it a spatial metaphor, by which she reads sleep in terms of its situation

within a domestic and familial space and to the broader networks of urban and technological existence. Morrisoe weaves together a number of disparate elements, from familial and socio-political histories to tormenting nuns and crazed neighbors, and the electrified world, to develop a propensity for disordered sleep in a field of forces. Insomnia thus becomes a product of the succession of negative influences whereby the normative sleep and wakefulness rhythms devolve into an arrhythmic state, while its resolution, beyond the institutional interventions of the sleep sciences and practices such as yoga and meditation, becomes a consumerist quest to separate the sleeper from the modern world.

Morrisoe's chapter, "The House of Punk Sleep," is a rapid unfolding of the forces that define her sleep through three residences spanning decades. Morrisoe begins her translation of sleep architecture with her first "home in Andover, Massachusetts—the House of Punk Sleep. It was named in honor of my mother, who, invariably upon rising each morning, would dramatically announce that her sleep had been "punk." *Punk* was my mother's favourite synonym for anything weak, dispiriting, or well below par" (10 emphasis in original). Morrisoe spent the first two years of her life sharing a room with her Irish grandfather, "Bumpa," in this house. From his stories of familial struggles with insomnia, she gets the idea of a set of poor sleep "genes" that go back to his life in Ireland. Morrisoe thus constructs a phylogenetic model of insomnia that conjoins biology with a history of domestic space. Much later in life, Morrisoe makes a pilgrimage to see "Bumpa's" childhood home and is struck by the small, two room home in County Cork where he and his eight brothers and sisters had to sleep. Upon finding this "architectural precursor to the House of Punk Sleep," she noted that its current inhabitant told her of how she always wondered how anyone in that immense family managed to get any sleep in its

cramped quarters. Now expanded and situated in the Irish countryside, Morrisoe contrastingly found it to be “so quaintly Celtic” that she “wanted to move in immediately” (11).

Her initial depiction of “sleep architecture” condenses what will be a dominant methodology in her approach to insomnia. Morrisoe conceives of sleep as a fragile state that requires a division of domestic space into individualized quarters. Drawing from A. Roger Ekirch’s *At Day’s Close: Night in Times Past* (2006), Morrisoe describes a time where sleep was under siege from various insects, such as fleas, bedbugs and lice. The salient point for Morrisoe is that sleep “wasn’t pretty back then, but if you didn’t sleep, at least you knew why” (2010, 65). And, as Morrisoe and the inhabitant of her “Bumpa’s” house in Ireland attest, sleep is inconceivable in a space that is extensively shared. In fact, as we are reminded by Jennifer Aniston, we are now at the point where the presence of a significant other, pet, or a child in one’s sleeping space is read as the source of sleep disruption, such that Aniston is left to “confess” her wrongs to Dr. Oz so that he can then prescribe the cure. The resultant logic of sleep is as a modality that, of necessity, requires disarticulation from social networks. This disarticulation is, in turn, coded as a primary element of sleep hygiene, where purging bugs has become purging humans and exurban migration.

Morrisoe describes the myriad ways in which external forces impinge upon her ability to sleep; from Sister Margaret, an abusive nun at her school who terrified her, to the electronic nervous system supplied by television media in which neighbourhood women related losing sleep after they watched Jack Ruby shoot Lee Harvey Oswald (20). Ultimately, Morrisoe moves to the “City that Never Sleeps” (a decision she questions for its logic given her sleep problems), where she encountered a litany of sleep disturbing elements. These include the nocturnal activities and noises in her university dorm and the seemingly endless supply of tormenting

neighbours in New York City apartments who “sleepwalked in stilettos” and music critics with a penchant for punk music (22). Other stories, including a depiction of the over stimulating worlds of Las Vegas and Paris, establish the theme of the overwhelming and inescapable, sleep disrupting networks of modern urban society.

Morrisoe was suitably dismayed by a family physician who, in his best Teddy Roosevelt impersonation, diagnosed her sleep problems as “Princess and the Pea” syndrome, and prescribed wilderness, “fresh air and extreme physical challenges” (21), in order to restore her natural sleep rhythms. From the production of the private sleeping room designated for sleep (an idea entrenched by sleep hygiene), comes the idea to disaggregate urban existence and “return” to a more “natural” setting. Morrisoe is privileged enough to conceive of purchasing a house in the country, and working in a field (journalism) that enables her to work from a distance. Yet, she also locates financial constraints on the bourgeois dreams of this upper middle-class life. Seeking a life in a pastoral setting, Morrisoe joined her real estate agent for a trip to a new town, and her initial assessment is that, while it was not as “horsy” as the town where Martha Stewart and Ralph Lauren lived, this new town was “suitably countrified.” Arriving at the house sitting on a hill with a view of a lake, the real estate agent notes that the house is situated on Robin Hood Lake, and Sherwood Road is nearby. With the pastoral dream in view and echoing the romantic narrative form, Morrisoe declares “I could sleep happily ever after here” (219). Morrisoe’s quest to find the perfect house to sleep in was a lengthy process where ideals of manicured, pastoral natures ultimately press up against financial limits or potentially sleep disturbing constraints, such as the near perfect “Katherine Hepburn” of houses (it had “excellent bone structure”) but featured a neighbour that was far too close (189).

What Morrisoe entrenches is a conception of sleep as a fragile component of existence. Sleep is under constant threat from external disturbances based on its proximity to urban rhythms and the density that brings the sounds of neighbourly activity into her dwelling space. Furthermore, traumatizing figures and the stresses of the electrified world and media integrate one's biological rhythms to the frenzied and stressful events of the day. As such, one of her primary methods to deal with these disturbances/overstimulation is to take the notion of private bourgeois space established in the nineteenth century as part of a formula of sleep as the *disarticulation of the social*, thereby solidifying the boundaries of sleep and wakefulness. This is the key distinction between Greene and Morrisoe. The latter maintains her connection to the social realm in both her diagnosis of insomnia and its treatment. However, her politics of separation follows the logic of the "Abstraction of Man" as outlined by Raymond Williams in his classic essay "Ideas of Nature." For Williams, the separation of nature as a site of proper regulation, that is, as a site that prescribes modalities and ways of being, requires both a separation from the social and, pace John Locke, the act of appropriation that converts nature into "one's own" (1980, 75-6). Thus, Morrisoe's exploration of sleep architecture works through capitalist logics that first separate nature and then distinguish it from the unnatural forces of the urban. In Morrisoe's move to the exurbs of New York City, we not only see a privileged, consumerist path towards a cure that reads against the male supremacist "eye fuckery" of sleep medicine, it pursues a conjuncture of a pastoral nature with the purported natural rhythms of sleep and wakefulness. All that remains is to insert the disordered body into this matrix in order to pursue a differential form of liberal subjectivity.

Defining Insomnia

In his recent book on the social history of sleep, Matthew Wolf-Mayer outlines his goal in terms of moving past the environmental context of sleep disorders, which he defines in terms of the everyday lives of diet, social obligations relating to work and family, as well as “media diversions,” in order to discern the “influences of time and space on individuals and their lives.” What Wolf-Mayer describes as the “spatiotemporal complexity” of everyday, American life necessitates an examination of what he calls “normative spatiotemporal regimes” (2012, 7-8). These regimes control time, and thus the lives of those who move through those spaces. Taking his lead from Weber, Wolf-Mayer works to define the relationship between the sleeping subject and the larger world as a relationship in which biological processes encounter both moral and economic processes that shape social-bureaucratic structures. Emerging from this are degrees of conflict or friction as the biologically programmed bodies of variable sleepers encounter the rigid formations of bureaucratic rationalities. Conflict shapes what he refers to as a somnolent capitalism, in which, citing Murray Melbin, “incessant” institutions produce demands for an intensification of states of sleep and wakefulness (17). This is part of a mandate for increased productivity and integration into the capitalist machine. While Wolf-Mayer asserts that narcolepsy, and not insomnia, therefore becomes the rule of contemporary structures of capitalism, he does discuss insomnia as a product of the friction established between biological and socio-economic spatio-temporal structures of daily life.

In his chapter on the “Protestant Origins of Sleep,” Wolf-Mayer develops a history of what Greene calls sleep machismo: the idea that sleep will fail to be properly restorative if we fail in our biblically mandated task to labour. Citing Cotton Mather’s (1663-1728) *The Serviceable Man* and Ben Franklin (a popular source for his early to bed, pro-lark quote), Wolf-Mayer

concludes that the Protestant ethic situates sleep as an activity with a proper time architecture and as a state of lassitude that requires a dutiful dedication to fulfilling one's moral obligations to the community at large while awake (51). Wolf-Mayer then charts a path from this moralistic-functional ideology of sleep and wakeful labour through to the pioneering scientific sleep research of William Dement and others starting in the mid-twentieth century. Here, sleep gained its own internal time architecture and productive functions, and its disturbance through sleep disorders as a threat to the smooth functioning of everyday life with concomitant associated costs is made clear.

What emerges from this historical trajectory is the *acceptance* of sleep as an “internally driven” process that is “regulated by circadian rhythms that take some input from their environment but are principally understood as individual...[and the] acceptance that individuals are biologically predisposed to particular forms of sleep and that sleep disorders are hereditary in nature” (54). Wolf-Mayer's assertion of a fundamental role of differential chronotypes is pivotal insofar as he postulates sleep as a process that eludes individual control. Sleep is no longer a product of habit or related to the environment or social world, but is rather “attuned to nature and controlled through everyday formations of life and its capacities” (54). Wolf-Mayer's objective, then, is to reorient how we approach disordered sleep as a social condition as well as a biological process, wherein we engage in a process of attunement to the “regularities of others” (13). As such, Wolf-Mayer postulates that a conception of sleep that fully integrates social histories would recognize that “individual patients are not to blame for their inability to sleep. Rather, the dominant spatiotemporal order of industrial and post-industrial American everyday life, with work and school schedules that privilege larks and those who tend toward consolidated sleep, makes some desires for sleep pathological and others healthy” (162).

Wolf-Mayer goes on to discuss the role of contemporary life in the production of lighter sleep, and he posits a fatigue theory for sleep consolidation (a counterintuitive theory for most any insomniac). Wolf-Mayer concludes that insomnia is not a condition or an illness but is rather primarily a differentiated sleep pattern in a world rigidly coordinated in its moral economy. It is only experienced as a condition because of the alienating effects of a spatiotemporal order that is incapable of accommodating this variety. The social organization of everyday life becomes the source of the problem, where irreducible but variable sleep patterns are coerced by the early modern moralisms encoded into rationalized social structures (251). As such, Wolf-Mayer posits sleep as a biologically encoded structure with a wide range of variability, which confronts moral-rational structures and becomes a site of disorder. Allopathic medicine emerges as an institution geared to the management of societies (77) in order to better harness the productive capacities (76) of the population. What Wolf-Mayer wants, then, is to turn away from the pathological model of treatment sought after by Greene in order to embrace what might be termed a diversity oriented bioethics. While the task may be daunting, what is necessary is the flexibilization of rationalized social structures to allow for a greater variety of sleep and to thereby delimit desire as well (256).

Conclusion: Adorno Contra Wolf-Mayer

Returning to Esposito, we could say that any understanding of insomnia as a condition is predicated on the acceptance of an illness/health model from which the idea of healthy sleep is a construct posited from out of a space of disordered sleep and sleeplessness. Thus, insomnia is the means by which a normative model of sleep surreptitiously enters discourses on insomnia. It is this model that occupies the minds of insomnia sufferers and the quest for restorative sleep that

shapes the sleep disability memoir. For Greene, while she strenuously denounces the multitude of psychological discourses that attribute disorder to poor hygiene or dysfunctional beliefs about sleep, the understanding of sleep as a biological process that incorporates a multitude of bodily systems in the coordination of sleep and wakefulness is at the core of her understanding of sleep. A proper allopathic treatment would therefore locate the source of dysfunction in this complex system in order to restore the homeostatic balance that defines normative models of consolidated, diurnal sleep. In turn, Morrisoe more directly thematizes the social and environmental factors that make sleep fragile on the assumption that these stressors or invasions of the space of sleep are responsible for the manufacture of “Houses of Punk Sleep,” wherein suffering takes on a lineal history as an inherited condition. Her quest for the perfect, pastoral home where she can imagine years of sound slumber is thus more than a maximally consumerized model for the treatment of the condition. Nothing less than disaggregation from the social can reverse the dispossession of sleep at the hands of the modern urban environment.

I argue that what Wolf-Mayer has done is to evade the question of biopolitics through a turn to Weberian value discourses, much as Greene does in her turn to biology and Morrisoe in her appeals to nature. In dismissing the environmental factors in the co-constitution of sleep in order to focus on the real problem of inflexibility of a spatiotemporal social order or even merely the noise produced by rhythms appended to diurnal rhythms of daily life, these authors shift the problem from the issue of co-constitution of sleeping rhythms to a quest for better integration and harmonization of bodily natures. All three rightly critique the excessively moralist, sleep-machismo discourses that define approaches to sleep, as well as the gendered psychologizing of much of sleep medicine, but these Weberian and biological analyses evade the question of biopolitics. That is, they miss the manner in which consolidated patterns of sleep are secured

through, and not in opposition to, modern spatial and temporal regimes. Further, they also place the source of conflict with sleep purely in the linear times of organized social life (no running away to nature will solve the issues of a rising sun and of birds).

In taking a lead from the memoirs of Greene and Morrisoe, I was able to understand the fundamental modes of suffering that define insomnia. This includes the models of friction fostered by the rough encounters with daily regimes from out of a state of frustration, physiological discomfort and pain, depression, anxiety, and other attenuating symptoms. Whereas Wolf-Mayer's history of (disordered) sleep posits a need for a fundamental alteration in the structures of society to accommodate variable forms of naturalised sleep, Greene points to the negation of habituated sleeping rhythms, and thus to states of arrhythmia, as the primary basis of insomnia and its ensuing forms of friction. Greene seeks recognition of this condition in order to foster research so as to reconsolidate or correct for deviations that are bio-neuro-physiological in origin. Morrisoe has similar questions, but her narrative works through the fragile and attenuated forms of sleep to their social origins in the rhythms of urban life and posits a different form of naturalised sleep that she finds in the pastoral disaggregation of sleep from wakeful activity.

Chapter Four: Of Zeitgebers and Chronotypes: Scientific Method and the Systematization of Sleep

Many people experience insomnia. This produces a vast array of discourses concerning its sources, effects, and treatments. The endless proliferation of insomnia discourses, from those found in everyday social life to the media, find their origins and validity claims in those developed and promoted by the sleep sciences. However, in the contemporary sleep sciences, disordered sleep lacks a clear etiological structure that is conjoined with a range of non-specific symptoms that, in turn, could be appended to a variety of diseases and conditions. It is at once systemic and nebulous: a condition in its own right and a symptom of others. In turn, there is a proliferation of insomnia categories, with each describing different types of sleep disorders and modes of sleep disruption. Some of these are depicted as insomnia proper and some are rejected as disordered sleep by the objectivistic methods deployed by the sleep sciences. What emerges from these categories is an ever-expanding world of insomniac typologies: the poor sleeper who engages in bad “sleep behaviours” (doing or consuming the wrong things at the wrong time of day); the “owl” (in contrast to the early morning riser known as the “lark”) who struggles to fall asleep at a reasonable hour given the regimentation of daily life; the sufferer of sleep apnoea whose sleep is disrupted as a result of interrupted breathing; the incurable romantic who insists on sleeping with a partner who disturbs their sleep; the victim of a biological mutation; and the whiner who does not even realize the amounts of sleep they are getting, to name but a few of the most commonly referenced types of insomniacs (and *non*-insomniacs).

These classifications and typologies function on the basis of a complex but rigidly fixed set of ontological relations between a biologically based conception of sleep, the relation this biological structure has to circadian rhythms (the environment), and the emergence of what can

loosely be termed modernity (the social and the historical). The result of these relations is a dominant conception of the sleeping body as a regulated and homeostatic system, which is susceptible to interruption by external and internal noises or forces from the social world. From these foundations emerge an insomnia literature that invokes a myriad of distinct nosological and symptomological categorizations, along with their attendant modes of intervention geared to restore what can be loosely called natural sleep. Natural sleep is the ontological ground that is the basis for the explanation and treatment of disordered sleep. This is pivotal: to understand the approaches to insomnia it is essential to grasp the operative system of sleep in the sleep sciences. In understanding the proffered structure and functions of sleep, the insomniac becomes a subject of mutation, or a potentially inexplicable product of a deformation of the autotelic sleep system, in which a short-term disruption becomes a permanent condition.

It is of little use to my argument to reiterate or recast the multiple clinical definitions of insomnia and the instances when the sleep sciences are prepared to bestow the condition on any given individual. While Chapter Three uses the sleep disability memoir to make explicit the problematics of normative sleep science's recognition of poor sleep and its effects, the purpose of this chapter is not to reproduce or refine causal or pathogenic structures, and thus propagate a popularization of science discourse, nor is it to offer up a set of recommendations, or commentary thereon, for how to deal with insomnia. There is a significant volume of work by sleep clinicians and sleep researchers that do this, along with works by popularizers of sleep research, from which one can derive nosological classifications of sleep, insomnia, wakefulness, dreams, and other sleep and sleep disorder related elements, functions and experiences, and the methods of treating these sleep disorders. In addition, there is the subsequent manner that insomnia enters popular media forms such as news articles and pharmacological advertisements.

The discursive construction of insomnia, developed under what I will refer to as the sleep sciences (research into sleep and sleep disorders) and sleep medicine (clinical treatment grounded in the sleep sciences), covers an ever expanding set of subfields including, but not limited to: neurology, physiology, chronobiology, cognitive behavioural therapy, psychiatry, psychopharmacology, and now dentistry (which lays claim to being the current dominant mode of sleep related therapy through sleep apnoea mouth guards). It is the model of sleep and the resultant conception of insomnia that is central to this chapter.

The sleep disability memoir (as discussed in Chapter Three) opens up a fundamental contradiction in the conception of sleep by the sleep sciences, insofar as the memoir navigates the various branches of the sleep sciences in an ultimately failed quest for restoration. The presumptive models of an internal will to sleep thereby crash upon the arrhythmic experiences of insomniacs, such that the memoir transposes failure from the individual to resituate it at the core of the sleep sciences. In turn, the other dominant discourse on insomnia, the androcentric model centred on psychopathology (Chapter Two), further mobilizes questions concerning the quest for individual organization and coherence centred on functional integration to a deregulated socioeconomic order. I begin by following a path into the sleep sciences that has been opened by these fictional and biographical narratives of insomniac experience. From these narratives we can see the translation of discourses of psychopathology as well as the promotion of reified models of sleep produced by the sleep sciences into modes of cultural understanding that permeate everyday life. At its base, the conception of a fixed, natural system of sleep, grounded in a conjoined model of Newtonian-mechanistic and evolutionary biological understandings of the sleeping body, situates arrhythmic modalities of sleep as deviance or disorder. In other words, we are beginning with the problem of positivism in scientific method, from which I will

then examine the interactive effects of this limited form of knowledge of the sleeping body as it eddies through the dis/orders of neoliberal capitalism. This chapter opens up a series of questions concerning the validity of the unified model of sleep in the sleep sciences, which lead to the final chapter where I examine the role of the social in producing and consolidating sleep rhythms.

The desire for normative sleep from within designated disorderly spaces (such as that of insomnia) finds expression in a subsumption of the structure of suffering into this biological model. This subsumption makes us subjects of a model of sleep that is then deployed through various disciplinary mechanisms that individualize responsibility for maintaining adequate sleep while ensuring normed patterns in a context that constantly erodes the boundaries that purportedly secure sleep in the first place. Whether conceived as friction with the everyday or with dysfunctional beliefs and attitudes about sleep (DBAS), each of the sleep science derived understandings of disordered sleep hold to this positivist notion of natural sleep stemming from the sleep sciences. The resultant understanding of insomnia then mobilizes these pathologies as forms of gendered deviance (the social antinomies of androcentric insomnia and the hysterical overstimulation of women). The failure of the biological sleep model to properly address the co-constitution of biology through both its environment and the social/historical is the central problematic of this chapter.

The primary source for my analysis is the sleep science monograph. The monograph is where key representatives of the various fields of sleep research synthesize disparate experiments and the history of sleep science into a totality understood as the sleep system. These monographs show how sleep researchers develop the relation between sleep, wakefulness, and the mechanisms that coordinate its alternations, consolidations and overall functions. In focusing on the monograph by chronobiologists, neurologists, and other researchers and practitioners, I leave

behind the specialized and narrowly focused works found in journals such as *Sleep*, while remaining within the bounds of sleep science as a discipline. From the methods and conclusions of these texts emerge several key questions: what are the methodological problems of the sleep sciences in articulating bio-neurological modes of internal organization? How do they construct the sleeping subject who is separate from the social and historical? What are the normative modes of understanding sleep and wakefulness, and how are they deployed both within the sleep sciences and more broadly? That is, how do the assertions of the sleep sciences serve to shape contemporary biopolitical discourses that assign sleep to a pre-social category, but subject to disturbances by the social thereby making sleep into an object of neoliberal self-management in the control of risk? Finally, where in the configuration of biological and social organization does individual disorganization occur and how do the sleep sciences constitute a subjectivizing agency that produces ideal types who are subject to the disciplinary strictures of sleep?

This chapter will begin with a summary statement on the formation of the sleep sciences as a discipline along with a basic definition of insomnia. I will then develop the overall architecture of sleep as a sovereign ruler of embodied existence through neurological structures and genetic encodings. An examination of the methods used by the sleep sciences to link the theoretical formulation of this biological clock to observable patterns of sleep and wakefulness follows. These methods claim to have access to a biological substratum that is free of the influences of the social environment. At this point, I develop a series of methodological problems based on the surreptitious importation of disciplinary social structures into the experiments, and the effects the continued presence of the social has on the establishment of normative models of sleep and the deployment of these models. This is the key to the chapter: the questionable deployment of positivist scientific methodologies forecloses the social in the constitution of sleeping rhythms.

The objective is not to refute the content or observations, but to question the constitution of the sleeping subject as conceived by the sleep sciences. From the grounding in the biological clock, I then engage the methods of entrainment that link the biological clock to the alternating rhythms of light and dark that define the circadian day in the establishment of what can be termed the homeostatic terrain of sleep developed by the sleep sciences. From the solid ground of the homeostatic mechanisms of sleep, and the evolutionary theory it deploys to understand variations in sleep that are known as chronotypes, insomnia becomes a condition infused with its own remedy. However, the sleep sciences use the list of sleep distorting impacts of the modern world as a means to stoke fear and establish moral panics concerning sleep that necessitate technocratic interventions into everyday life in order to secure an organized body within a broader social order. I will argue that the methodological problems and the extension of sleep science into areas of social and political organization constitute not only a substantial failure of thought, but also an extremely influential practice of biopolitical management of populations.

Sleep as Biology Plus Environment

The various fields of clinical and laboratory research that comprise the field that I am designating as the sleep sciences is relatively new. The sleep sciences coalesced as a specialized field within both physiology starting roughly in the 1930s and then in chronobiology in the 1960s, with the advent of dedicated research labs geared to study sleep as an objective, biological process. Previously, in the first half of the twentieth century, sleep was primarily understood as a behavioural process. Much of the work prior to the 1960s was linked to ever more incredulous extensions of Freudian psychoanalysis and behavioural ideologies stemming from Pavlov, and his notions of sleep as a generalized state of inhibition (Kroker 2007, 216-17).

Nathaniel Kleitman, who is often credited as being the sole, true sleep researcher prior to the 1960s, worked out of the University of Chicago and published the encyclopaedic text on sleep research up to that point in his book *Sleep and Wakefulness* (1939/1964). Kleitman operated under the assumption that sleep was a rhythmic process that was a “conditioned response that is individually acquired and depends on extrinsic reinforcement for its establishment” (Kroker 2007, 307). The consolidation of the sleep sciences in the 1960s is significant because of its epistemic break with his notion of sleep as a conditioned biological rhythm.

Alfred Lee Loomis, working out of his self-financed electroencephalograph (EEG) laboratory in his home in Tuxedo Park, New York, developed the first epistemological break from Kleitman’s conditioned behaviourism when he used this measuring technology to separate sleep from individual reportage. EEG recordings rendered sleep into measurable biological processes of the brain. Loomis’s work in 1937, from which he discovered the K-complex brainwaves that accompany sleep onset, situated sleep as a process with an internal architecture. From his quantitative measurements, Loomis defined sleep in empirical terms linked to inner processes of the body. EEG recordings rendered sleep as a multiform and active state with different categories and purposes, which was in stark contrast to Kleitman’s, as well as Pavlov’s, notion of sleep as a passive state of inhibition. Later, in the 1950s, two graduate students of Kleitman’s at the University of Chicago Medical School, Eugene Aserinsky and William Dement, accidentally discovered REM sleep from the observation of sleep clinic patients. REM is the stage of sleep involving dreams signalled through rapid eye movement. In no small gesture of self-aggrandizement, Dement attributes the origins of sleep research to this discovery (1999, 35), while he labels sleep research prior to that point as something that was little more than a curiosity, and more broadly an aporia, within biomedical research (2). Dement announced this

rupture through the title of his epochal text, *Some Must Watch While Some Must Sleep* (1972). The conjunction of an imperative within methods of scientific observation that is coded into the title of Dement's text bluntly severs the subject from the understanding of sleep.

Sleep research thereby emerged out of its associations with behaviourism and psychoanalysis such that, by the end of the 1960s, sleep was understood as an active, biological process. The reconceptualization of sleep took form through bunker experiments that located an internal, regulated sleep clock that existed outside of any constitutive forces of the social world. Subsequent research in chronobiology asserted that this internal clock was then attuned to the external environment, particularly circadian rhythms of light and dark, through ultradian rhythms such as hormone production and shifts in body temperature that then regulated the body. The work of Jurgen Aschoff, who was the Director of the Max Planck Institute for Behavioural Physiology in the 1960s, provided the initial findings through his Andechs bunker experiments, where he situated test subjects in "time-free" environments, and noted that circadian rhythms remained despite the absence of the external reinforcement. Aschoff is thereby credited with establishing a new field of chronobiology, the study of biological rhythms and their attunement to the external world through evolutionary adaptation. His student, Till Roenneberg, who continues in this field at the Institute of Medical Psychology at Ludwig Maximilians University in Munich, Germany, remains a key voice within chronobiology and his book *Internal Time: Chronotypes, Social Jet Lag, and Why You're So Tired* (2012) is central to this chapter.

As the understanding of sleep shifted from a passive state to an active state, new mechanisms of the boundaries of sleep and wakefulness emerge, along with the mechanisms for the functional regulation of this rhythm. By developing the framework of the model of sleep architecture, I open the possibility of examining insomnia as something more than merely

negative impacts of living in “Edison’s cave” of modernity (W. C. Dement 1999, 98-99), genetic mutation, or as a secondary symptom of psychological conditions such as depression. That is, out of this epistemological critique it becomes possible to assess the potential for biological disorganization that is more than a mere product of negative impacts of the social world or the psychological deformations of the subject, while sleep becomes more than mere biological organization.

Understanding Insomnia

[T]he general definition of insomnia can be expanded to “I’m suffering because I can’t sleep *when I want to sleep*.”

--David Neubauer. *Understanding Sleeplessness: Perspectives on Insomnia*.
2003.

David Neubauer’s dismissive definition of insomnia represents an initial set of tensions between the sleep sciences and those suffering from sleep deprivation. His brief passage establishes a very basic, common sense understanding of what insomnia is, and yet immediately undermines that definition through his tendentiously italicized qualification. His definition means that insomnia is both more than and opposed to mere subjective reporting of suffering. The result is that insomnia, for Neubauer, is primarily about the manner in which people articulate their assumptions concerning both their desire for sleep and their expectations of when and how sleep should occur. Neubauer, who is the Associate Director of the Johns Hopkins Sleep Disorders Clinic and Associate Professor of Psychiatry at Johns Hopkins University, thereby shifts the topography of insomnia from a condition of subjective suffering to a problem of unrealistic expectations, predicated on misguided understandings held by the general public of what sleep is and how it manifests. For Neubauer, there is a culturally based expectation of sleep that is used as a measure against one’s own sleep experience. Rather than confirming the subjective

diagnosis, his emphasized qualification puts subjective accounting of sleep deficits into question. To articulate a basic definition of insomnia in terms of an antagonism at the level of the social is to shift the origins of the conversation away from categorical distinctions premised on a range of causes or effects that would purportedly convey greater sets of truth about sleep and insomnia. Instead, he resituates the conversation through a measure that undermines the basic and fundamental elements of the subjective understanding of one's own suffering that brought the individual to the sleep practitioner in the first place.

Neubauer follows this first qualification/expansion with yet a further delimitation. He cites what he calls the “direct experience of insufficient sleep” (2003, 3). Unsatisfied with any general definition that enables ungrounded subjective suppositions based on feeling unrefreshed, Neubauer distinguishes between subjective and objective measurements of sleep by arguing that there is a “weak correspondence between subjective reports by insomnia complainers and objective measurements of their sleep parameters (4). For Dement, the founder of the sleep clinic at Stanford University, the distinction of the subjective from the objective lies between the symptom that the patient feels and communicates, versus the sign objectively rendered and interpreted by biological recording devices and under the gaze of the sleep clinician (1999, 130). Sleep science literature continually returns to this trope: the insomniac who complains of not getting any sleep for an extended period of time is likely unaware of the amount of sleep that they are actually getting (Lavie 1996, 163), since these objective measures regularly contradict reports of insufficient sleep. Between unrecognized, light stage one sleeps and a simple lack of awareness of being asleep, complainants are thus declared to be unable to understand their own sleep by virtue of their partial perspective. Neubauer's assertions concerning the direct experience of insufficient sleep thus establishes a primary hurdle for the complainant:

insufficient sleep and suffering requires the independently observed and measured validation rendered by the objective measurements of the sleep sciences in a proper laboratory or clinical setting in order to become a diagnosed condition. The resulting conclusion is that sleep is not an on-demand phenomenon that will conform to cultural expectations, and that sleep is only properly understood by the independent observer who can validate whether one is sleeping, at all or properly.

As such, the expansions and delimitations of insomnia by Neubauer establish insomnia research and clinical practices as a topography of tensions between complainants and researchers. In turn, subjective accounts serve to undermine the certitude of the sleep sciences in its notions of biological organization, structure, and the links that hold this system of sleep together. That is, there is a shared certainty that the apparatuses of measurement adequately capture the totality of the empirical processes of sleep, and that these measurements form transparent categories of sleep architecture and the sleep system. Working from the notion of the transparency of the conceptual and the material there emerges the idea of a harmonious system of biological and circadian rhythms as a basic property of humans. Thus, if insomnia persists after disturbing factors have been accounted for and remedied, through various behavioural and environmental therapies and modifications, the only gesture remaining to the sleep scientist is to attribute the condition to an unexplainable genetic or hormonal mutation for which the only recourse is ongoing pharmacological intervention. Genetic and hormonal mutation thus represents a sort of catch-all category that contains the surplus of arrhythmic sleep modalities, which leaves the postulated system of sleep intact while the true insomniac becomes an aberration to which there is no true remedy. Thus, the central question becomes a matter of how

the sleep sciences conceptualize the sleeping body and the pathological attributions it makes, and the modifications it commands, for disordered sleepers.

The Biological Model of Sleep

How does the objectively rendered structure of sleep work according to the sleep sciences? And where are the moments of disunity, the strands of unintegrated or poorly integrated aspects of modes of sleep and its interruptions, the often-naïve empiricism and its lacunae, and the theoretical assumptions that underlie the very tightly conceived and seemingly impenetrable logic of the sleep sciences? These moments occur in and through the cuts that the sleep sciences make in the social and historical as they strive to access the purely biological. Sleep science takes the sleeping subject as an embodied object with inherent and natural truths, and then deploys it as a target of technocratic and biopolitical intervention to create a happier, more functional, productive, and socially integrated waking subject. That is, a preponderantly male discipline of sleep researchers repeatedly narrates the most ludicrous stories that use middle class, suburban families as the models for explaining their theories concerning sleep, which they connect to evolutionary narratives of hunter-gatherer societies with all of the standard assumptions that are attendant to these primitivist tropes. One has to wonder at the degree of similarity between their work and that of Freud in this regard, whose name is anathema to properly scientific sleep researchers (W. C. Dement 1999, 35). Freud's characters are, however, more varied and complex than the prehistoric cave dwellers, forest peoples, campers, and teenagers marshalled onto the pages of sleep monographs.

The operative logic of the sleep sciences begins with Dement's notion of the sovereign will of sleep. The sovereign will to sleep demands an alternating rhythm of sleep and wakefulness

that is then entrained to a 24-hour clock by the circadian rhythm of light and darkness. Our sleep and wakefulness rhythm, with its attendant mechanisms of adjustment to conditions of greater and lesser light, is an absolutely defined feature of human existence that has far reaching ramifications for every aspect of everyday life and experience, including our moods and modes of social interaction. Everything down to the right time of day to have a drink of alcohol or to have sex is reportedly determined by the functioning of this clock. As a sovereign function ruling over human existence, sleep researchers regularly depict sleep as a tyrant demanding proper obeisance to its maintenance as a fundamental task in the care of the self (Lavie 1996, 113; Dement 1999, 56; Neubauer 2003, 22). Sleep thus represents a natural fit for the technocratic planning tendencies of neoliberal capitalism.

Peretz Lavie renders Dement's coinage in more explicit terms as the laws of nature when he asserts "that the sleep-wakefulness cycle is the most stable aspect of our behaviour, endowing it with regularity and rhythm" (Lavie 1996, 2). Similarly, for the chronobiologist Till Roenneberg, there may be "wiggles and larger perturbations in our bedtimes...[but] most of us tend to fall asleep within a relatively stable time frame" (2012, 28). Taking regularity as a sign of internal organization, they thereby conceive of sleep as a modality that gives form and stability to everyday life. The sleep-wakefulness cycle thus offers a means of both reconfirming the existence of social laws concerning spatio-temporal rhythms of everyday life, and the appropriateness of given behaviours in general. They do this by locating these rhythms in a self-regulating organism *with a biological drive to normativization*. Sleep researchers and clinicians thereby insinuate themselves as interpreters of this tyrant, or benevolent sovereign depending on one's perspective, in a broader technocratic organization of society that is ultimately saturated with Calvinistic morality. While many commentators on sleep note the role of a Protestant work

ethic lurking in the ways that we understand the function and timing of sleep, none have pointed to its encoding within the posited scientific conception of biologically ordained sleep rhythms.

Sleep thus forms a disciplinary apparatus through institutional and social forms as well as through a system of biologically determined rewards and punishments. For example, according to Roenneberg, the sleep-wakefulness cycle is the foundation of a division of the day that tells us far more than the appropriate time to sleep. Internal processes tied to the sleep wakefulness rhythm cue digestive processes, and thus trigger the appropriate times to eat that stand in contrast with eating prompted by hunger. Roenneberg also ties eating to the regulation of early afternoon sleep need, with the digestive process counteracting the cyclic emergence of a midday need for sleep. For Roenneberg, proper regulation of diet is the means to overcome biphasic sleep routines and, as I will explain below, to better accumulate sleep need through the day. Proper, moral discipline of one's behaviours is thus the key to fixing the proper expressions of sleep, thereby overcoming improper biphasic models which he associates with the improper management of sleep need and ultimately with harm to the sleep system itself.

The Architecture of the Biological Clock

For the sleep sciences, the notion of sleep as a naturally determined process pivots on the biological clock. The biological clock is an internal mechanism that requires one or two decades to fully develop, and shapes the rhythms and structures of social life through the regulation of bodily organs and, by extension, the sleep-wake cycle. The centre of the biological clock is located in the supra-chiasmatic nucleus (SCN) in the brain, which produces proteins that affect and regulate different bodily processes and organs. The result is a consolidated, daily rhythm of sleep and wakefulness. As noted by Roenneberg, the interest in sleep thereby becomes an interest

in sleep as a *behavioural expression* of the underlying biological clock (26). The central problematic here is not whether these systems and the SCN exist and function on these terms, but whether this is a genetically programmed, pre-social, absolute system.

Discovered in 1972 by Robert Moore and David Zucker, Dement notes that the SCN is constituted by “two pinhead-size clusters of nerve cells...[that] strongly influence about 10 million other brain cells, which in turn have jurisdiction over the cycles of trillions of cells throughout the body” (W. C. Dement 1999, 96). Drawing yet again from juridical language, Dement notes that this regulatory cluster sits directly above the optic nerve and uses its proximity to access incoming light to entrain itself to the circadian rhythms of the world and to regulate different processes in the body. That is, the biological structure of sleep includes access to the environment as a means to compress its structure to fit the alternations of the circadian day. These processes include such things as the fluctuation in body temperature that ultimately trigger and sustain sleep. From observations of the fruit fly’s genetic structure, sleep researchers further argue that the biological clock “creates proteins that regulate the very genes that make them. The clock proteins build up inside the cell until they reach a critical mass. Once enough clock protein builds up in the cell, it travels to the cell nucleus and turns off its own production” (Dement 97; see also Roenneberg 72). As the cells die off, the process repeats. As such, these proteins and the cell structure produce a continual, oscillating process of filling and emptying as the proteins are produced and then disintegrate as they are exported to various organs in the body. Roenneberg concludes that this oscillating rhythm constitutes a negative feedback loop that gives the overall shape to the circadian rhythm of sleep and wakefulness (2012, 71).

In 1997, sleep researchers discovered similar genes in mice, which they found not only in the SCN but other body parts. They named this gene CLOCK (W. C. Dement 1999, 97). Since

his discovery, an additional twenty clock genes have been found in mammals, thus creating an image of a complex interaction of clock regulating bodily processes. The extensiveness of the genetic presence in the cell structures of other body organs is, for Dement, a sign of the reach of both the biological clock and the genetic temporal ordering of bodily processes. Significantly, the SCN and the CLOCK genes figure a temporal organization of the subject in the sleep sciences. Subjected to a world of oscillating temperatures, with cooler and darker nights, selection pressures impinged upon the formation and evolution of the body clock (Roenneberg 2012, 46). The certitude that Roenneberg and others have in the function of the SCN in regulating the internal clock of the organism derives, in part, from subsequent experiments on mice and hamsters. The removal of the SCN in hamsters created disordered sleepers, while the transplantation of an SCN into arrhythmic hamsters restored the regularity noted in healthy hamsters (65). The conclusion they drew from these experimental methods is that there is a biological clock situated within the SCN that reproduces (“transcripts” in the genome related communicative terminology) genetic codes in proteins that regulate the daily oscillations of numerous organs. The transcript theory of genetic communication and regulation is a basic premise of the genome project, which models the organism from the building blocks of DNA. The fundamental disjuncture at this point is obvious: while the SCN has an obvious role in sleep and wakefulness rhythms, empirical observations of regularity connected to the existence of the SCN does not ascribe any a priori, pre-social status to the functions of the SCN.

The Bunker Experiments

Driven by theoretical assumptions concerning internally structured time architectonics, researchers sought to gain access to the workings of the biological clock that were free of interference from the social or environmental realms. It is here that the bunker experiment takes on central importance in establishing the scientific validity of the formulations of the biological clock. The Andechs bunker experiment conducted by Jürgen Aschoff and Rüdger Wever was the first of its kind. As Roenneberg notes, the Andechs “bunker was shielded against everything that could disclose any time-of-day information to the subjects. It had no windows, and was completely soundproof and shielded against vibrations caused by the heaviest vehicles driving on nearby roads. It was even equipped with metal caging” to keep out the changes of the earth’s electro-magnetic fields (41). The purpose of the bunker was to remove any and all possible conscious and unconscious time cues for test subjects who would live in these spaces for up to two months. The underlying assumption was that they would thus rid themselves of anything to do with the social environment and thus had clear and irrefutable access to the biological substratum of human existence, as though the separation from external cues stripped the body of its social history as well as its social and natural environment.

In these time-free spaces, experimental subjects, many of whom were students of the researchers, were provided with artificial forms of bright light and given a degree of control over the structure of their days. During their time in the bunker or cell, their bodily processes were continually monitored through rectal thermometers, while they checked in each time they thought that an hour had passed. As such, researchers asked participants to reproduce their awareness of passing time and to record it, while their ultradian rhythms were monitored. The central result of the Andechs bunker experiment was that test subjects consistently experienced

hours in excess of sixty minutes, and shifted to “days” in excess of 24 hours. Many of these individual days stretched to as long as 48 hours, yet they retained a similar structure to the circadian day.

Roenneberg argues that the most important point of these experiments is the apparent maintenance of sleep and wakefulness rhythms despite the lack of any intruding rhythms of light and darkness or other clock cues (33). The perpetuation of the sleep and wakefulness rhythm in these time free spaces are uniformly regarded as overwhelming evidence for the biological determination of bodily rhythms. Lavie, summarizing Aschoff’s argumentation concerning his initial cave experiments, asserts: “If, under constant conditions, the rhythm did not change even if the periodicity of the cycle might deviate from twenty-four hours, there could be no doubt that the external environment had no effect on the biological clock” (Lavie 1996, 43). Lavie’s tendentious language is typical of their argumentation, where the biological clock and its expressions in forms of sleep and wakefulness are read in terms of their antecedence to the environment in its natural and social forms. It was the bunker that enabled them to access this biological substratum of life. The results suggested that the persistence of sleep and wake rhythms outside of the presence of light and time cues means that the consolidation of sleep does not require continual reference to a conditioning environment. However, the severing of a historically conditioned body, situated in a context involving a demand for hyper-consciousness concerning the passage of time, does little to suggest that these researchers are dealing with a biological substratum of existence. That they could produce assertions concerning the absolute nature of a biologically programmed sleep mechanism from these experiments is thus as confounding as it is frustrating.

The Reproduction of Time

There are two primary methodological issues in the bunker experiments concerning the reintegration of time cues in this supposedly time-free environment. The first involves the deployment of disciplinary regimes and the second centres on the screening processes used in the selection of participants. The former issue arises from procedures used to offset the propensity people have to sleep in the absence activity.³ As Kleitman (1963, 225) discovered in his early twentieth-century research in experimental insomnia, it is impossible to ask a subject to stay awake while in a reclined or inactive state. In the bunker experiments, with their severely delimited spaces that enclose the lives of participants for prolonged periods of time, researchers thus assigned exercises to participants in order to avoid the possibility of a rhythm altering lassitude. As such, bunker experiments typically require test subjects to replicate typical levels of energy expenditure of everyday life found outside the lab. The purpose is to stimulate hormonal regulation and to use fatiguing activities that define the rhythms of everyday life. These disciplinary procedures facilitate an intensification of wakefulness, partly through the release of endorphins, while simultaneously triggering internal, hormonal processes that regulate sleep. Thus, while the bunker experiment strenuously avoids any cues concerning external time of day, the introduction of these exercises perpetuate a disciplinary apparatus that is a constituent part of the regulating features of the social world, but then hide these structures of daily life behind their fetishization of the methods used to contain variables from the environment.

³ Typically, any period of inactivity that follows the sleep-depriving structures of everyday life will entail an initial period of excessive sleep in order to pay off any accumulated sleep debt. However, as A. Roger Ekirch has noted concerning the sleep of early modern farmers in France, there is a historical record of people taking longer than normal sleeps over an extended period of time when the seasonal demands for labour are at a low ebb.

The disciplinary aspect of the bunker experiment raises questions concerning the understanding of discipline (and conditioning) in the sleep sciences. Roenneberg, for example, conceives of discipline as merely the misguided, moralistic attempt to wilfully sculpt a sleep routine into a desirable time frame. The resulting understanding of discipline becomes little more than recourse to an alarm clock (2012, 148). However, a significant element in the subjective experience of the spatiotemporal rhythms of everyday life includes the activities that accompany the navigation of its institutional and social spaces. These circuits serve to discipline the body into a regime of activity and thus are key elements in the shaping of the rhythms of the day that, in turn, regulate the ultradian rhythms of the body. That is, far from merely positing social activity as having a proper time, the bunker experiments affirm the importance of social activity as a productive, disciplinary mechanism in the constitution and maintenance of any clock mechanism. The deployment of exercise regimes made to replicate everyday life, from Aschoff's bunker experiments onwards, thus grounds internal organization in the social.

The experimental spaces of bunker and cave experiments also encounter problems concerning the effects of living in isolation in spaces of often no more than two hundred square feet for as long as two months. In an extremely glib response to this issue, Lavie notes that only seven of the 232 test subjects in the original Andechs experiment asked for early termination, while “many of the subjects asked to participate in further studies, a sure indication that the time spent in isolation had caused them no harm” (1996, 44). Furthermore, psychological screening “revealed that all the candidates were completely normal, not a group of bizarre recluses” (45). Try as I might, I cannot locate any hint that these are ironic statements. The hysterical and histrionic assertions of normality of the test subjects becomes, for Lavie, an essential feature of

the validity of scientific truth claims by denying that there was any psychological distortion or interference as a result of the experimental severance from the social world.

The quest to eliminate any distorting elements in the experiment is, of course, a primary feature of scientific method. A continuous process of reflection refines variables to account for interferences, as interference reduces the validity of any subsequent findings. Paul Feyerabend's critique of scientific method connects the quest for normalcy to the intellectual history of the sciences. Feyerabend notes the central importance of normality to observation in Aristotelian empiricism, where valid observation is "what a normal observer (an observer whose senses are in good order and who is not drunk or sleepy, etc.) perceives under normal circumstances (broad daylight; no interference with the medium) and describes in an idiom that fits the facts and can be understood by all" (1975/2010, 108). Under these conditions, then, the perceptions of researchers will "contain identically the same forms that reside in the object" (108). In bypassing the Kantian block by positing a fundamental transparency established in observation and measurement by which external patterns and appearances express the internal structure of the organism that is secured and knowable by its very normalcy, contemporary scientific experimental methods continue to derive their findings from this classical framework.

Thus, the oddly strident tone taken by Lavie concerning the normalcy of the test subjects is a necessary appendage to claims of certitude concerning biological programming of sleep and wakefulness rhythms. That the selection of normalised bodies is but another method for producing the normal curves and patterns that shape the results, what Feyerabend refers to as the practice of *curve fitting* (2011, 29), which further underlines the fact that methods used by the sleep sciences in the bunker experiments are unable to avoid violations of their principles as they strive to access the purely natural being. Through the removal of disorderly and abnormal

communities, bunker experiments insert regulated bodies (not “bizarre recluses”) into a controlled, delimited and disciplinary space subject to a never-ending, biologically penetrative gaze, while claiming that a foundational normalcy allows them undisturbed access to the biological substratum of human existence.

Circadian Rhythms in Bunker Experiments

There is a third methodological issue with the bunker experiments that concerns its failure to adequately account for noise in the data, which is central to understanding the consolidation of the biological sleep model. As Roenneberg narrates his bunker experiment (instead of telling a specific history of bunker experiments, he amalgamates the history into a story), he relates how the rhythms of sleep and wakefulness expanded beyond the normal twenty-four-hour day. Intriguingly, however, he reports that while most bodily rhythms were synchronized to the expanded time architecture for the majority of test subjects, body temperature rhythms remained relatively connected to the twenty-four-hour day (2012, 39). That is, the normal shifts in bodily temperatures retained their link to the external day and became an ultradian rhythm for those individuals whose days expanded to close to forty-eight hours. The result was a disaggregation of typical body temperatures from the rhythmic patterns of sleep as experienced in the now prolonged day. The disaggregation of constituent elements within sleep architecture meant that sleep onset was now linked to the body temperature nadir, rather than with the initial drop in body temperature associated with standard sleep and wakefulness rhythms. With as much as one third of test subjects experiencing this level of desynchronization, the previous insistence by Lavie concerning the perpetuation of circadian rhythms dissolves. Body temperature rhythm, which is supposed to act as a trigger for bodily awareness for the proper time to sleep and to

sustain the ability to stay asleep, loses its assigned function in the biological model of internal time.

Individuals whose days expanded to 48 hours often napped at the point at which their body temperatures reached their nadir in the first twenty-four-hour period, thus some researchers latched onto this result as affirmation that the forty-eight-hour structures were ultimately the same as the normal sleep and wake cycle. If people napped when they would normally begin a period of consolidated sleep within a twenty-four-hour day, then the normative mechanisms of sleep were still intact. However, these naps lacked the duration of a normal sleep, and thus constituted what could just as easily, and more appropriately, be described as a biphasic rhythm of sleep and wakefulness in the forty-eight-hour period. Desynchronization of such a significant portion of the test population thus signifies a meaningful disarticulation of the sleep and wake cycle from its accompanying body temperature cycles, which complements the disaggregation of temperature rhythms from sleep cycles. Yet, Roenneberg concludes that these experiments show that there is a world of internal time regulated by a biological clock (2012, 45), which he then connects to evolutionary theory as a means to explain the variances from the circadian day. Roenneberg argues that the manifestations of desynchrony is not a “sloppiness” of an otherwise exacting evolutionary process, rather it is a necessary offshoot of “evolution’s rules of chance and necessity,” (46). This precludes an exact biological clock in a world of changing seasons and latitudes where amounts and degrees of light change, and where vigilance and bodily risk create the demand for sudden shifts in sleep routines. Roenneberg thereby takes the elasticity found in the bunker experiments and recuperates it into the overall biological structure of human time architecture through his recourse to evolutionary theory.

The significance of the bunker experiments thereby reside in the manner that sleep researchers mobilize their findings to corroborate their genomic conceptions of an internal time regulated biologically, while ideas concerning the purposes and functions of evolutionary theory explain deviations. However, Hans-Jörg Rheinberger's work on the epistemology of science offers a more coherent understanding of the functions of genes and their deployment in molecular biology, such that it becomes possible to question the biological determinist orthodoxy of the sleep sciences. Rheinberger articulates his argument through the genomic researcher Ludwig Fleck (1896-1961), who asserted that any epistemological formation must be brought into relation with the social (2010, 18). For Fleck, as Rheinberger notes, the development of knowledge cannot be reduced to a naïve realism that claims access to a transparent object. Instead, scientific research is itself a historically grounded practice and configuration that embodies its own temporality (21). The desire to disentangle the social and the historical elements that condition bodily processes and scientific epistemologies in the quest to take hold of a purely biological entity is thus a quest that continually undermines itself.

Rheinberger refers to a tendency towards hasty oversimplification (162) at the advent of genomic research in the early 1960s. At this juncture, scientific methods shifted from a Comtean regulation by external sources (the conditioning of sleep and wakefulness as developed by Kleitman) to conceptions of an internal environment as posited by Claude Bernard in the nineteenth century. The genome project was thus situated as validation of Bernard's notion of internally driven regulation, and gave it the language of communication and transcription in an absolutized model of internal organization. In contrast, Rheinberger posits objects as imprecise and malleable (157), and thus integrated into differing contexts. As such, Rheinberger not only offers up a recognition of the temperate-centric research of the sleep sciences, his concluding

section on “The Logic of Life” offers up the notion of a program in which the transcription of information is not an absolutely determined, internal logic of molecular biology. Instead, Rheinberger draws from Francois Jacob’s 1960s lectures at the Collège de France to put forward an Operon model of gene expression and regulation that operates within feedback loops with the organism’s metabolism (210). Here, Rheinberger’s imprecise and malleable objects become the products of phylogenetic and ontogenetic processes of accumulation and unfolding (note, however, that Rheinberger rejects notions of epigenetics), in which the distinction between stability and variation links structuring aspects of the social environment to biological processes. Rheinberger’s Operon model of malleability and adaptability contrasts sharply with the positivist critiques offered by researchers like Matthew Wolf-Mayer (2012), who merely attempt to dissolve disordered sleep through a more adequate integration of differing expressions of sleep types in the bureaucratic organization of everyday life.

Zeitgebers, Chronotypes, and Homeostasis: Entrainment and the Will to Sleep

While the theory of the biological clock finds its putative support from the bunker experiments, these experiments left sleep researchers with a need to account for the compression of elastic rhythms in the bunkers into a stabilized form attuned to the circadian day. How can an elastic form take the shape of the twenty-four-hour day of earthly life? The theory of the biological clock only provides sleep researchers with a model of an oscillating rhythm produced by genetic properties and regulated by the brain, impacting on the functions of multiple bodily processes and organs. They then explain the consolidation of sleep and wakefulness into singular, nocturnal blocks through recourse to a homeostatic mechanism of accumulating sleep pressure and its dissipation. Sleep is ultimately consolidated and linked to the circadian day through a

process known as entrainment. Entrainment to the circadian day is the result of zeitgebers, the external time cues, predominantly light, that synchronize the biological clock with the circadian day. Sleep researchers then deploy a combination of entrainment theory through zeitgebers and evolutionary theory to explain the variations in sleep patterns in what they call chronotypes, the differing expressions of temporal rhythms commonly referred to in the terms of lark (early chronotypes) and owl (late chronotypes). As I will argue, the mechanisms of consolidation and compression of rhythms are not only central to the conception of sleep and wakefulness in the sleep sciences, but form the basis for their interventions in disordered sleep. In turn, the fragility of this most stable system (Lavie 1996, 1) forms the underlying trope of sleep in modernity. This trope finds its expression through binary narratives of an overstimulating, sleep disturbing urban life that contrasts with the ideal types of sleep conditions found in pre-modern life (Roenneberg 2012) or the experience of wilderness (Dement 1999, 101).

In 1984, Alexander Borbély and Serge Daan developed the first model of accumulating sleep pressure, which they modeled on an hourglass metaphor. Upon waking, the body slowly accumulates a need for sleep, just as a turned hourglass slowly fills up with sand. This accumulation represents sleep pressure, and once the hourglass is full we fall asleep and the hourglass is thus turned over as we dissipate accumulated sleep pressure. However, sleep pressure accumulates most quickly in the first few hours of the day (Roenneberg 2012, 93), and it does not explain how we are able to stay awake as sleep need accumulates. Dale Edgar, working as a postdoctoral fellow in 1985 with William Dement at the Stanford Sleep Center, expanded Borbély and Daan's model into what became known as the Opponent-Process Model. As related by Dement, there is a "biological sleep drive that causes us to fall asleep and to remain asleep through the night [which] is continually active, even when we are awake.

Opposing this sleep tendency is the process in our brain that fosters wakefulness and sustained alertness [that] is not active continuously” (W. C. Dement 1999, 80). Wakefulness occurs as the sleep pressure nears zero and the active wakeful force can take over. While the gadfly Jim Horne, professor emeritus at Loughborough University and former head of the Loughborough Sleep Research Centre, counters that we live in a constant state of sleep debt, for which the subsequent idea of a zero-degree of sleep need only stokes anxiety amongst insomniacs (2006, 184), the shared consensus revolves around this dissipation of sleep need and the counteractive force needed to consolidate wakefulness.

The body’s will to sleep is part of a system of accumulating pressures that cannot be willfully denied for moral or scheduling demands, and thereby secures sleep by any means necessary. The basic premise of sleep debt is that as it increases, the body’s sovereign will to sleep will wrest control from any force striving towards or perpetuating wakefulness. Whether this force is the “committee in one’s head,” the long-haul truck driver (a favourite character for Dement), or military personnel undergoing wakefulness extending exercises with stimulants (Lavie 1996, 119), the sleep structure that regulates existence is an absolute sovereign. Much like the anti-sleep Edison who was often found napping in the afternoons, a conscious will not to sleep or an inability to sleep will therefore ultimately have to repay any accumulated sleep debt (one could have hoped that late-night Tweeter Donald Trump would have found himself in a prolonged period of sleep-debt induced somnolence). Accumulated sleep debts are expiated through either greater sleep intensity, additional sleep secured through naps, or longer sleep duration (Horne 2006, 33). It is upon this homeostatic terrain that sleep restriction therapy (see Chapter Two) establishes itself. As Lavie notes in relation to treating disordered sleep, all that we can do is to try to make ourselves ready so that sleep can occur (1996, 174).

While the mechanisms of the biological clock account for the ultimate repayment of any accumulated sleep debt, we have yet to account for the entrainment of the expansive sleep architectures found in the bunker experiments. The sleep sciences establish the relation between circadian rhythms and the biological body in a unidirectional manner, with the alternating rhythms of light and dark that define the circadian day producing embodied effects. These external time cues are known as zeitgebers: external rhythmic cues that expand or compress the internal clock. The most discussed zeitgeber is sunlight, which regulates internal sleep structures through exposure of the SCN to the effects of intense sources of light through receptors in the eyes. At the periphery of the retina there is a protein called melanopsin, which opens a pathway into the sleep system that entrains the SCN to the external day. Melanopsin triggers melatonin production in the pineal gland, which in turn compresses the internal body clock in different ways at different times of day. When produced upon awakening through exposure to high quantities of light, melatonin facilitates wakefulness (W. C. Dement 1999, 96). In contrast, in the late evening the pineal gland releases melatonin, a primary signal for sleep onset. After fish oils, glucosamine, and probiotics, melatonin is now the fourth most used dietary supplement in the United States. The increase in usage of melatonin from 2007 to 2012 was over 100%, with a shift from 0.6% of the population to 1.3% (Clarke 2015, 12), reflecting a demand to modify, customize melatonin production, or to overcome a damaged melatonin production system.

Various attempts have been made to craft or alter sleep rhythms through the deployment of zeitgebers, with some attempts focusing on the treatment of insomnia and delayed sleep phase disorders. As Roenneberg notes, “[s]ince a stronger zeitgeber will increase the compression area more than the expansion area, the clock has to hide more of the former in darkness. As a consequence, we become earlier chronotypes when we are exposed to more light during the day

(and to less light during the night). Inversely, if the zeitgeber strength becomes weaker, individuals become later chronotypes” (2012, 167). That is, for those suffering from an inability to maintain sleep or to situate their sleep at a particular time of day, exposure to strong sources of light during the early portion of the day will facilitate both the consolidation of sleep and ensure its proper situation within the overall time architecture of the 24-hour day, in contrast to the more expansive period of wakefulness that accompanies low light zeitgebers. The resulting idea is that it is possible to manipulate a person’s sleep regime through the deployment of socially produced zeitgebers or through “getting out into nature,” and thus to resynchronize and/or reconsolidate the clock away from the sleep flattening effects of artificial light sources.

Insomniacs and those suffering from delayed sleep phase syndrome (essentially a normally functioning biological clock that is set to a non-standard sleep onset time much later than standard onset times) are often instructed to reset their clocks with early morning walks or through the use of natural light boxes as part of an overall protocol of sleep hygiene (or through massive doses of vitamin D). Patricia Morrisoe, in her insomnia memoir, tells of her prescribed use of a high intensity light box so as to better consolidate her disordered sleep rhythms. While Morrisoe found the light box helped initially, she eventually found its success to be ephemeral. For Morrisoe, the light box was one more feature in the accumulation of failed objects, rituals, and practices designed to promote better sleep (Morrisoe 2010, 80-81). More significantly, Morrisoe’s narration of the failure of the light box raises the question of how the regulating presence of zeitgebers may be unable to consolidate sleep in an arrhythmic sleeper, which remains one of the key questions concerning the intractability of arrhythmic sleep.

The chronotype is essential in explaining the variations of sleep timing across populations. Till Roenneberg’s extensive development of chronotypes notes that these types are derived from

surveys of individual sleep habits accumulated in the databases of innumerable sleep studies. He identifies two prime variables in measuring and assessing sleep types: sleep timing and sleep duration. Sleep timing refers to both sleep onset and awakening, while duration is the quantified number of hours spent asleep. Given the fluctuations in amount of sleep and the concomitant variation of sleep onset and awakening, Roenneberg asserts that the best data is the derived midpoint of these measurements. From these curve-fitting exercises/surveys, chronobiologists develop a distribution of midsleep for the population, which typically takes the form of a bell curve (surprise!), but flattens when shifting from rural to urban (2012, 13). Roenneberg uses various qualifications and restrictions on the data that then facilitate his grasp on what he considers to be natural expressions of the biological clock. He begins his construction of natural chronotypes with data taken from free days outside the stricter regime of working life, with the stated aim of being better able to divine an individual's internal time. The restriction of the samples to periods outside of regimes of the labour week would be, of course, different than the often constrained, sleep debt accumulations of workday routines.

As such, we are once again confronted with what Karen Barad refers to as a scientific cut in the data. Drawing an overall ethos from Donna Haraway's challenge to conceptions of a nature outside of culture (Barad 2007, 41), Barad uses the work of Neils Bohr to question the cut by which scientific methods separate the object from its social environment and from the observing gaze. Barad notes that determinate objects with determinate properties are not properties of the objects themselves, but are, in part, connected to the cuts that separate them from the environment. Thus, determinate properties are located in the apparatus of measurement and observation itself (142). In other words, the manner in which Roenneberg's studies cut into the rhythms of everyday life has a determinate effect on the results. These effects are always

going to be there, and, as such, the sleep sciences need to follow the recommendations of Ludwick Fleck to better account for the presence and role of the environment, instead of attempting to bracket it out.

The effect of the choices in Roenneberg's assessments are clear. He rejects the use of the production oriented regimentation of the week for his data because of its disciplinary effects and its role in the accumulation of sleep debt, and he subsequently draws from time frames where this accumulated debt is typically repaid. Thus, the selection of the data is overdetermined by social regimentation, yet proffered as its absence. The normal curves that define Roenneberg's midsleep are thus constructed from out of the spatiotemporal rhythms of reproductive and leisure times. The somewhat baffling if standard use of this methodological cut into the rhythms of the social body fails to recognise how leisure and reproduction are elements in the overall spatiotemporal organization of society, with its continued divisions of time into productive, reproductive, and leisure time. The chronobiological rendering of nature then becomes a selective articulation of a biological system of sleep and wakefulness to the central structural components of modern society, rather than a discovery of a purely internal biological structure.

What the fields of molecular and chrono-biology offer is the idea of a determinate body with a complex internal regulative economy that is, in turn, articulated to the rhythmic structures of light and darkness that shape the external environment. Systems of sleep and wakefulness, including their consolidation and their various forms of expression in chronotypes, form a strictly defined model where the social and the historical play no substantive role (or more specifically, no role at all) in its constitution. While wanting to avoid questions of epigenetics, I argue that the methodological cuts deployed by chronobiology and the sleep sciences always find themselves enmeshed in the social and historical body. Thus, the question of the consolidation of sleep into

monophasic model of alternating sleep and wakefulness, as an expression of an underlying biological clock, falls prey to the limitations of positivism, which subsequently poses significant problems in both the conception and treatment of arrhythmic or disordered forms of sleep.

The Origins of Sleep Distortion and Deformation

With a mechanistic model of the biological clock and environmental entrainment in hand, sleep researchers reified a model of sleep and wakefulness within the pre-social parameters of a naturalized body. Subsequently, with no role in the formation of sleep rhythms, modern, urban life is left with only a negative function in relation to sleep and wakefulness. That is, modernity either deforms or disturbs the expression of the biological clock. Emerging within discourses centred on issues of overstimulation and economic demands for expanded productive time, the liberating effects on activity provided by artificial light sources, and the rigidity of bureaucratized social structures and institutions is a logic that positions modernity as inherently hostile to the predetermined synchrony of internal clocks and environmental rhythms. The result is a discursive formation in which a variety of elements of the modern, from mediatisation to rationalization and globalization, are understood as primary negative impingements upon the sleep/wake system and disordered sleep becomes understood in terms of the language of deviance from the biological norm. The result of these impingements are a variety of negative outcomes including altered chronotypes, pervasive accumulation of sleep debt, and a networked structure of hyperarousal, all of which alter, delimit, and disturb the natural expression of sleep. For the sleep sciences, the amelioration of the harmful effects of modernity through a more responsive organization of the day would thus restore normative forms of sleep expression. While the list of texts and news articles detailing the different social sources of sleep

disturbances and sleep debts is monumental, my concern here is to secure the purely negative function of modernity upon sleep rhythms in the sleep sciences and the ensuing contrast of nature and culture that informs their epistemology.

Thomas Alva Edison is the central touchstone of this discursive framework. Many writers on sleep invoke Edison as one of the key proponents of a Protestant work ethic inspired sleep chauvinism, where high priests of productivity and labour devalue sleep as indolence and waste. However, Edison is also the pivot of a technological modernity centred on the introduction of the light bulb. For William Dement, Edison is nothing less than the modern Prometheus (1999, 99) who transposes luminous energy into the night, thereby changing our sleep habits forever. While Dement and others focus on the arrival of the tungsten lightbulb in 1910, Wolfgang Schivelbusch's *Disenchanted Night: The Industrialization of Light in the Nineteenth Century* (1995) points to the prior development of electric transmission and lighting technologies at the advent of the second industrial revolution three decades earlier. Schivelbusch's text elucidates the rapid expansion of night time social activities, and particularly their role in contrasting an expanding leisure culture to the regimented world of industrial labour (138). With the expansion of a night time culture came the pursuant shift of service industry hours to cater to the expanding leisure class, and thus the temporal expansion of labourer's hours (146). In turn, the ability to implement shift work in factories also became possible with new lighting technologies. Ultimately, as noted by Peretz Lavie, the spread of artificial light liberated work and leisure from the primary zeitgeber of sunrise and sunset (1996, 195). Therefore, the centrality of Edison is as the personage attributed with a fundamentally liberating technology that enabled populations to deviate from circadian rhythms, while substituting an exposure to the sun with a radically weaker, and sleep deforming, light source (W. C. Dement 1999, 98).

The impact of the introduction of electric light sources can be best encapsulated in terms of the abuse of natural sleep by a capital freed of an unproductive indolence connected to a once pervasive and inhibiting darkness (the spatiotemporal organization effect that delimited capital). Evolving communication technologies that articulated disparate individuals and places and subjected individuals to significant exposure to television, phone, and computer screens (partly an issue of space-time compression, but primarily that of a hyperarousal effect) furthered the impact these lights have upon the internal organization of the biological clock (the chronotype effect).

Whether taken in the form of a consumerism connected to leisure time and entertainment or to ever expansive work regimes and the constant accessibility afforded by communicative technologies (Vaughan 2015, 66-7), the result of the spatiotemporal and hyperarousal effects represents a despoilment of sleep that is central to the ethos and practices of modernity. The body finds itself engaged in the incessant biographical quest for functional integration to the capitalist machine according to the integrative demands of an increasingly deregulated and flexibilized work regime in a disaggregated spatiotemporal dis/order. The effect of this pursuit of integration and regulation in a constantly shifting and deregulating topography is immense. The potential for conflicts in this milieu grow exponentially, such that, as noted by Ulrich Beck, the individual becomes ever more dependent upon conditions that escape their reach (1986/1992, 129).

Thus, any argument (Wolf-Mayer 2012) in favour of an increased flexibilization of routines to allow for a more efficient integration of differing chronotypes into the bureaucratically organized day overemphasizes the idea of a prevalent, rigid social order that is presumably detrimental to the natural expression of sleep conceived as, at minimum, a fixed and

pre-programmed process inherent to each individual. It misses the already extant presence of flexibilization built into modern capital and it demands for an accommodating body able to adapt to shifting spatiotemporal rhythms. Flexibility is not a liberation from bureaucracy, and bureaucracy is too narrowly conceived when thought of as a rigid order contrasted with nature. Rather, bureaucracy is an extension and privatization of disciplinary logic that is co-constitutive of nature, as is developed in Marx's notions of the metabolism of nature. As if to confirm the underlying effects of liberation from strictly defined institutional regimes, Gayle Greene's combination memoir and insomnia research notes that flexibilized routines can have a determining role in insomnia. For Greene, the ability to set one's own schedule (such as was the case when she was on a writing sabbatical from teaching) results in both an initial repayment of sleep debt, but also a disarticulation from the disciplinary structures of everyday life that can secure consolidated sleep/wake routines as much as they can brutalize it (2008, 347).

As is argued by Giorgio Agamben, if the modern involves a system of population management in which the genome and globalization are its primary modalities, then we have an instance of dialectical standstill in which the forces of nature advocate for a form of biologically sensitive attunement that is incompatible with the deregulated and schizophrenizing forms associated with the social (77, 82). The individual is thus presented with the biopolitical demand to restore/return to a purportedly natural but largely automatist sleep rhythm. Though this rhythm is creative enough to have divergent chronotypes, it still prescribes a right time for every activity while trying to exist within a modern context that pummels the genomic scriptures. This pummeling becomes the source of a moral panic concerning sleep, but the tension is dependent upon that basic logic of biologically programmed sleep as a fixed property of the individual.

Another effect, the chronotype effect, entails living in the “electric cave” (W. C. Dement 1999, 98) of modernity. William Dement notes that artificial light sources fool biological clocks and, in turn, extend the day (1999, 93). More specifically, Roenneberg argues that the result of weaker zeitgebers is the further separation of larks and owls. Larks, it seems, experience an even earlier sleep onset, while owls will fall asleep at an even later hour as a result of exposure to weak zeitgebers (2012, 166). To confirm this variation in the expression of chronotypes, Roenneberg notes that larger metropolitan areas of 300,000 or more inhabitants produce later chronotypes than rural denizens (how medium sized urban settings become rural is but another dubious methodological cut that I will leave aside). Roenneberg asserts that this growing divergence is directly correlated to the increased exposure to strong zeitgebers by those in rural areas, rather than any difference in social organization or activity. Roenneberg’s response is to advocate cycling for urbanites to restore a more natural expression of chronotypes. In place of the oft-advocated light box, his partly funny and partly ludicrous call to expose ourselves to as much strong light as possible through a virtuous form of exercise is part of the standard response to sleep issues, thus enmeshing sleep management in larger discursive frameworks of fitness, health, and wellbeing. However, my own worst sleep years were spent in daily commutes of 40 kilometres or more by bike. While the endorphins often gave me an hour or two of feeling slightly better, there was no discernible improvement in my arrhythmic sleep that could be linked to my year-round cycling in all weather conditions. Worse, given the fatigue resulting from my disordered sleep, I ended up in the emergency ward in all but two months of 2005. It seems that cycling while fatigued leads to more wipeouts along with less defensive riding, and thus an inability to avoid unpredictable drivers. Roenneberg’s moralistic advice might be best kept far away from the desultory and moribund masses of the sleep deprived.

Urf? Mrk?: Evolutionary Theory and the Right to Tell Stupid Stories

According to the sleep sciences, modernity carries a number of sleep altering effects that need to be ameliorated in order to facilitate more natural expressions of the biological clock.

Roenneberg's cycling advocacy further signals a naturalist ethos that pervades a culture/nature divide operating at the heart of attempts to restore disordered sleepers. The first stop for this distinction from the modern is the always favourite primitivist tropes offered by evolutionary theory and adaptation. In one example from Roenneberg's many mini-narratives, we are told of Urf, the prehistoric forest dweller who leads the night time hunting crew largely because, as a teen, his chronotype enables him to do so. Sadly, this evolutionary adaptation did not anticipate the later need to attend schools based on lark chronotypes. In another story, of prehistoric cave dweller and clan leader Mrk (the crudity and temperate-centric natures of these narratives and names is both absurd and exasperating), we learn of differentiated sleep patterns as a key to maintaining the fire. Channeling his own inner Eurocentric documentarian gaze direct from the refrains of Trinh T. Minh-ha's film *Reassemblage* (1983), Roenneberg casts his primitivist gaze upon pre-modern myths to explain variations in forms of sleep. Here, sleep represents exposure to risk because of its passive and inattentive state, while variation in the expressions of sleep provides the best means of adaptation to a risk posed as an anthropological constant. Thus, risk forms the presence of a threat to sleep in the constitution of an embedded and fixed form of sleep within demographic and probabilistic ranges of variation. This embedding of risk in genomic structures ultimately enters into conflict with the technologies and bureaucratic institutional structures geared to the production of security. Following Sandra Harding's line of argumentation, the problem that emerges from the self-understanding of chronobiology is that it creates "conflicts of interest for themselves as they first create dangers, then diagnose and

resolve them in ways that create yet further such dangers, which require more scientific diagnosis” (2008, 50).

As the sleep sciences articulate biological sleep to a primitive natural world, the result is more than to just advocate for exposure stronger zeitgebers to treat disordered sleep. In addition, a nature ethos as a response to the sleep debt accumulations of modernity becomes a primary tool of sleep science. Peretz Lavie notes that nature supplies both “good sense” and order (1996, 1), presumably meaning that Urf and Mrk would have more sleep smarts and a greater capacity for its expression of the biological clock than us moderns. In turn, William Dement follows his discussion of the sleep altering essence of modern life with a proof: that when we go camping we “fall into the embrace of nature and awaken feeling refreshed and alive” (1999, 101). As such, nature shifts from a disciplinary regime in Lavie to a palliative remedy for sleep debt. While Dement again confuses the interruption of the sleep debt accumulations that result from the disciplinary regime of work with the increased sleep of leisure time, Roenneberg joins the fray in asserting that we have lost a proper contact with nature (2012, 212), and celebrates the fresh air and exhaustion that accompany rural labouring processes and cycling (167).

What evolution enables, however, is ultimately more than mere assignation of chronotypes into justificatory narrative schemas. As with the dehistoricizing cuts that fostered the logic of biological sleep from the bunker experiments, the recourse to evolutionary theory similarly separates expressions of sleep from the social and historical. As Rheinberger notes, Darwin’s century was not about historicizing nature, rather it mechanized it through evolution. Rheinberger’s thesis aptly describes a fundamental similarity between nineteenth century scientific thought and the development of the sleep sciences from the late-twentieth century to the present. The sleep sciences attribute the functions and variances found in sleep to processes

of adaptation that are firmly fixed in the long distant past. These attributions are deployed to explain a complex mechanical model of interrelated organs, communicative networks, and zeitgebers that are unchanging since their formation. The result is an evolutionary theory without transformation across time, constructed entirely out of the curve fitting processes of statistical regularity.

Evolutionary logic thereby assumes and stresses the obvious negative impacts of a social desynchrony on sleep in the foreclosure of any potential role of the social and historical in the constitution of sleep patterns. The result is the transformation of the social into a series of threats that produce or unleash the unmitigated disaster of disordered sleep, with all its attendant social costs, upon the state. The response to this disaster is the promotion of a moral panic that that drives in two directions. The first is towards the consolidation of a biological-genome centric management of populations against the destabilizing effects of the globalization declension. The second trajectory sends the newly conceived disordered sleeper into the awaiting arms of the sleep industry that strives to restore this presumed natural balance. Lauren Berlant refers to the production of moral panics centred on the crisis of inconvenient or unregulated bodies as constructed events that necessitate the intervention of a “heroic agency” (2011, 101).

I conclude this chapter by describing the ensuing moral panic that emerges from these ideas in the sleep sciences, and by pointing to a possible reconceptualization of the formation of sleep through what Stacy Alaimo calls a trans-corporeal approach. Her approach synthesizes the scientific with the social, economic, political and historical such that it becomes possible to reconceptualize sleep rhythms and arrhythmias beyond the framework of biological models of sleep. In its place is a model that replaces the environment as a productive, consolidating force in the constitution of sleep.

Sleeping in Modernity: Moral Panics and Drugs

I began this chapter by establishing a basic definition of insomnia in the sleep sciences as the direct experience of insufficient sleep. Neubauer's conception of insomnia ultimately pivoted upon the epistemological model of sleep and wakefulness grounded in biology and articulated to conceptions of evolutionary theory. The epistemology of the sleep sciences centres on the sovereign will to sleep, independent of individual will, that inevitably finds expression as a monophasic sleep model with distinct variations based on chronotypes. The sovereign will, articulated to a homeostatic sleep system, will always assert itself against intrusive forces, thus rendering insomnia as a condition that is *infused with its own remedy*. However, the negative effects of modernity (spatiotemporal, hyperarousal, and chronotype effects) disturb natural forms of sleep expression and can become an ongoing sleep disorder, particularly when conjoined with poor self-governance. Patterns of external or internal noise and regimentation, complemented by deformations of chronotypes imposed by the impact of weak zeitgebers, combine to flatten and desynchronize the expressions of the sovereign will of sleep. Thus, insomnia is the residual portion of the original population of complainants who experience the perturbations of modern life in the form of disordered sleep and who are unable or struggle to restore natural sleep through recourse to proffered means of managing the effects of modernity. When corroborated by objective sleep science techniques, what was originally a subjective complaint validated only by the direct experience of insufficient sleep becomes a widespread social issue resulting in moral panic.

William Dement, in particular, has led a crusade in this regard. He has been "sounding the alarm everyway I know" (1999, 6). As noted by Gayle Greene in her memoir, Dement relates how insomnia simply has not become a well-established area of research in the field of sleep

disorders (2008, 263). Patricia Morrisoe further cites his repeated references to an additional sleep debt of approximately 10.5 hours per week when compared to sleep rates of fifty years ago, and that we are not simply tired but “sleep sick” (2010, 82). Dement makes continual reference to everyday threats such as the accumulated sleep debt as the basis of spectacular disasters such as the Exxon Valdez and Challenger space shuttle disasters (W. C. Dement 1999, 51), as well as the role of sleep deprivation in the more mundane accidents that shape the contours and risks of everyday life (e.g., the long-haul truck driver). Dement cites a 1988 study that found that 80% of people claiming to be well rested were not alert (based on Multiple Sleep Latency Tests that measure how quickly a person falls asleep), and 25% of those were pathologically tired (65). Further, as noted by Lavie, sleep deprivation leads to a variety of deleterious effects including social withdrawal and increased aggression (1996, 118), which likely undergird the androcentric articulation of insomnia in Chapter Two. Lastly, there are numerous secondary health concerns beyond the psychological that emerge through prolonged insomnia, such as the correlation of obesity with insomnia due to the body’s increased demands for carbohydrates as a result of sleep loss.

The primary response to this threat from accumulated sleep debt is to advocate for greater sleep literacy by both sleep practitioners and the general public (W. C. Dement 1999, 103), and to assert the primacy of a stable genomic biopolitics over the desynchronous effects of the global biopolitical declension. Here, Dement offers up the biological clock as a “referee” to restore the boundaries of sleep in a “power sharing agreement” (127). The biological structure of sleep thereby becomes the arbiter of a social contract geared to hinder capital’s transgressions of the boundaries of sleep and wakefulness. While articulating a liberal politics of sleep, Dement makes

an implicit nod to Marx, in which he understands the effects of capital in terms of its unwillingness to abide a boundary limit, and thus its tendency to bypass or dissolve it.

In his section on “Treating Insomnia: The Case for Sleeping Pills,” Dement argues that not only is there no alternative than to use soporific drugs to treat insomnia, but also that it is a moral imperative given the threats that the condition represents to society. Without a clear path to restoring normative patterns of sleep, drugs intervene to ensure sleep. Dement argues that there is no evidence of addictiveness (157), nor is there evidence of over-prescription (158). Here he is referencing not only soporifics but anti-depressant drugs such as Trazodone (the most popular prescription drug) to treat insomnia. While Patricia Morrisoe points to the madness experienced by William Styron while on Halcion as a notable instance of the iatrogenic effects of widespread drug use prescribed by sleep medicine, she makes a series of important connections between the discourses of risk, the introduction of harmful drugs on the market, and the sleep sciences. From the signing of the Kefauver-Harris drug bill in 1962 by President Kennedy (and the ensuing use of thalidomide to treat insomnia), the treatment of insomnia has been driven towards the creation of drugs (2010, 54). In 1991, when the pharmaceutical company Searle created Ambien, they employed the public relations firm Edelman which funded a series of “sleep workshops” through the National Sleep Foundation to raise awareness concerning the risks and costs of sleeplessness. As Morrisoe notes, the overall ambition was to take growing concerns over the dangers of sleep-inducing drugs and submerge them under a greater danger represented by insomnia (56). The result was the stunning success of Ambien, while Congress subsequently established the National Centre on Sleep Disorders Research. Sounding the alarm concerning sleep loss through its “Wake Up America” campaign, the result was a further loosening of regulations that included direct to consumer marketing of sleep drugs in 1997 (57). The massive growth in the prescription

of drugs to treat this condition and its remarkable social costs is the biggest transformation in approach to insomnia in the past twenty years.

While physicians, drug makers, and government institutions dovetail sleep awareness campaigns with drug advocacy as *the* means for addressing this moral crisis, the insomniac is once again positioned as a subject managing risks in the pursuit of a biopolitical mandate for adaptability and fitness. However, the effects of sleep drugs goes beyond the madness induced by Halcion and the high suicide risks associated with Zoloft. While Dement is dismissive of any long-term effects of sleep-inducing drugs, Lavie notes some significant problems and limitations associated with their use. First, sleep inducing drugs have half-lives that last up to 80 hours and carry residual effects such as confusion upon awakening and slow reaction times (1996, 180). Lavie further notes that, as the drugs accumulate in the body there is a dual risk of reduced efficaciousness and of dependency. Lavie suggests that these drugs should not be prescribed for more than a two to three week duration (182).

As with any moral panic, the media stokes anxiety while disseminating the now common sense understanding of the sleep system. In Arianna Huffington's hyper-commodified sleep awareness campaigns, Huffington is merely shifting the moral panic from the terrain of advocacy and pharmacology. James Barron's interview with Huffington concerning her latest sleep awareness and promotion campaign transpired with her sitting in a napping pod from Restworks. The pod has a door that encloses the occupant in complete darkness and retails for \$12,895, plus delivery (Barron 2016). What Huffington highlights in this interview and campaign is to expose the extensive role played by markets that first disturb sleep, and then rush in to fill the void with a variety of commodities.



Figure 8 Restworks's Napping Pod

The language of debt and automatic, extracted repayment of accumulated sleep debts situates the insomniac in an economic relation of confusion, rather than just mere anxiety, over the apparent inability to master autotelic methods of repayment. Left to navigate a multiform commercial field in their attempts to grasp and discipline disordered modes of sleep, and unable to submit to normed sleep pressures and their regular dispensation, the insomniac establishes a relation of pauperism in what might be best articulated as one of the multitude of unnamed plagues of the new world order as listed by Jacques Derrida in *The Spectres of Marx* (1994, 81). Derrida's notion of the state of the debt enables us to resituate the relation between the disordered sleep of the insomniac and the purportedly sovereign will of sleep as an asymmetrical relation in which, as Derrida argues, the time is indeed out of joint. In this condition of disjointedness, what Jonathan Crary refers to as a "derelict diachrony" of the neoliberal era

(2013, 57), an uninhabitable habitation haunts the vision and memory of the insomniac *for which there is no potential ontological restoration of the proper and premodern sleeping nature in the technocratic and technological interventions proffered by sleep science and the market*. The notions of sleep debt and sleep sovereignty constitute what should be a naturalized promissory note, which undergoes a seemingly endless process of further accumulation of debt regardless of the endless forms of secondary accumulations of sleep-oriented commodities. The refusal of sleep to arrive leaves the insomniac floating in empty time, dispossessed of any potential integration into social time structures or to their own sovereign will to sleep, while navigating the contradictory terrain of sleep medicine. The ensuing response from the sleep sciences is to refute the experience under the subjective inability to understand one's own sleep, or to attribute it to a socially produced threat that necessitates a submission of the disordered sleeper to a regime constituted out of nature worship, disciplinary activities, pharmacological programs, and consumer goods to expiate the debt.

Conclusion: The Subject of the Sleep Sciences and the Co-Constitution of Sleep

What this chapter has outlined is a twofold problem at the core of the sleep sciences. First, in their objectivist approach to sleep and insomnia through its claim to a monopoly of valid knowledge of sleep (Harding 2008, 50), there is an overall disenchantment of experience. As argued by Roger Foster in his text on Theodor Adorno, this disenchantment occurs as a narrowing of experience and a delimitation of what counts as socially meaningful. To return to Neubauer's definition of insomnia, he extracts the subjective account from the definition, and enacts a subsequent displacement of understanding, diagnosis and treatment into the objective measures and observations of the sleep sciences (Foster 2007, 14). Once sleep and its

perturbations are understood on the terrain established by the “constituting” subjectivity of the sleep sciences, the result is a process of subtraction in the definition of the sleeping subject (11). That is, in the refutation of subjective accounts of sleep and wakefulness, a very specific model of sleep takes hold in both the institutional practices of sleep medicine. This model is then disseminated through the media and defines the construction of the properly human subject whose existence and happiness depends on the ability to integrate to the model of consolidated blocks of sleep and wakefulness. Removing the contingent elements of subjective experience, the sleep sciences define sleep as strictly biological phenomena that is subsequently buffeted by the various impingements of modern life. Thus, while stripping away the subjective claim of suffering is the means to define experience, the sleep sciences turn around and foster a moral panic intended to drive sufferers into awaiting structures of behavioural and pharmacology.

The second, and ultimate problem, therefore resides in this disenchantment of experience outlined by Foster, and the subjection of suffering to structural interventions geared to extirpate suffering while surreptitiously resituating the suffering within an expanding network of risk constructed by modern life. At the core of this problematic is the conception of biological sleep that they deploy in order to understand disordered sleep and the social order that they attempt to restore. As the sleep sciences make their various cuts in the social and the historical in order to gain access to a biological substratum that defines earthbound human existence, they elide the role of the social in constituting sleep rhythms while simultaneously positioning themselves as high level technocrats of the world order. Historically, there are two basic problems with their thesis. First, European cultures did not sleep in monophasic patterns prior to the emergence of modernity. As noted by sleep researchers and social historians such as A. Roger Ekirch (2006), early modern peasants slept in a two-sleep structure in which sleep onset occurred in the early to

mid-evening and with wakefulness returning around one a.m. After about a two-hour period of wakefulness that involved a variety of activities followed was another four-hour sleep block. Others have noted the tendency of rural French peasants to engage in forms of expansive sleep during the winter months during which time the demands for activity were low (Horne 2006, 187), while Roenneberg's colonialist deployment of diet as a means of overcoming the bad order of biphasic sleep in napping cultures baldly presents the technocratic core at the heart of the naturalisation of monophasic sleep. There is thus a need to resituate the social within understandings of sleep, and thus to examine its role in the co-constitution of consolidations and disaggregations of sleep and wakefulness cycles.

We can see this process of co-constitution most clearly in Jim Horne's arguments concerning the consolidation of sleep as a product of industrialization (2006, 186). Citing the historical shift from the structure of first and second sleeps, Horne speculates that such things as artificial light are likely important features in the construction of consolidated sleep, which then becomes a historical artifact of industrialization itself rather than a premodern or primitive form of natural sleep. Thus, the conception of the negative influence of modernity upon a biological substratum fundamentally misses the role of the social in the construction of sleep rhythms that are mistakenly plotted by Feyerabend's curve fitters and presented as biological norms. Just as the intractability of the insomniac represented a transference of failure from the individual to attain sleep to a failure of the sleep sciences in their positing of a sovereign will to sleep, the methodological cuts made in such key aspects of sleep research as the bunker experiments points to what Foster refers to as a failure of thought. Situated as a "passive observer of regularities" (2007, 54), the direct experience of insufficient sleep thus transposes a series of contradictions into the core of the sleep sciences. The failure of thought then opens questions concerning the

appropriation of political decisions concerning the structure of everyday life by the scientific
(Harding 2008, 50).

Chapter Five: On Organization: Sleep, Time, and Biosocial Metaphors in the Nineteenth Century

The seemingly endless profusion of discourses concerning sleep and the range of answers provided for pernicious forms of disordered sleep continually reproduce notions of a “natural expression” of a biologically programmed sleep. Researchers and lay people alike replicate assumptions rooted in these notions of a biologically programmed body, the autonomous will to sleep, and its disruption by “modern life”. Sleep thus becomes an object of desire grounded in biological truth, and this truth is derived from sleep’s status as an independent object of inquiry in the sleep sciences. As Michel Foucault notes, however, the path of desire is not the expression of an autonomous and integral self. Instead, Foucault helps to open the question of the deployment of truths in the government of the self.

The focus of research into conditions like insomnia tends to focus on the dissolution of the boundaries of sleep at the hands of the various forces of modernity, with clinical interventions geared to their restoration. This chapter will focus on the constitution of ordered bodies as a constituent element of modernity. In contrast to the standard model based on extracting and mobilizing the truth of sleep, this chapter traces the consolidation of sleep as a defined feature or function of daily life and its naturalization through discursive practices captured in the organization of the milieu, the design of domestic space. The mobilization of the truth of sleep in the sleep sciences follows from the extraction of rhythms from social organization, and their deployment in the biopolitical management of populations. In this chapter I will use Foucault’s nominalist argument concerning sexuality to note the appearance of insomnia as a category in late-nineteenth century England. The appearance of insomnia as a primary concern in the context of the second industrial revolution defined a moral economy of sleep. The secondary production

of deviant forms of sleep, through which both the body and modernity came to be rendered as problematic, follow from the modern reconstruction of a new pastoral order of self-care. While the emergence of seemingly unproductive and non-normed sleeping bodies came to be pathologized and treated under the new condition of “insomnia,” this pathologization rested on the reconfiguration of a Medieval pastoral order. This new order serves to resituate sleep from its former residence in a protected, ecclesiastical space of the night to a new pastoral order that operates through the rhythms and spatial modalities of modern life, securing a new, functionally defined expression of sleep within an abstract time structure that contrasts with the concrete, seasonal time structure of the Medieval era. I will argue that the appearance of medical-psychological interventions into sleep are not merely constituent of a medical-scientific progression towards the truth of sleep. Instead, these discourses are apparatuses seeking to produce the truth of sleep and implement it as a disciplinary expression of a time-based regime.

A problematization of the truth about sleep questions the relation of desire formed within the context of productivity and modern labour. The reification of the desire for sleep within the consolidated model proffered as the foundation of the coherent subject appears repeatedly as the means for analyzing sleep disorders and their constitutive relation to the functionalized division of time. For example, an article from 2008 by Doug Henry et al. (Henry et al. 2008. Feb; 66(3)) represents a formulaic, positivist response to the production of sleep disorders and their causal relation to the world of work. Citing Juliet Schor’s *The Overworked American: The Unexpected Decline of Leisure* (1991), who asserts that “sleep has become another casualty of modern life...often sacrificed in favor of long work hours, demanding work schedules and...a twenty-four-hour business culture” (11), Henry et al. conclude that work/labour is at the heart of what they diagnose as a “sleep sick society” (2008. Feb; 66(3), 717).

The usurpation, dissolution, or intrusion upon the assumed natural biological boundary of sleep by productive activity constitutes a core concern for Henry et al. What follows from their thesis is a qualitative examination of the experiences of workers with disturbed or unsatisfactory forms of sleep. Henry et al. gathered data from the clients of sleep clinics in Oregon and Texas who had been “evaluated by a certified physician in Sleep Medicine.” They further cite the *International Classification of Sleep Disorders Diagnostic and Coding Manual (ICSD-2)* to define “psychophysiological insomnia as one of chronic ‘learned sleep preventing associations’” (717). Their sociological analysis firmly situates itself within medical scientific discourses, overwriting its epistemological methods into the orientation and results of sociological work. Henry et al.’s work thereby enframes their comments from various non-sleeping subjects, who note such basic things as the role of work in provoking disordered sleep. Difficulties that they attributed to work include: its dictation of the timing and quantity of sleep; the irregularity of time allocated for sleep; and the resulting demands to compartmentalize their sleep rhythms. Furthermore, all of these demands usurped basic practices for the care of the self, such as going to the gym and eating healthy foods. Henry et al. conclude that work plays a central role in the production of disordered sleep, and that insomnia serves as an interpretive modality for assessing the experience of work. Their conclusions become rote: insomnia, and by extension the work environment, becomes an “impediment to occupational success” (724). Disordered sleep is thus measurable in terms of its negative impacts on individuals and on society in its aggregate form. Such recourse has its limitations, given that these individuals are rarely able to modify the work environment. Henry et al. thus argue for a two-pronged approach geared to producing greater social awareness of sleep deprivation as a social problem, and to anchor discordant bodies in “flextime” and “flexplace” regimes to allow for a freer expression of the body’s need for sleep.

In the span of a few short pages, the authors move through a conventional, sleep science-derived definition of insomnia, reproduce some stock responses to the experience of insomnia, and present a range of positivist-oriented management tools geared to better adapting the workday to the presumed, variable needs of biological bodies. What is significant in this contribution to the voluminous body of work on sleep is first the assumption that sleep serves the labour process and, by extension, productive activity. Sleep produces coherent subjects capable of sustained focus with a store of energy capable of warding off the negative effects of fatigue. Secondly, the continuity of understanding modern, working life as having a negative impact on sleep, and particularly work, finds expression in a multitude of contemporary texts and works its way back through key figures in the sleep sciences. Work is thus rendered as an external imposition on biological expression, rather than central to its constitution of a time-based regime and thus as an object of desire.

Sleep and Modernity: Sleep as a Precarious Object

This chapter traces the origins of the constitution of sleep as an independent object in scientific discourse in the late-nineteenth century, and contrasts this with the contextual organization and consolidation of an intensified version of sleep. Between the two appears a contested understanding of modernity, with scientific discourse establishing itself as anti-nature and disruptive of the fundamental category 'sleep' so necessary to a functional and coherent subject. Of note, we can see how George M. Beard's popular text *American Nervousness: Its Causes and Consequences, A Supplement to Nervous Exhaustion* (1881) treats sleep in a chart at the beginning of his book. Beard (1839-1883) was a neurologist in New York City, who posited

nerve sensitivity as the grounds on which a whole host of ailments grew. His ascending graph charts a path through headaches, sleeplessness, and epilepsy that culminates in insanity.

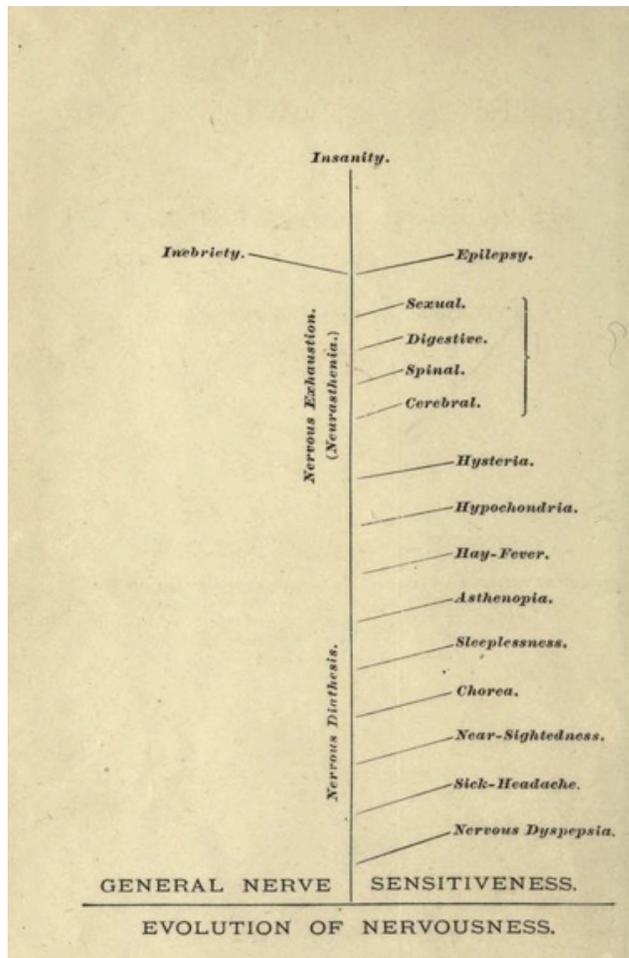


Figure 9 George M. Beard. American Nervousness, 1881.

Sleeplessness is presented as a concomitant effect of modern life, based on frayed nerves, and positioned in pathological relation to a host of other maladies in a spectrum of modern madness. Of note in Beard’s chart is that it points to the emergence of sleep as an object of concern in the late-nineteenth century. Further, it points to the positioning of sleeplessness within a structure of mental illnesses that render the subject disorganized and incoherent. Therapeutic modes of treatment were thus geared to the re-constitution and reconstruction of the coherent subject, established through the positing of sleep as a regulatory object of desire and a pathway to the

productive subject. What Beard offers is a point of arrival of insomnia as a formative risk to the productive energies of industrial society, thus marking sleep as an object of concern in the management of populations.

Having established sleep as an object of discursive concern, I shift to the question concerning sleeplessness from the evolution of diagnostic and clinical treatment, much akin to the way that Stuart Hall shifted the discourse away from “the mugging crisis” (1978/2013), to the institutional structures and forces that produce it as such. To consider the discursive production of sleep in and through labour processes and moral economies is to examine how labour structures time throughout social forms and practices, and thus to consider the discursive and disciplinary apparatuses geared to the normalization of sleeping bodies in capital. As an activity central to the constitution of an ordered subject that also has the appearance of inactivity, this discursive analysis will attend to the silences that occur alongside express references to sleep in order to better understand the background from which both the socially coherent subject emerges as well as the abject state of sleeplessness-insomnia as an expression of a pathologized embodiment of time. As Michel Foucault notes in *The History of Sexuality*, “[s]ilence itself—the things one declines to say...is less the absolute limit of discourse, the other side from which it is separated by a strict boundary, than an element that functions alongside the things said” (1978/1990, 27). Following Foucault, I propose to determine not only the incitement to discourse about sleep and the grammar of its constitution as an object of knowledge and concern, but also to follow the different ways of not saying things about sleep. In so doing, I argue that emergent discourses centred on sleep and sleeplessness in the latter half of the nineteenth century were part of an apparatus geared to the production of the truth of sleep, one that represents a wholly functional assignation of the time of sleep within an abstract form of clock time, all the less

apparent because of its disarticulation from the medieval pastoral protection of the night. As such, we can turn away from the reproduction of the discourses centring modernity as a negative force on biological expression to better understand the constitution and reification of sleep in modernity as a productive force.

Three basic questions emerge concerning this particular production of the object of sleep. The first is, what are the limitations of how sleep has been constituted as an object? That is, how has our understanding of sleep been moulded from the conditions, and specifically the time structures, of modernity and how has that come to serve as a diagnosis of modern life and of biopolitical discourses of self-care? Second, how has the time of modernity been constituted through labour? And, third, what kind of object is sleep? Is sleep the object as defined by sleep science, or is this too narrow an application to understand its function within the time regime of capital?

To answer these questions I will show how the treatment of disordered bodies through hygienic and environmental management (e.g., flextime schedules, the structure and technologies of the bedroom) elides the role that the structure of time in the capitalist day, and its extension into the milieu, has in the production of order and social organization. It is from this socially constituted order and its anchoring in the natural and biological that we get consolidated patterns of sleep and wakefulness and the coherent subject. From there, I look to Victorian literature to understand how sleep forms part of the rhythms of that society, and how utilitarian capitalism took hold of bodies in order to regulate the patterns of everyday life, and the manner in which this form of social order, geared to maximizing the energy of the population, instead continually came upon the problem of fatigue. I then locate the role of fatigue in physiological studies of labour in the late century and develop its significance within political economy and the division

of labour in Victorian England. Fatigue articulates sleeplessness and sleepiness and becomes a focal point of concern and intervention geared to normalizing a newly pathologized subset of the population. Finally, I look at how shifts in the structure of time from Medieval to modern Europe dissolved the former's pastoralism (that founded a sacred order in which conscious, wakeful, and productive activity ceased with nightfall), replacing it with a new form of abstract and densified time (that featured a functional division of the day predicated upon the appropriation of naturalized biological rhythms). As a result, the proffered solutions from Henry et al. emerge as following from a mistaken appropriation of sleep as constituted by the sleep sciences, and the resulting remedies for sleeplessness become a retrenchment of the disciplinary apparatuses that structure the naturalized object of sleep.

Sleep Science Finds Itself

Kenton Kroker's *The Sleep of Others and the Transformations of Sleep Research* (2007) is a historiography of sleep premised upon its constitution as a scientifically defined object, one that is removed from any refraction created when individuals are involved in the description of their own sleep. Kroker asserts that it is only through scientific methods that establish distance between the observation of sleep and the experience of it, particularly through recording technologies, that we can derive sleep as a proper object of medical-scientific inquiry. The uniqueness of sleep as an object is thus its transformation of slumber as "inactivity" into scientific knowledge of a functional biological process. I am critical of Kroker's history, which figures a significant narrowing of the significance of the archive of sleep-related texts as he fits them into an evolutionary historical narrative. He presents this narrative through a presentist lens of contemporary sleep science methodologies. Thus, while Kroker's work on the history of sleep

is significant, particularly for understanding how sleep functions within contemporary medical-scientific discourses, the scientific methodologies he espouses separate sleep from its context and it atrophies the significance of historical texts.

For Kroker, pre-medical understandings of sleep extant before 1800 were unified in their amendment of knowledge to individual experience, in which sleep was a “negative state...the quiescence of the body and the absence of consciousness” (5). Sleep became an independent object only once “such practices [of recording and observation] were deemed capable of representing sleep as it really was, apart from any link to subjective experience” (5). Kroker’s historiography is therefore of a piece with the anti-psychologistic methods of Edmund Husserl and Immanuel Kant. As discussed by Martin Jay, psychologistic thinking was a target of critique by Kant, who argued significance lies not in how we understand or think but in how thinking ought to proceed. Husserl’s *Logical Investigations* extends this critique of the limitations of psychologism, wherein “inductive laws of association could not provide a basis for a pure, deductive logic, which goes beyond mere probabilistic knowledge” (2004, 353). Thereby avoiding the potential problems of relativistic knowledge that he appended to the reduction of the mind to the psyche, Husserl sought to establish fields of research oriented to “objective unities” through the use of scientific methods of inquiry (Husserl 1900/2001). Kroker’s introductory exposition quickly frames his text as a progressive delineation of sleep as part of an internal environment of the body, freed from the refractions created by the psyche. Significantly, the transmogrification of sleep from refracted representation to objective object only begins to “coalesce...around 1900” once it was described as “a positive, rhythmic process that served a biological function” (6). Kroker then concludes that it is surprising for us today to even think that there was a time when sleep was not defined in regard to function.

For Kroker, it is at the advent of the nineteenth century that sleep begins to shift from being understood as merely a passive state that involves the temporary suspension of conscious, waking life (73). Kroker describes sleep as emerging within the field of visibility in psychophysiological works such as Georges Cabanis's *On the Relations Between the Physical and Moral Aspects of Man* (1802), but he cautions that the "internal dynamics of sleep remained hidden from medical view" (74). If one could describe a cadence to the early portion of Kroker's text, it is his introduction of historical variations in approaches to sleep, such as Cabanis's rejection of passivity and introduction of sleep "as an active process" (74), in conjunction with the refrain that it still fails to meet the standards of a medical object. Without a method of understanding the internal environment of the organism, there is no possibility of moving beyond subjective reporting of sleep experience, leaving research trapped in the realm of the psyche. Similarly, two pages later, after the introduction of the role of phrenology in sleep texts such as Robert Macnish's *The Philosophy of Sleep* (1834), Kroker notes again that in "Macnish's time, sleep had not yet emerged as an investigative object; it was still defined as experience, the diversity of which defied the artificial conditions of experiment while it exemplified the private nature of consciousness" (76).

In the second half of the nineteenth century, medical thought underwent a transformation to a biological materialist perspective. This shift, consolidated in Claude Bernard's 1865 text *An Introduction to the Study of Experimental Medicine*, held that the organism was a "society of cells...at once autonomous and subordinate" (Canguilhem, 85). The result is a functionalist analogy that invokes social metaphors and hierarchical orders to establish what Georges Canguilhem's epistemology of science referred to as an "ever-more noticeable differentiation of the labor of preparing the constitution of the internal environment" (85). The result of this

internal differentiation of labour was a homeostatic organism capable of compensating for deviations and perturbations from the environment. The resulting tendency in materialist biology is to articulate this internal environment through urbanist metaphors of citizen-cells, each programmed to fulfill specific functions (Canguilhem, 170). The imbrication of biological knowledge within evolving conceptions of the division of labour is essential to the conception of an ordered society of subordinated beings, each serving to maintain the whole. Bernardian functionalist ideology embedded within biological materialist methodologies thus offers a rich structuring agency that sleep researchers did not fail to draw upon.

William Alexander Hammond took a similarly functionalist-materialist approach to sleep. Appointed Surgeon General of the United States Army in 1862, Hammond proffered the term *cerebral hyperaemia*, “a condition involving the excess circulation of blood in the brain” (Kroker, 80), as a material explanation for the sleep related symptoms his patients presented. As noted by Kroker, Hammond sought to break down the barrier between the psychic and the physical by reducing the mind to the activity of the brain, thereby following the path laid out by materialists such as Bernard (81). Hammond’s works on sleeplessness in the 1860s defined sleep in terms of its elementary physiological function within this internal environment. His definition synthesized Bernardian materialist biology and the inspections of brain activity by British surgeon Arthur E. Durham. Hammond had met Durham at one of his talks on the brain, where Durham described sleep as a “period of cerebral inactivity during which nutrition of the brain substance takes place” (cited in Kroker, 81). For Hammond, this conception of inactivity was significant because it pointed to the fact that, while awake, the “brain’s activity was dominated by thought and the exercise of the will. Both were lacking in sleep, and thus the circulation of

blood in the brain was reduced as it would be in any organ at rest” (Kroker, 81-2). For Hammond and Durham, rest restored the energy and vigour required to sustain conscious, wakeful activity.

Hammond and Durham’s notion of the domination of the brain by the will was translated into the field of psychology by Theodule Ribot in 1896. Ribot was concerned with the waning of energies, degeneracy, and “problems” of attention in the modern world. Conscious activity was understood as nervous activity and respite. Reduced neural and circulatory activity attributed to sleep became central in the attribution of function to sleep (1896, 6) and to the understanding of the place of the body in modernity. Hammond’s conception of problematic circulation ultimately dominated much of the sleep, fatigue, and sleeplessness related discourses of the latter half of the nineteenth century. Moreover, Hammond’s work marginalized the then-dominant discourse on dreams, as there was no possibility that they could represent cerebral activity that centred the will or an active mind. In rendering dreams superfluous, Hammond drew from John Locke to argue that “[t]hinking is an *action* which requires cerebral effort, and which is undertaken with a determinate purpose. We will to think, and we think what we please” (cited in Kroker, 82 emphasis in original). Thus, with Hammond and Ribot we find the articulation and dispersion of a materialist biological approach to sleep in the latter nineteenth century, as well as its conjunction with dominant social concerns as a means to anchor bodies in an understanding of the internal environment of the well-regulated body with its concomitant emphasis on circulation and restoration.

Kroker’s concluding analysis of Hammond’s work notes the manner in which it was ultimately undermined by the end of the 1880s, most notably by the introduction of psychological theories that traced mental illness back to the mind and emotions, rather than the brain. Subsequent historians of psychiatry, such as the adamantine Edward Shorter have

denounced Hammond as a reflexologist and therefore a reprobate contributing the interregnum of proper and adequate biological approaches to psychiatric health (Shorter, *From Paralysis to Fatigue: A History of Psychosomatic Illness in the Modern Era* 1992, 239). Shorter's categorical denunciations are commonly deployed against those who infringe on his positivist methodologies, and he has similar explosive denunciations of Michel Foucault as a mental health denialist and of Sigmund Freud as a usurper of science (Shorter 1998). Countering arguments from the likes of Shorter, Kroker concludes that Hammond would "have no truck" with a growing self-doubt on behalf of neurologists of the 1880s who increasingly felt there was no capacity to "explain all aspects of the mind...by reference to a physiological function" (2007, 83). Kroker's interpretation of Hammond positions him as the first entry to counter the refrain concerning the inadequacy of refractive theories of sleep. While Kroker notes that both *cerebral hyperaemia* and the "Hammond-Durham sleep theory, would disappear, not only from the medical textbooks, but also, for close to a century, from the histories of medicine as well" (83), he links Hammond-Durham to the latter twentieth century and the fully fledged articulation of sleep as an object. Hammond-Durham thus become an origin point in the historical constitution of sleep as an object, understood within a functionalist ideology operating within the logic of materialist biology. Sleep had become an object with Hammond, one not yet adequately defined or understood, but an object of scientific inquiry finally separated from knowledge tainting effects of psychologism and open to an understanding of sleep as a functional and biological process distinct from its milieu, but subject to perturbations deriving from it.

Sleep and the Victorian Era: The Uses of Literature in the History of Sleep

Something that has somehow come into being is always interpreted for new views, newly appropriated, transformed and reorganized for a new purpose by a superior power...all overpowering and becoming-master are a new interpreting, a contriving in which the previous "meaning" and "purpose" must necessarily be obscured or entirely extinguished. However well we may have grasped the *utility* of some physiological organ...still we have understood nothing with respect to its emergence.

Friedrich Nietzsche. *On the Genealogy of Morality: A Polemic*.

In the history of sleep as laid out by Kroker, sleep only becomes an object once it has been adequately rendered as an internal function of the body through external modes of observation and measurement. As a result, he renders the history of sleep research in the nineteenth century as a coming into being: each step represents a movement towards the proper recognition of the object. Kroker's methodology thereby inscribes the history of sleep within a specific meaning structure developed in the present as the truth of sleep. However, as Michel Foucault notes in *The Archaeology of Knowledge and the Discourse on Language* (1969/1972), nineteenth century psychiatric discourses were "characterized not by privileged objects, but by the way in which it forms objects that are in fact highly dispersed" (1969/1972, 44-5). While Foucault refers to the field of psychiatry, the central problematic that he develops is that objects existed in fields of relationships within nineteenth century thought, and these relations are defined by "resemblance, proximity, distance, difference, [and] transformation," such that it is not possible to simply "open our eyes, to pay attention, or to be aware, for new objects suddenly to light up and emerge out of the ground" (44-45).

The empirically minded scientific historicism of Kroker, which seeks to define things as unique, separate and functional entities, necessarily lacks a recognition of the diverse forms of relation by which an object such as sleep would have emerged within nineteenth century thought, and of the plurality of relations and meaning structures to which it was attached. In bypassing the

formation of sleep discourse in order to formulate it as a historically conceived object, Kroker misses the structures that produced sleep as a consolidated and intensified experience. Sleep's emergence as an object of concern, rather than merely as an object, is lost.

Attending to these networks or relations further requires a sort of distillation where the object at hand may not even be present within a thematic or visual horizon. This is particularly prevalent in the case of sleep, which operates as an invisible background to everyday activities *and* as the cessation of conscious activity. Both aspects, background and cessation, contrive to remove sleep from view, creating foundational refractions of sleep that are fundamentally distinct from the subjective refractions that drive Kroker's definition of the proper object and his critique of psychologism. It thus becomes necessary to assess the interferences, extensions, and proliferations that accompany the emergence of such objects as sleep to locate it within the structure and experience of everyday life.

As Foucault notes, the relations "between institutions, economic and social processes, behavioural patterns, systems of norms, techniques, types of classification, modes of characterization; and these relations are not present in the object" (Foucault 1969/1972, 44-5). Foucault's work presents challenges to the work of historiography, particularly in terms of its proffered continuities and unities that accompany the privileged object. What Foucault seeks is to "tear away from [these continuities] their virtual self-evidence [such as the notion of sleep as a function], and to free the problems that they pose; to recognize that they are not the tranquil locus on the basis of which other questions...may be posed, but that they pose a whole cluster of questions" (26). For the subject of sleep, that entails the development of the social metaphors of functionalism embedded within biological materialist understandings of sleep in the late-nineteenth century.

As argued by Foucault, a normative statement includes heterogenous functions and relations between elements as part of a system of dispersion across fields that are visible and invisible. This contrasts with the conceptual consolidation of the privileged object such that it becomes necessary to follow these dispersions in discourse to trace the discursive, rather than merely empiricist or medical, constitution of objects. It is necessary to see how sleep operates as a foundational element in the functional division of the day and how it operates as an in/visible presence in the articulations of bodies, institutions, and spaces. An opening for such a discussion appears in the discussion of Charles Dickens's works by Kroker. Through the deployment of similes and biographical quirks, Kroker anchors Dickens's personal experience and narrations of sleep, sleepiness, and sleeplessness within the sleep research of his era. What Dickens offers to Kroker is a means to create a historical unity through which popular understandings of sleep, literary works, the individual biography of Dickens, and sleep research forms a nascent unity in the objectification of sleep.

Michael Greaney's (2014) work on sleep watching in Dickens's oeuvre points to his usefulness in this regard. Greaney notes not only the central role that sleep and sleepiness play in Dickens's texts, but he further highlights the ways that Dickens repeatedly situates wakeful individuals as watchers of the sleep of others. Greaney's central focus is on the novel *Barnaby Rudge: A Tale of the Riots of Eighty* (1841). In this novel, sleep appears as the defining state of English rural life, while the urban setting is one of a violent wakefulness that erupts into the Gordon riots of 1780. Greaney concludes that this spatialization of sleep and wakefulness is of a kind with Dickens's expressed hostility towards sleep through his association of sleep with a pastoral form of social order and unconscious obedience. The result is that sleep becomes "a

marker of the kinds of cultural space—the timeless backwaters of pre-industrial England—that modernity obliterates” (Greaney, 7).⁴

In his oft-cited discussion of the incitement to discourse in *The History of Sexuality, Volume 1: An Introduction*, Foucault argues that the Christian pastoral of the seventeenth century sought to prescribe “as a fundamental duty the task of passing everything having to do with sex through the endless mill of speech” as a means of transcribing it “morally acceptable and technically useful” (1978/1990, 21). The result was the production of institutional apparatuses geared to the production of a truth of sex that were the basis Foucault referred to as the biopolitical management of populations. This is because the “mill of speech” formed the population as an economic and political problem (24), which necessitated regimes of hygiene and vigor to address the myriad disfunctions encountered by an emboldened medical science. The quest to locate, define, and restore various “aberrations, perversions...pathological abatements, and morbid aggravations” (53) resulted in the subordination of scientific inquiry “to the imperatives of a morality whose divisions it reiterated under the guise of the medical norm. Claiming to speak the truth, it stirred up people’s fears; to the least oscillations of sexuality, it ascribed an imaginary dynasty of evils destined to be pass one for generations; it declared the furtive customs of the timid, and the most solitary of petty manias, dangerous for the whole society” (53-4).

The first component of a pastoralism of sleep derives from a similar impulse, grounded abstruse, overlapping languages linking the division of labour and citizenship applied as functionalist, biological metaphors. From this, aberrations proliferate and the mill of speech, the

⁴ See Dickens’s “Lying Awake.” (*Household Words*, 30 October, 1852). Reprinted in Charles Dickens’s *Selected Short Fiction* (London: Penguin, 1976/1985). For Dickens, sleep is the object of his concerns as he lies there, but is continually bombarded with a series of images and thoughts until he gives up in frustration and goes for one of his nighttime perambulations, which he ordains as a much more productive and pleasant exercise.

basis of refraction for Kroker, operates as the root of a vast proliferation of technologies for the capture and correction of sleep. From this moral panic emerged a range of what Nikolas Rose calls “moral entrepreneurs” (2006, 476) amidst a “problem-solution” complex that create zones of governmental contact between newly problematized individuals and their bodies and the regulatory apparatuses of the state. The end result of these regimes is the constitution of a somatic individual, a person who shapes and understands themselves in neurological terms (481), but also as a physiological being needing hygienic regulation and positioned in a continual pastoral posture of producing the “mill of speech” concerning their sleep.

Dickens’s central concern with sleep thus offers a sort of royal road to the situation of sleep in the modern world, and the concomitant production of the truth of sleep. It appears as both a denuded state aligned with a lack of vigilance, alertness, and attentiveness to the external world, and as an embodied state buffeted by the vicissitudes of urban industrial life. Not only does sleep appear thematically throughout Dickens’s oeuvre, as Greaney painstakingly notes, but his works highlight the significance of knowledge gleaned from the intrusive presence of the watcher’s gaze that falls upon the slumbering body (15). Sleep, for Dickens, revealed the truth of the character of the sleeper, but also articulated a moral entrepreneurialism concerning its proper forms of expression.

Dickens appears ready-made for conscription to the teleological evolution of sleep as an object only properly understood by external observation as established by Kroker, who begins his exegesis of Dickens by noting that the latter drew from phrenology in his earlier works, as well as mesmerism and physiognomy.⁵ Dickens’s phrenological influence surfaces in the sleep

⁵ Greaney throws this connection to mesmerism into doubt when he discusses Dickens’s farcical “Snoring for the Millions” campaign. Greaney argues that the campaign not only mocked government programs geared to the management of populations, but that Dickens also presented Mesmerists in a negative light through his “ludicrous”

related themes previously developed by Robert Macnish (1802-1837). Macnish was a popular Scottish physician and sleep researcher of the 1830s, who Kroker connects through the proximity of the publication dates of Macnish's and Dickens's rendering of themes within Macnish's research. Kroker specifically points to Macnish's work as the primary source for the character Joe in *The Posthumous Papers of the Pickwick Club* (1836-7). Joe, represented as a fat, slovenly, and unmotivated figure is repeatedly found asleep, perched or lying about in all sorts of places. Joe's propensity for extremely loud snoring further became the basis of what came to be known as Pickwickian syndrome, an early term for sleep apnoea.

The theme of excessive sleepiness and snoring appears in Macnish's earlier phrenology influenced study of sleep (*The Philosophy of Sleep*, 1834), where he argued that excessive sleepiness reflects individual character. The key to Kroker's appropriation lies in his deployment of a simile: "[l]ike Dickens's Joe, Macnish's chronic sleepers were incapable of self-control, since 'the soporific tendency springs from some natural defect,'" and obesity was for both "an outward sign of a more general structural failure, which...physiognomy and phrenology equally incorporated" into character (402). Kroker then determines further pathways of influence between the two figures (a drunk character spontaneously combusts in *Bleak House* (1853), which Macnish described in his 1827 book *The Anatomy of Drunkenness*), in order to conclude that Macnish's characterology is foundational for Dickens. In Kroker's four-page treatment, Dickens appears insofar as he represents an organic synthesis of Macnish's work. While Dickens appears to matter little more than an amusing quirk of literary exegesis in Kroker's text, the synthesis of Dickens and Macnish carry the significance of a conjoined unity of thought spanning English culture and science of the 1830s through until the early 1850s. Thus, Kroker's

portrayal. An "education in the art of sleeping" is patently absurd because sleep is "the least specialized thing we do" (2), according to Greaney.

conscripted of Dickens centres on a medicalized hermeneutic in which the novel reflects the larger historical framework for the constitution of sleep as a proper object.

The Rhythms of *Hard Times*

For Kroker, Dickens operates as part of a unity with the concerns of extant sleep research. It was his appropriations of Macnish's phrenological studies of sleep, in particular, that provided the opportunity to read such a parallel in terms of the extension of sleep science into popular culture. The difficulty with this approach lies in the manner that it reductively reads Dickens through a medical lens and thus as part of his reductionist approach to the history of sleep science as the coming into being of sleep as an object. Greaney questions this urge to medicalized interpretation by noting that Joe in the *Pickwick Papers* could just as easily be read in terms of an "insolent minimalist" reading (12); that is, as a political indolence.

Neither Kroker nor Greaney deal with the structuring absence of sleep in Dickens. More than a mere biological function, the status of sleep facilitates this aporia by its textual absence as inactivity, which relegates it to an imperceptible background that nonetheless operates as a key structuring agent of social rhythms. Sleep as a continual absent presence marks the rhythms of urban life in his texts. This absent presence is prevalent in Dickens's novel *Hard Times* (1854) in particular, where he presents a polemic against the "fact" men of the era through the targets of Josiah Bounderby and Thomas Gradgrind, each of whom was ready "to weigh and measure any parcel of human nature, and tell you exactly what it comes to" (5). Dickens's "fact" men summed up what E.P. Thompson depicted as the spiritual and intellectual morass of an era dually defined by an anti-intellectual Methodist discipline of life, and the utilitarian embrace of useful knowledge within industrial capitalism (1963/2013, 406, 812).

These conjoint elements of an overweening productivist logic find their clearest expression in Gradgrind, a father of two, who carefully and steadfastly imposed a rule by fact and the elimination of “fancy” in his children, while Bounderby extolled the same philosophy on his factory workers. John Stuart Mill, in his *Principles of Political Economy*, refers to this process of moral refinement as the fixing and embodiment of utility in humans, “which render them serviceable to themselves and others” (Mill 1848/2004). Utilitarian logic thus centres on the pedagogical task of not only imbuing individuals with productive skills, but of refining and shaping each aspect of the human in all of its activities and expressions (1848/2004, 42).

Gradgrind’s pedagogical approach mirrored the disciplinary structuring of the landscape of Coketown, and the productive refinements of domestic space. While the rhythms of Coketown (developed below) feature an industrial regularity tied to the factory, the Gradgrind house was a “calculated, cast up, balanced and proved house” (Dickens, 13) with an equal number of windows on each facing and a garden drawn up with the regularity of the Palace at Versailles. As Dickens was narrating the relationship between the rationalization and regularization of space as part of a system geared to the overall refinement and disciplining of the individual, Victorian era England was itself in a process of sequestration of sleep within bourgeois domestic spaces. The development of the privatized bedroom, separated from social activity and assigned the dual function of personal sanctuary and reproductive space, was a key transformation in the bourgeois, and eventually working-class, home. Tom Crook’s history of sleep in Victorian England points to the role of this now segregated space in the “moral, mental and physical regeneration of the family” (2008, 21). The development of this private space ushered in new forms of consumer investment in “lavish” goods and was accompanied by a reorientation of the bedroom to the rest of the house and prescriptions as to the proper kinds of investments, such as

horse hair mattresses (Weatherly 1880, Cited in Crook, 25). The purpose of the project was part of a non-pharmacological discipline of bodies. As is noted by Crook, the overriding “consensus was that the body should be disciplined into ‘normal’ sleeping patterns. The bedroom thus became a space of habit formation” (26).

Gradgrind’s moral and utilitarian molding of his children along with the rationalized layout of the house thereby form part of a functionalist system in which both the external and internal features of domestic space were rationalized and regularized in the creation of the ordered modern subject. At once a space for the preparation of the subject for daily life and a retreat from the incessant whirl of the negative impacts of modern life, as witnessed by Louisa’s escape from her stifling marriage to Bounderby to her childhood bedroom, the Victorian bedroom was the primal scene of the self.

More succinctly, this new primal scene thus represented a technology of the self that was central in the production of what Foucault calls “docile bodies.” The development of the segregated bedroom as a site of the production of the self was a form of enclosure and distribution of bodies in domestic space. More significantly, the sequestration of sleep and the attendant reproductive forms of activity assigned to that space derived its logic from a pastoral impulse, in which the monastic cell offered a form of solitude and a functional site of self-management (1975/1995, 143). This segregated space thus operated as an extension of utility into spatial arrangements of the dwelling, whereby the manipulable body enters into a spatial arrangement that further opens up an analytical space of surveillance to render bodily performance sufficiently problematic and in need of recounting in the mill of speech (1975/1995, 135). The analytic of the bedroom opens a defined space of sleep that forms the basis of the

objectification of sleep in sleep science: sequestered sleep is the ontological ground on which the scientific gaze looks upon the *sleep of others*.

Dissolution and Reconstruction of the Boundaries of Night and Sleep

Emerging from this new pastoral form of disciplinary care, the utilitarian subject enters the city and its daily routines. These routines in turn, were laid out such that each street was like any other and the character and the movements of its inhabitants were similarly alike. The monotony of the machines in the factories thereby mirrored the monotony of the milieu as well as the monotony of the rhythms of the inhabitants as they went to and from work (Dickens, 13, 26). It is in this regularity that we see the disciplinary capture of the working population as a complement to the education of bourgeois children and domestic spaces of bourgeois life. Crook notes the celebratory rhetoric linked to the presentation of the working-class house at the 1851 Exhibition in Hyde Park, thanks to its provision of separate bedrooms (the ideal working-class home had 3 bedrooms to facilitate the separation of parents from children, and of male and female children, (2008, 28)). This marked a significant transformation of domestic space from the representations of working-class districts by Friedrich Engels in 1844 (1844/2009), yet the home of the working-class hero Stephen in *Hard Times* presents a more dilapidated space of confusion through his one room apartment. Thus, while Crook focuses on the transformation of domestic space and the functional spatialization of sleep, what *Hard Times* points to is that the discipline of labour was part of an overall application of a disciplinary apparatus to the spatialization and condensation of a functionalized modality of sleep.

The regularization of urban rhythms in Coketown point to the presence of a time-based disciplinary regime of which the spatialization of sleep represented a hygienic reorganization of

the milieu. As noted by Foucault, the organization of space represents a disciplinary regime that distributes its elements, while security plans space as a sequence of events that integrates elements (2007, 20). The disciplinary organization of a space normalizes bodies through the production of patterns of activity in regulated space, while simultaneously separating out the normal and abnormal through a medicalizing discourse premised upon models of surveillance that take hold at the level of the population (56). That is, while the new design of domestic space was geared to the production of the organized subject ready to be integrated into a functionalized regime of industrial activity, the arrangement of institutional spaces and the arterial connections between them established a means of a time-based movement between functions. Translated, this means that the pursuit and development of sleep as an object occurs in and through this background, a “*positive unconscious* of knowledge: a level that eludes the consciousness of the scientist and yet is part of scientific discourse” (xi emphasis in original).

The imposed regularity was therefore more than just a science of labour, a nascent Taylorism, through town planning, geared to the maximal extraction of labour power. Nor was it the mere function of the time clock in the factory imposed upon the biological rhythms of sleep. Rather, the regularity of rhythms served as a normalizing counter-discourse of social order geared to the production of an organized and orderly social structure articulated to diurnal rhythms. This counter-discourse embedded within urban rhythms addressed itself to the dissolution of the former social boundaries that defined alternations of day and night in pre-capitalist Europe. This counter-discourse contained in the normalization of sleep and the adaptation of bodies to this functional regime, however, was no moralizing affair. Rather, it took hold in and through the organization of capital and thus preceded the dissolution of boundaries that has been the cause of so much consternation with modernity. Insofar as this prior counter-

discourse presented itself as the very premise of the consolidation of sleep within a functionalist regime, it was the basis upon which the negative conception of modernity took hold.

The pastoral order that this counter-discourse displaced was predicated upon a clear delineation of night and day, and the types of activities appropriate to each. Prior to the advent of capitalist modernity and its processes of endless expansion as outlined by Karl Marx, “[n]ightfall, in the view of secular and ecclesiastical officials commanded a close to hours of daily toil.” This was due to the inherent risk of activities undertaken in the dark and because “[d]arkness mandated that the profane demands of the visible world be forsaken” (Ekirch 2006, 59). As Roger A. Ekirch notes in his history of the night, nighttime served the ecclesiastical demand to extricate the self from the productive labours of the visible world. Night was part of a sacred order that included sleep, but was more expansively understood as a complementary time structure that established a form of pastoral care centred on individual and social harmony. The result was that the pastoral world formed a comprehensive social order that established boundaries that protected sleep and prevented its domination by conscious, wakeful activity of the productivist logics of the daytime world of light. The question then, is, what is to be made of a modern world that positions itself as the wakeful transcendence of the pastoral and thus the liberation of sleep from its secure, ecclesiastical boundaries? And how does the modern recalibrate and reorient sleep in a more flexible time regime? The answer to that comes in the form of intensification as well as the oft-noted adaptation to rigid institutional structures. As the functionally oriented models of biological materialism took hold in the 1860s, along with their social metaphors and hierarchically subordinated bodily and social systems, disciplinary ideologies such as utilitarianism worked to produce a tripartite division of the day with assigned

periods for each function including sleep. Liberated sleep was devolving into a socially mediated, surveilled, and spatially organized form of time practice.

The oft-cited compression of sleep into consolidated blocks in the modern era due to exposure to artificial lighting, is discussed by Ekirch via Ralph Waldo Emerson's *Berlin Becomes a Metropolis* (1868): "[s]ince the invention of gaslight, our evening life has experienced an indescribable intensification, our pulse has accelerated, nervous excitation has been heightened" (2006, 334). The transformation towards intensification began in the eighteenth century, when nighttime amusements served as a means to distinguish "elites from social subordinates, consigned by necessity to their beds in the early eighteenth century" (2006, 211). By the end of the century one theatre critic noted that "nightly entertainments, which used to begin at six in the evening are now begun at eight or nine" (328). Dickens, in turn, makes the night a site of intrigue and clandestine meetings. Expanding leisure time and conspicuous consumption were mutually dependent on new gaslight technologies and, ultimately, electric forms of lighting, but they were also dependent upon the emergence of leisure as a distinct form of activity separate from, but in service to, productive activities.

Improvement and broader deployment of lighting technologies only further intensified this process by the late nineteenth century.⁶ Of particular note here is Georges Seurat's *Parade de Cirque* (1888). His work not only portrayed the role of lighting in street entertainment, but his collection of twelve distracted bourgeois persons at the bottom of the frame repositioned the central musical performer in the role of Jesus in Leonardo da Vinci's *The Last Supper* (1495-8). Seurat's painting thereby portrays the expanding intensification of nighttime activity as not only

⁶ See W. Schivelbusch (1995) pgs. 96-99 and R. Ekirch (2006) pgs. 330-36 for discussions of the role of new lighting technologies in systems of surveillance to secure an expanding property regime, and the light smashing activities of the working classes.

a move into the night by conscious, wakeful activity, but as a direct profanation of a former sacred order. As Seurat's painting implies, the ecclesiastical command was dissolved in its transposition to entertainments on the streets of Paris in the late nineteenth century, and thus the dissolution of the ecclesiastical boundaries followed from this intensification of nighttime activities.

Ekirch's citation of Emerson initially seems to confirm standard readings of modernity as anxiety inducing and an extension of waking, conscious activity into the night, and thus a dissolving of the ecclesiastical order that once protected the night as a protected realm for sleep. It is this loss of the protection of the boundaries of sleep that is central to the critiques of modernity as a usurper of sleep rhythms. However, the consolidation of sleep and the intensification of activity during nighttime hours emerge from the same context. The attribution of consolidated sleep, a basic premise of the sleep sciences, emerges in a context of generalized intensification of activity.⁷ If the emergence of profane activities and consumerist practices into the formerly protected period of the night, then the intensification of activity confirms rather than denies the presence of a reformulated pastoral order of sleep in the modern world.

The usurpation of the old secular and ecclesiastical doctrines of the Medieval era founded upon alternations of day and night, profane and sacred, undermined the pastoral order of that system. As these activities gradually transformed in the eighteenth century, moralists such as Jean-Jacques Rousseau rushed to assert that "God does not agree with the use of lanterns" in order to stem the tide that threatened morally sound cities such as Geneva. The "conviction that

⁷ Numerous studies of the impact of artificial lighting on sleep note a flattening of the form of sleep (Roenneberg, 2014), as a general pattern in a population. However, the assertion that the consolidation of sleep is solely due to the introduction of artificial light with the tungsten bulb in 1913 assumes a hermetic, causal relation in a context involving other variables. These include a significant transformation in the expectations and moral economy of sleep, as well as its architectural and spatial expression, that predated widespread use of lighting technologies.

darkness represented an inviolable period of time, an interval as sacred as it was dangerous” (Ekirch 2006, 74) reappeared as a moral system designed to rein in the shifting social order. Whereas a cosmic order buttressed by secular and religious authority had regulated and delimited activity to the hours of daylight, the new capitalist era treated the boundary of the night as a limit that could be circumscribed and transcended.

It also grounds the dissolution of boundaries in the evolving conceptions that conjoin the division of labour with the biological body. As the counter-discourse of daily rhythms articulated in Coketown in Dickens’s *Hard Times* and the advancing technologies of segregated domestic space attest, the rhythms of sacred and profane as a regulating principle of night and day transformed into a functionally defined social order bound to, or grounded in, a functionally assigned internal biological order. Sleep became an activity, rather than its negation, with an assigned but flexible position within a twenty-four hour regime, one that was based on an intensification of the division of time through assigned blocks that were heterogeneous to one another. Thus, Kroker’s contention that the shift to recognizing sleep as an activity represented progress in the overall recognition of sleep as an object was a case of misrecognition. Instead, the shift to sleep as an activity was tied to the ongoing metaphorical readings of biology and the social realm through the other. The day was divided on a tripartite schema on which productive activity was the foundation, which wakeful reproductive activities of consumption and leisure were complemented with the unconscious reproductive activity of sleep.⁸

⁸ Jim Horne notes in *Sleepfaring: A Journey Through the Science of Sleep* (2006) that the transformation of sleep from the two-sleep model of the Medieval era to the consolidated pattern of seven to eight hours is likely an industrial product. While artificial lighting is often cited as a means to explain consolidation of sleep, as well as its perturbations, Horne’s point notes that consolidation likely predated the invention of the incandescent bulb in 1911 (Horne, *Sleepfaring: A Journey Through the Science of Sleep* 2006).

Dickens's *Hard Times* makes apparent the mobilization of disciplinary apparatuses of education, commerce, and the family, that stepped in to grasp these liberated bodies in order to regulate their behaviours, which were based on the aggregate form of the patterns presented by industrial organization. Rather than moralize on the importance of a sacred nighttime interval, these disciplinary apparatuses complemented a social regime tied to labour with a governmental logic of self-care embedded in the social system. To subordinate oneself to the system would therefore ideally assure that each functional element adapted to its allotted place in the structure, regardless of whether one's shift occurred during the day or the night.⁹ Sleep as a consolidated activity of eight hours was the foundational assumption of this model, which was then imported into the sleep sciences. What this meant was that a governmental logic sought to take hold of the interiority of the self in order to impose a regime that tied the division of labour to a twenty-four-hour clock rather than the alternating cosmic rhythms of night and day. Sleep then operates as part of a systemic cadence within the new abstract time of the twenty-four hour day shaping the urban capitalist milieu and defined by the conjoined discourses of utilitarianism and Methodism/Protestantism.

Disorderly Bodies: Surveillance, Confession, and Normalization

Within this context of a utilitarian taking hold of the interior of the body, the corresponding spatialization of sleep, and the rhythmic cadences of urban industrial life, is the question of the eruption of disordered bodies manifest through concerns with fatigue and insomnia. Victorian era literature relied upon the melodramatic waning of affect and of energy as a means to

⁹ Nathaniel Kleitman's early research on sleep at the University of Chicago noted that individuals engaged in night work underwent an inversion of their bodily rhythms, thereby indicating an adaptability of the body to the environment. Kleitman concluded that bodily rhythms were "not cosmic," but were instead adapted to activity which *may* "coincide with night and day" (1963, 82).

articulate disorderly bodies. Nietzsche, in *Thus Spoke Zarathustra*, argues that endemic malaise is the condition from which hinterlands are themselves produced. His contention is in direct contrast with Dickens's contention that the hinterlands are an atavistic presence of sleepiness in the new industrial order. For Nietzsche, "[w]eariness that wants its ultimate with one great leap, with a death leap; a poor unknowing weariness that no longer even wants to will." The introduction of the "body that despaired of the body" (1883-5/2006, 21) foregrounded the appearance of fatigue alongside other nineteenth century moral panics such as degeneracy. The mill of speech centred on sleep thus takes shape through this Victorian era concern with the waning of effect and energy.

Thompson sums up the problem as it appeared in nineteenth century England in the imagery of the immiseration of workers reported by R.M. Martin who, in giving evidence to the Hand-Loom Weavers's Committee of 1834, saw a deteriorated urban landscape that had resulted in a general loss "of animation [and] vivacity...[workers] have become a sordid, discontented, miserable, anxious, struggling people, without health, or gaiety, or happiness" (1963/2013, 486-7). Fatigue thus arose alongside degeneracy as a heightened object of concern and was tied to the labouring process.

Anson Rabinbach's volume on nineteenth century fatigue referred to this as the "corporal analogue of the second law of thermodynamics, diminishing the intensity of the energy converted in the working body, tending toward decline and eventually, inertia" (1992, 133). Consumed with questions concerning the waning of energy in humans and society as a whole, the physiology of fatigue of the latter half of the nineteenth century accordingly reduced sleep to a simple restorative process that followed the exertions of the labouring day (Kroger, 207). For this reason, Kroger describes most concerns with fatigue as an often misdirected, Marxian

concern with the wearing out of bodies in the labour process. The objective of fatigue studies, and parliamentary investigations into the condition, was thus to secure methods of integrating bodies into industrial processes in ways that minimized physical exhaustion. These discourses thereby constituted a pathological discourse of bodies as the misdirection or waning of energy. So, while the utilitarian order expressed in *Hard Times* develops a counter discourse or normalization that was geared to the regulation of sleep through urban rhythms and the spatialization of sleep within domestic space as part of a regime of time, the sleep sciences emerged alongside the proliferation of these fatigued bodies. Its purpose was to manage the manifestation of disorderly rhythms within the population.

For Kroker, fatigue was restricted by a too often limited conception of embodied effects of labour, with sleep acting as a simple restorative. Fatigue studies of the nineteenth century, as well as more recent texts such as Rabinbach's, offered Kroker no direct theory of sleep or refined its status as an object. The problem of fatigue, however, points a question of how the sequestration of sleep in a functionally segmented day intersected with the biopolitical management of populations. Attending to these discourses, rather than relegating them to a realm of inadequacy in the project of delineating sleep as an object, is the purpose of the final portion of this chapter.

Enter the Insomniacs: Sleeplessness in Victorian Sleep Science

The significance and function of fatigue as presented in Victorian English literature foregrounds the question of the situation of sleepiness within its regime and the range of biopolitical responses to the accumulation of discordant bodies. That is, fatigue conjoins both those who struggle to sleep and those simply getting inadequate sleep: each forms a locus within a

constellation of arrhythmic and ultimately unproductive modalities. The production of fatigue, in particular, occurs through a time-based social order that appears as an effect of the division of labour and the concomitant assignment of productive and unproductive (leisure) activities within the structure of the day. This time-based order assigns bodies to places directly through the labour process, while the milieu produces the ordered patterns that shape Dickens's text.

In turn, technologies of sleep are arrayed in their moral, spatial, and educational structures, each of which is naturalized as it is grounded in the biological materialist ethos of the citizen-organ. Biological metaphors that drew from conceptions of society are now turned around and deployed socially to subordinate each autonomous individual to the larger system. The result is that the metaphorical reading of the internal organization of the body in the social terms of the division of labour now reverses itself in order to anchor the social division of labour in the biological body.

The question remains, however, as to how this social order links together time, the division of labour, and rhythmic cycles of sleep and wakefulness to normalize the rhythms of the population. While the social order works to shape and integrate bodies into this regime, discourses of fatigue contribute to a proliferating discourse of bodies and their disfunctions. This discursive constitution of disfunction and disorder then become the target of disciplinary regimes of correction and integration. In the literary model of fatigue, we have an indictment of the labouring process as well as the entire social order through the death of figures like Stephen Blackpool and the hysterical retreat into her childhood bedroom by Louisa Bounderby. The various forms of labouring or hysterical fatigue that Dickens represents, in its specifically gendered forms, is the symptomatic presentation that the sleep sciences attempt to capture and renormalize. What becomes apparent in fatigue discourse, then, is the invisible structure of time

that structures the background of life through the milieu of the city, and the manner in which it serves the basis of a new pastoral order that governs and responsabilizes individuals.

With the working classes of Coketown, we see a standard portrayal by Dickens of men desirous of physical relief and spirits (29), which follows Thompson's description of those involved in heavy labour who lived a life that alternated between "intensive labour and boisterous relaxation that belonged to pre-industrial labour-rhythms" (1963/2013, 473), and, invisible to even Thompson's text, sleep. Beneath this prototypical representation of fatigue as a wearing away at the muscular energies of the working population, a fatigue that necessitates boisterous leisure (from the perspective of the workers) and rest (from that of the moral entrepreneurs in the bourgeois classes), we are forced to confront the dispersion of discourses of fatigue. While nineteenth century studies of fatigue by the likes of Angelo Mosso (*Fatigue, 1891*) and the chronophotographic method of Jules-Etienne Marey focused on the act of labour, it is in the depiction of tension disorders, nervous exhaustion and escape (including Louisa in *Hard Times* and Joe's anti-labour indolence in *Pickwick Papers*) as developed in the works of Dickens and Thompson where we see the dispersal of fatigue as a constituent element in Victorian era English capitalism.

It is in the articulation of fatigue to political economy in Dickens's narrative that we find the significance of sleep and its disorders. The production of fatigue discourses from disordered subjects was itself an effect of the incitement to discourse that lies at the heart of the processes of the objectification and subordination of sleep to the productive process. What that means is that the truth of sleep was produced not only in the disciplinary production of intensified forms of activity in a newly arranged, functionalist day, but also in the ceaseless incitement to discursively produce its pathological forms. To naturalize and objectify sleep as a performed activity

grounded in biology is to establish norms that define disorderly bodies and to provide a foundational logic for the institutions and modes of intervention that rely upon a surveillance of sleep that includes confessional analyses offered in clinical spaces.

Kroker notes that Mosso flatly rejected Marxian notions of fatigue as being inevitably tied to physical exertion. While Mosso argued that there was individual variability in the onset of fatigue, he also observed that fatigue tended to increase rapidly the longer the process of work lasted. Mosso's conclusion was shaped through evolutionary thought, such that these "apparent imperfection[s] of the body" were actually mechanisms of self-protection. Supplanting Marxian labour studies with evolutionary science, Kroker concludes with Mosso, "[p]sychology, physiology and even historical analysis were beginning to converge around designs for the amelioration of human existence through scientific research" (110). Fatigue had become part of a nexus of the biological body and labouring processes within an overall technocratic form of social organization. What we are dealing with, then, is the question of a biopolitical declension at the heart of the study of fatigue. As Kroker notes, Mosso's study was undertaken with the evolutionary and eugenic objectives of extending physiology (or, neurology for Kroker) "beyond the medical realm to the classroom, the factory floor, and even the political arena" (110-1). This biopolitical project necessitated understanding how different technologies emerged to manage this sphere, and how it became a binding feature of the social structure. In turn, its findings served as a technology of the self to be deployed in the targeted management of populations, providing an origin for sleep discourse rooted in biological and evolutionary thought.

Discourses on sleep in the nineteenth century, spell out the normative so as to understand the increasingly prevalent complaints about its interruptions. Specifically, and intriguingly, Kroker notes that Samuel Johnson's 1755 *Dictionary of the English Language* makes no mention

of the word insomnia. In its place, the language deployed was steeped in the older terminology of sleeplessness, which lacked negative or pathological attributes. It was not until James Murray's 1884 *Oxford English Dictionary* that insomnia made what Kroker calls "a definitive reappearance," which occurs in the same year as the appearance of homosexuality highlighted so effectively by Foucault. A relative "flurry" of use in the 1880s came to refer not only to sleeplessness but to pathological conditions linked to manias and circulatory problems, thereby linking insomnia to the poor performance of a bodily function (Kroker, 78-9). The nascent sleep sciences, while unable to adequately define sleep as an object, were thus established as a means for the extraction of discourses of sleep and for the application of technologies geared to its harmonious integration with the naturalized sleep regime of industrial capitalism. Yet, as Jim Horne notes, insomnia at this point remained something one "had"; it had yet to form an identity. As the condition was medicalised through campaigns against the use of drugs in non-prescription medications from the likes of the British Medical Association, insomnia transformed into a noun and complainants could be "diagnosed as 'insomniacs' in their own right, rather than as someone having insomnia" (Horne, *Insomnia - Victorian Style* 2008, 911). While Horne attributes this shift in diagnostic linguistics as progress, the result is that late-nineteenth century sleep discourses need to be read not only for their consolidation of sleep as an object, but also the creation of an identity for those deemed morbidly disordered.

The question, then, is how did insomnia discourses develop in the 1880s and 1890s? In contrast to Kroker's text, which focuses on key developments in the constitution of sleep as an object, Nathaniel Kleitman's classic text *Sleep and Wakefulness* references every publication dealing with sleep up until that time. In Kleitman's text we can therefore locate examples that show the specifics of how disordered sleep came to be a concern in late Victorian culture and

science, rather than reading for its constitution as an object. These texts often present themselves as stereotypical examples of the kind of pseudo-science and quackery often attributed to pre-medical and scientific forms of inquiry. For example, in 1881 Dyce Duckworth, M.D. ventured to describe the relation of insomnia as “hepatic derangements” that linked gout to insomnia because of the former’s impact on the vascular system. The sufferer of hepatic derangements may fall asleep without a problem, only to find that their “sleep is rudely interrupted...and he is at once aware of uneasiness in the stomach, has heartburn, or flatulence, and perhaps nausea.” This disturbance of sleep will result in wakefulness accompanied by headache and an “active flow of thoughts for an hour or two” (146-7). Duckworth’s description details a reduction in the capacity of the digestive system in sleep leading to an “excess of uric acid circulating in the blood” (150-1). Duckworth thereby extends the cerebral hyperaemia diagnosis of William Hammond to argue that gout represents a special morbid state that produces the nervous symptoms that trigger conditions such as insomnia.

The proliferation of these discourses included such sagely editorial advice as the consumption of a biscuit or buttered mashed potato to secure sleep (Editorial 1889) to resettle the digestive system or to simply “live more quietly” (Editorial 1894). Whether it involved a long walk, rubbing lotion on the temples, counting, going for walks or taking hot or cold baths, the editorial writer proffered a further tip gleaned from the Glasgow Herald: the yellow soap cure. Here, one soaped the “head with ordinary yellow soap; rub it into the roots of the hair until your head is just lather all over, tie it up in a napkin, go to bed, and wash it out in the morning. Do this for a fortnight. Take no tea after 6 p.m.” (719). Others, such as M. Charteris, M.D. (1895) had a patient take pills with mercury and podophyllum at midday and a chlorobrom dose at bedtime to restore sleep.

To arbitrarily close this list of examples, there are two essays in books on sleep from Henry Lyman in 1885 (*Insomnia: and other Disorders of Sleep*) and Sir James Sawyer in 1904 (*Insomnia: Its Causes and Cure*). Lyman's text is a straightforward articulation of the autonomous will to sleep that purportedly will "overcome all opposition" (1885, 7). Others were subject to mental fatigue, which, following Mosso, carried with it increased blood flow (1885, 16-17). Sawyer's text notes that sleep is a function of life, and life is a function of sleep, that forms an appetite or chorus of living harmonies (Sawyer 1904). To overcome the stresses of work and the worry it produces, entailed simple tasks of taking a holiday to change one's scenery, or daily exercise in open air in order to cultivate a desirable sleep pattern (1904, 52, 58). It would be too easy to relegate these texts to pseudo-science and self-help. What these and the other texts cited by Kleitman testify to is a proliferation of concerns with disordered sleep and the emergent consolidation of clinical spaces geared to the production, capture, and regularization of disordered swaths of the population. Sleep was thus not only taken hold of as an object situated within disciplinarily organized spaces, nor was it merely the functional effect of a biologically grounded social division of labour. Sleep was a biopolitical object, replete with clinical spaces geared to capturing irregularities that dissipated energies, which it captured through burgeoning fatigue discourses.

Time, Labour, and Sleep

What lurks in the discourses of scientific objectification and in the social scientific study of workers and their struggles with sleep is the relation between the division of labour and time. Rather than situating sleep as coming into conflict with the institutional ordering of the day or the technologies that extend daytime activity beyond the former constraints of the night,

questions arise about how the day is organized, densified, and functionalized in and through labour time. In classical economic terms, Adam Smith established the division of labour as a necessary, and gradual, end of human nature (1776/1986, 117). Smith put forth two primary features of the division of labour as the quantity of labour that it puts into motion according to the diversity of employments (1776/1986, 459), and the concomitant ordering of “the whole of every man’s [sic] attention comes...to be directed towards some one very simple object” (114). Smith credits the division of labour with the capacity to increase the pace of improvements of the condition of humanity, and the division of labour with the capacity to take hold of the body and to direct its movements and energies through its constitution of the subject as a figure defined by the twin features of attention and energy.

Smith’s assignment of productive labour as an end of human need was later expanded upon by John Stuart Mill, whose *Principles of Moral Philosophy* (1848) initially restricted productive labour to “those kinds of exertion which produce utilities embodied in material objects” (30). Mill, however, expands his definition to include those activities that enhanced the abilities of productive labour. Unproductive labours included such things as caring for the sick, unless those restored to health were unable to return to productive labour (31). Mill’s stark productivist focus, in keeping with his utilitarian ethos, did, however, make room for the importance of unproductive labour. Insofar as unproductive labour produces a “permanent benefit” (31), it may serve as important a role as productive labour. The key seems to lie in the distinction between expansion of “permanent means of enjoyment” over a frivolous expense of “immediate enjoyment” (31). Thus, any form of social relation geared to something more than frivolity serves a function in the overall division of labour, and its concomitant aspects of consumption,

and even serves as a recognition of the overall greatness of a nation that could dedicate itself to such enjoyments.

What Mill describes, then, is a system predicated upon labour and its mobilized and organized productive activities. While excessively vague in his depiction of unproductive labour (it would seem that Louisa's role as wife to Bounderby, replete as it is with domestic labourers, still has the potential to avoid Mill's approbations), what we have is a determinate form of social practice. While Mill's definition of productive labour operates primarily as a means of assigning a binary system of value to social activity, Karl Marx's analysis highlights the fact that "labour in capitalism plays a historically unique role in mediating social relations...production in capitalism is not purely a technical process; it is inextricably related to, and molded by, the basic social relations of that society" (Postone 1993, 16). Mill describes as a system of productive labour and its reproduction not only of the direct labours of the working population, but a whole apparatus that involves education, the family, and religion in the disciplining, moral inculcation, and training of a labour force. Mill's analysis of the division of labour highlights the manner in which the productivist ethos extends far beyond specific acts of labour that were central to the fatigue studies of Mosso. The utilitarian focus on the refinement and direction of productive activity works to take hold of and direct the energies of each body as outlined by Smith, along with their methods of management and restoration.

If, as with Mill and following from Smith, the capitalist social system geared to the accumulation of wealth is itself predicated upon the mobilization of labour by capital, and this system extends through the notion of productive labour to include reproductive activities geared to securing productive labour, then the disciplinary apparatuses that support and sustain the system become the ontological foundation of the rhythms it effects. What we are faced with in

the intensified time constraints of industrial capitalism and its restructured, rationalized, and expanded workday, is the mediation of not only social relations and the direction of social activities geared to productive activity, but also their situation within a new, functionally oriented regime of time and its extension through space. The organization of time and the constitution of what Moishe Postone calls the bourgeois day occurs in the shift from what he calls concrete time to an abstract form of time, by which forms of capitalist valuation that “expresses both a determinate form of social relations and a particular form of wealth” (1993, 24). What labour does, through its assignment of value to activities directed towards the production of surplus value, is to constitute a “category that reveals the historical specificity of the forms of wealth and production” (1993, 26). Thus, for Postone, the value relation establishes a form of domination not of workers by owners, but by “abstract social structures that people themselves constitute... [and these] structures that dominate people is what induces a rapid historical development in the productive power and knowledge of humanity” (1993, 30).

Postone’s study of Marx highlights the need to understand how these relations are mediated through abstract forms of time geared to the production and naturalization of Smith’s conception of goal directed, attentive activity of subjects oriented to, and thus foreclosed within, a relation to defined objects. This brings us into proximity with the articulation of intensified forms of sleep in modernity as the productivist division of the day. The constitution of an abstract form of time, one that no longer affirms the ecclesiastical boundary that protected sleep as a form of inactivity during the night, allows for a mobile, adaptive structure of time into which sleep is inserted as a reproductive activity that forms an ontological ground of the production of value.

When sleep takes its place as a bounded activity within a social order where it is no longer subject to the ecclesiastical protections of the night, it is subject to a new, modern pastoralism of sleep. Here, sleep assumes a role as a natural expression of a functional block of time in a tripartite division of the day (productive labours, social reproduction including the extended forms of productive activity outlined by Mill as well as consumption and leisure pursuits as restoratives for fatigued bodies, and individualized reproduction of attentive energy through sleep). While the dominant form of this expression appears through the rhythms depicted by Dickens in the everyday life of Coketown, the abstract form of time lends itself to not only the demands of an expanded form of production as it moves into the night and thus to a mandated form of bodily flextime. The result is a complex articulation of sleep within the overall regime of value-based productive activity, and to the allotment of time and the disciplinary apparatuses geared to the production of attentive subjects with their attendant energies.

The specific structure of this form of abstract domination took shape through the transformations of time in late Medieval Europe as commodity capitalism took hold. Medieval Europe structured itself through what Postone calls “concrete” time. This form of time derives from and was “understood through, natural cycles and the periodicities of human life” (201). More than mere cyclical time, which is central to the work of Henri Lefebvre (1991), concrete time operates as a dependent variable “based on events...or on temporal units that vary” (201). Postone notes that this form of time probably emerged in Egypt and was shared and in use in the Islamic world and the Far East, and in Europe until the fourteenth century. The variable time units of concrete time meant more than just a society grounded in cyclical repetitions tied to a cosmic order. Rather, each day and night were divided into a fixed number of segments of

variable length. The result was that each day included twelve hours of daylight and another twelve of darkness, regardless of their seasonal variations.

Thus, when writers such as Kroker and Ekirch note the history of the two-sleep method of the pre-industrial era, wherein people experienced segmented blocks of sleep during the night, one question that remains unnoted in their works is how these hours were constituted. To speak of a two-sleep model in which people tended to sleep from nine o'clock in the evening until one in the morning loses its transparent meaning when reading back into a variable time structure that neither references in their discussion of the two-sleep model. In the transition to the abstract time of modernity, as the Enclosure Acts, agricultural improvement, and, ultimately, the factory system took hold, a new logic of "time thrift" emerged. Thompson (1967, 83) cites the 1755 pamphlet *Friendly Advice to the Poor* by the Rev. J. Clayton to note that the equation of time and value, or money, became a clarion call for a Protestant culture and its discipline of the poor. To waste time in indolence was to enact one's own poverty. This hostility to indolence installed an ever-increasing disciplinary apparatus concerning time, which instituted the sleep machismo of Methodists such as John Wesley who arose every day at four a.m., or so the legend goes, and who admonished his pupils that luxuriating between the sheets left the body "parboiled...soft and flabby...[while] the nerves were unstrung" (Wesley, cited in Thompson, 1967, 88).

While the moral strictures of the Protestant ethic concerning the productive deployment of activity and its use of time are well established and indolence discourses faded with the emergence of fatigue discourses in the late nineteenth century, the establishment of a Calvinist influenced "order of living by which each man understands the duties of his position" (Tawney 1926/2015, 126), meant that religion and education in England became the ideological and cultural basis for the implementation of a new regime of time that extended far beyond the

labouring masses. Thus, while Medieval time was Church time for Postone, and part of a sacred order as articulated by Ekirch, the transformations of time originating with the town bells summoning people to work in the fourteenth century finds its abstract formulation as a disciplinary apparatus as part of a functional division of time in the Classical era.

The homogenous, empty time of capitalism was structured on a radically different premise than concrete time, insofar as it was uniform and directional. As noted by Lewis Mumford in *Technics and Civilization* (1934), the essential feature of the clock was that it “dissociated time from human events and helped create the belief in an independent world of mathematically measurable sequences: the special world of science” (15) As such, the definition of sleep as an object in Kroker’s historiography takes as its unacknowledged prerequisite the formation of this abstract form of time and the development of technologies geared to its measurement and parcelling out, as witnessed in the metronomic tick-tock of Gradgrind’s clock in *Hard Times*. Mumford notes the central importance of this dissociation of time to the mobilization of labour: the clock was a source of “power and the transmission of such a nature as to ensure the even flow of energy throughout the works and to make possible regular production and a standardized product” (15). Mumford’s point is key: the construction of abstract time was directly calculated as a means to regulate the flow of energy even as it displaced the former ecclesiastical system based on boundaries protecting restorative time. This time formed a system of hours that grounded the temporal organization of what was the newly reconstituted and reconfigured day of the town dweller (Postone 1993, 208).

The abstract nature of clock time is highlighted, for Postone, in the selection of the zero hour at midnight. Removed from “perceptible transitions of sunrise and sunset...[i]t was the standardization of this abstract zero hour which completed the creation of...the “bourgeois day””

(213). Postone concludes that, although this time was social in origin, “time in capitalism exerts an abstract form of compulsion” (214), one removed from the tenets of religion. Rather than merely being an expression of the measurable time involved in direct, productive activity geared to the creation of value, time becomes a separate category wherein “time expenditure is transformed from a result *of* activity into a normative measure *for* activity” (214-15, emphasis in original). Abstract time is therefore constitutive of a sequential ordering of time that intensifies the forms of expression that occur within it, doggedly working to assure a functionalized division of the day and inculcating this through a network of social relations, institutions, and ideologies. In this context of the bourgeois day, sleep retains its normative associations with the night, as witnessed through the rhythms of the industrial town narrated by Dickens, while the emergent patterns form the basis of an extracted rhythm that forms the basis of a new set of regulatory norms that form the basis of a technics of the body distilled in institutional discourses and spatial hygienics.

Thus, a key element in the transformation from variable to constant time is the appearance of a time external to the subject, which exerts its own form of compulsion beyond the inducement to work encoded in the exchange of labour for the means of reproduction. Moreover, the structure appears to us amongst the multitude of signs of perturbations to social order as manifest in the leisure pursuits of Seurat and the emerging cultures of leisure and conspicuous consumption outlined by Thomas Veblen. What this means is that labour is not something that is merely measured in terms of the time it consumes in the creation of a commodity, rather, abstract time *governs* all forms of activity as a visible order constituted out of an apparent chaos of activity and a workday liberated from the confines of daylight. As Adorno derisively noted of the

culture industry, cultural pursuits and entertainment represent a purposelessness “that gives the lie to the purposefulness in the world of domination” (1946/2005, 242).

To say that sleep is a function of a specific duration, as Kroker does, misses how time comes to govern how sleep occurs and how the extension of time into the milieu disciplines subjects, while a new pastoralism of sleep assigns a functional architecture of sleep within abstract time and produces an ever-expanding discourse of the truth of sleep. For example, to say that the intensification of sleep occurred with the arrival of the electric light bulb in the early twentieth century, as suggested in several sleep history texts, misses the manner in which sleep was historically consolidated as part of the transition from variable time to abstract time (see Horne, 2006, who argues that there is no evidence of the historical uniqueness of sleep deprivation in modernity and that the consolidation of sleep in seven or eight hour blocks is likely tied to industrialism rather than technologies such as lighting). As a system of hours, the constitution of abstract time, a time external to the subject and which compels the activity of subjects, saturates the social relations of society. As expressed by Dickens’s *Hard Times*, the very nature of this time entails its formal expression in the built environment of Coketown, whereby the patterns, expressions and locations of compelled activity express themselves in the rhythmic patterns of town life and progressive refinements of space geared to their position in the reproduction of abstract time. It is also given shape by the disciplinary capture of the minds of its children, all set to the seemingly unceasing metronomic reminder of the passage of time by the clock in Gradgrind’s library.

As the time of labour takes shape as an a priori category of regulation, it serves to shape the perceptions of those constituted within it, whether they are the Dickensian sleeper or its intruding observer, or the medicalized historiography of sleep as a fully-fledged object of

observation. With sleep patterns consolidated and normalized, the experience of sleep comes to be understood through the passage of an abstract time separate from the individual subject and unceasing in its remorseless directionality. Thus, Kroker's history of the consolidation of sleep as an object necessarily occludes not only the manner in which it forms a normalizing procedure extracted from the rhythms of daily life and hygienic reorganization of domestic space, but also to the manner in which the consolidation of sleep takes place in the development of functionally organized world of biologically compelled and subordinated citizen-subjects. Compelled to enter an alienated form of time, to appear disciplined and punctual, the dominated subject produces a compelled form of discourse concerning the expression of sleep. With the entirety of time constructed on the basis of productive labour time, the practice of sleep becomes a compelled activity. To be unable to follow this compulsion is to then be situated at the interface of the management of problems in the interface of governmental reason and the individual.

Organization and the Attunement of the Body

In analysing the emergence of spatial-temporal disciplinary structures during the Victorian era in England, I have emphasized the interrelationships of emergent discourses of sleep and sleeplessness. These discourses extend the logic of functionalized sleep within a temporal scheme that is fitted into the circadian rhythms of daily life. These rhythms then take the form of disciplinary regimes that take hold of the reproduction of the individual and the productive process in order to intensify functional forms of activity, including sleep. The discursive regime of sleep thereby refocuses our attention from the objectification of sleep and its putative undermining by the strains of modernity, and reorients us to questions of how the expanding grasp of the interiority of the body is conjointly articulated to the linear social rhythms of

everyday life and the cosmic rhythms of night and day. This reorientation points to the fundamental model of the production of the coherent self in modernity.

Scrivner's work in *Becoming Insomniac* returns us to a historical moment left out of Kroker's text. Scrivner's references the work of the English physician Joseph Mortimer Granville (1833-1900) in 1884 to introduce the idea of multiple forms of sleep (141). Granville's idea was that sleep was a product of multiple bodily systems that maintain their own sleep patterns. Scrivner's primary conclusion from Granville's work is the concept of false sleeps, in which one improperly functioning system results in a wakeful state that "mocks true slumber" (141). Drawing from an already vast field of work on the role of nervousness in insomnia dating back to George M. Beard's introduction of neurasthenia as a primary agent of sleeplessness in 1869, Granville's texts posit the potential for multiple forms of insomnia. Scrivner notes that Granville also creates the potential to call into question subjective accounts of insomnia due to the compromised ability of the mind to engage in self-evaluation given that these systems can now enter sleep independently of each other. By introducing different forms of visceral, muscular consciousness, interlocked with systems of sensation, Granville simultaneously establishes the superior knowledge of the physician and proffers a need for multiple forms of treatment in genuine cases of insomnia in order to target the offending, dysfunctional system.

Scrivner makes use of Granville's work to further his thesis concerning the "suggestible nature of insomnia and its oft-cited propensity to emerge over fears of its emergence" (140-1). He also suggests that Granville's work ignores the previous Hammond-Durham thesis and completely disregarded the hematological explanations of sleep and sleeplessness. What Scrivner does not fully develop is the manner in which Granville's thesis of an aggregation of bodily systems working in harmony with circadian periodicities involves a direct extension of biological

materialism into the social. In a letter to the *British Medical Journal* in 1881, Granville defended the use of hypnotism by Beard because it addressed the “disunity of the mind, its segmentation into various so-called “gangs or parties”” that, in Granville’s words, result in a “state of disorganisation akin to the polarisation of light, and when this state occurs, and while it lasts, there is likely to be a disruption of the normal relations between the centres...which compose the nervous system” (cited in Scrivner 148). Granville redefines insomnia as a polarization of the mind into “independent systems that have similarly fallen out of their prior coherent or harmonious organizational unity.” With this definition, hypnosis offers a pathway of intervention for the mediating efforts of the physician. Scrivner highlights this role that Granville assigns himself as a conductor working to “bring into accord discordant and arrhythmic systems with subtle influence variously applied [whatever that would entail]” (149).

While Scrivner’s focus is on the role of suggestion in the production of sleeplessness, Granville’s psychophysiological synthesis returns us to the founding principles of integration offered by Spencer (see chapter three). When Granville produces insomnia as a misalignment of internal systems with the external periodicities of nocturnal expressions of sleep he is articulating a fundamentally biopolitical impulse in the management of sleep as a social rhythm. This social rhythm and the postulation of subjective disorganization through misalignment fundamentally recasts the notion of insomnia from either a purely physiological or neurological condition to a social problem requiring intervention from the now technocratically invested medical complex. The rhythms of sleep are now an object of concern that does not merely produce sleeplessness by making us worry about sleep. Sleep is fully integrated into the biopolitical management of populations through its concern with the rhythmic reproduction of organized subjects. Sleep is thus a rhythmic property of the coherent, organized, and normative self who is buffeted by all of

these discursive practices geared to secure that rhythm. Discordant or arrhythmic bodies are now identified through this discursive regime as debilitated bodies, assigned a lack, and posed as a threat and target for intervention. Rather than affording us the opportunity to try to harmonize the system by accommodating different forms of chronotype expression, or attempting to deal with hyperactive minds affected hematologically or some other form of contagion, the fundamental question lurking behind these discourses is the constitution of normative, biological regimes of intensified activity within the abstract time regime of capital.

Conclusion: The Burden of Sleep in Organized Capitalism

In her analysis of labour, Hannah Arendt noted that there is nothing more easily mechanized “than the rhythm of the labor process, which in its turn corresponds to the equally automatic repetitive rhythm of the life process and its metabolism with nature” (1958, 145). In Mill’s utilitarian productivist ethos, we find the articulation of a political economy premised upon productive labour, with the attendant attention and energies as outlined by Smith. This significance is borne out in the overall “burden of biological life” which weighs down on human life. What the transformation of labour and time laid out here entails is thus the “worldlessness of *animal laborans*,” that curious creature who does not “flee the world but is ejected from it in so far as he [sic] is imprisoned in the privacy of his own body, caught in the fulfilment of needs in which nobody can share” (118). Arendt concludes, “[u]nder the condition of remoteness, every assemblage of things is transformed into a mere multitude, and every multitude, no matter how disordered, incoherent, and confused, will fall into certain patterns and configurations possessing the same validity and no more significance than the mathematical curve” (267). This rejoinder to the pursuers of an interior space to define the self, one with measurable properties that are so

amenable to the curve fitters of the world, is but a mirage without the necessary work of understanding the construction of time and its implementation of a social order predicated on the labouring process.

As with the metaphorical appropriation of society in the biological sciences, and the organism in the social sciences took hold, a consensus emerged in which sleep transmogrified from a state of repose within a period of inactivity defined by an ecclesiastical order. In its place, sleep was an activity within a functional framework, with a defined purpose of reproduction of the coherent subject with directed and attentive faculties. Sleep retained its articulation with the night, but only as a normative ideal as part of an abstract order of time constituted through the zero hour of midnight. As Canguilhem noted, this consensus became ever more rigid as one ascended from plant to animal life. While Canguilhem argues that it becomes difficult to differentiate between the various metaphorical appropriations to assess the original source, but starting at the beginning of the nineteenth century one sees the fertile ground that the division of labour posed for the imbrication of society and organism. Canguilhem cites the physiologist Henri Milne-Edwards, whose article “Organization” appeared in the *Dictionnaire Classique des sciences naturelles* in 1827. For Milne-Edwards, “the organism was conceived as a sort of workshop or factory [and] it was only logical to measure the perfection of living beings in terms of the increasing structural differentiation and functional specialization of their parts” (2000, 84).

I argue that the anchoring of this functional specialization of the physiology of sleep in the nineteenth century occurs in and through the division of labour insofar as it was tied to the development of the abstract time of the day. As such, the labouring process is not only able to intensify relations geared to the extraction of productive activity (which includes multiple forms of so-called unproductive labour), but it did so through the smoothing out of variable hours into

constant hours, which were then assigned a functional place (typically at night, but always in consolidated blocks of time) in the order of the body. To extract sleep from this context of relations and to then assign it the separate status of an object is thus to lose sight of these dispersions encoded within a time-bound milieu. The primary discourse of sleep was thus tied to the expanding technologies of time and space, and their hygienic organization, geared to producing the regulated body and to extracting their truths from the patterns of society.

Following Foucault's logic for the clinical codification of the inducement to speak, the constitution of sleep as an object of the sleep sciences as outlined by Kroker and celebrated by Horne is predicated upon the entrenchment of a method of interpretation based on the notion that the self is blind to its own being (1978/1990, 65). Unable to understand its own bodily truths, the objectification of sleep offered therapeutic or normalizing interventions (the pluralization of approaches tied to stress disorders, vascular issues, and so on). These interventions produced two linked effects. The first was to establish a truth discourse of sleep that then defined disordered sleep as insomnia, a pathological or morbid condition, and thus established the sleep of the population as a problem requiring these interventions. The second was that its clinical codification of sleep and its disorders brought forth an immense apparatus geared to capturing the symptoms of those suffering through sleeplessness (or excessive sleepiness). While the approaches to dealing with insomnia appeared to vacillate between the bio-physiological and psychological, quackery and pharmacology, these apparatuses of power served to normalize sleep patterns within a non-sacred, twenty-four-hour day. Sleep thus entered into the pastoral care of modern populations, and insomnia presented itself as a core concern of a governmental logic geared to the identification of disorders that sap the vitality of the population and the

concomitant incitement to discourse that resulted in a proliferation of voices and typologies of fatigue related conditions.

Conclusion: The Biopolitics of Sleep

Throughout this dissertation I have worked to demarcate the operative forms and uses of insomnia and sleep as they are situated within the overall organization of contemporary neoliberal society. The insomniac appears as a figure of stress and suffering, forced to navigate a set of institutional practices and discourses of sleep as a means to attain desired forms of sleep and to thus rehabilitate a coherent and functional self. In a clinical sense, psychological, pharmacological, and hygienic interventions are geared to the restoration of this everyday functionality. These forms of intervention are further buttressed with an ever-expanding commodity market of sleep-related products and wellness programs. This manifestation of insomnia and its immersion in institutional and commercial networks forms its dominant appearance in educational campaigns around sleep, in media reports, in texts on disordered sleep and sleeplessness, and in ongoing interpersonal dialogues on the general inadequacy of sleep for the multiform demands of everyday life. The result is the kind of nominalist capture of dysfunction and non-normative embodiment that define Foucaultian biopolitics. As described in Foucault's final lecture in his 1976 lecture series at the Collège de France, the biopolitical imperative is to define currents that sap the overall vigor of a population and to reintegrate them in the established norm (1997/2003). The biopolitical impulse includes a nominalist categorization of the condition (e.g., naming differential forms of sleeplessness such as insomnia or delayed sleep phase syndrome), its symptomologies and etiologies (structures for recognition of the condition and the means to attribute causes), along with forms of intervention geared to restoring disorderly individuals to the established norm. Sleep and its discontents are thereby articulated to apparatuses of knowledge that produce and circulate ideas of proper sleep. The result has been the reification of a set of discourses concerning the proper modalities and

understandings of sleep that understand it as a properly monophasic rhythmic pattern of sleep and wakefulness that fits within a specified range of hours (6-10) and chronotype expression that defines sleep need. What this means for a condition like insomnia, as opposed to classical disease formations, is that insomnia appears not merely as a widely shared element of experience, but as a condition with a broad and shifting set of parameters for its understanding and coherence based in both biological accounts of sleep and its position within modern society.

As an object of discourse, insomnia manifests itself first and foremost as a biomedical object. The definition of insomnia comes from what Foucault refers to as “grids of specification” (1969/1972, 42), wherein sleep is progressively defined in terms of a biological function determined through an internal environment of the body. There are two primary etiological responses to the biological demarcation of sleep. The first is the establishment of the twin discourses of modernity and individual psychology. The purpose here is to delineate the multitude of forces disruptive to this biological function. These disruptions include the variety of stresses assigned to modernity that impair sleep function, and the so-called Dysfunctional Beliefs and Attitudes about Sleep (DBAS) that transfer blame for disordered sleep onto the coping mechanisms and character of the sufferer. A particularly nauseating aspect of the latter appears when these discourses are translated to gendered experiences of insomnia. These attributions of fault to the sufferer end up recapitulating notions of a fragile feminine nervous system susceptible to the storms and stresses of modernity, and echo the kinds of disciplinary modalities that defined the treatment methods experienced by Charlotte Perkins Gilman in the late nineteenth century. The insomniac finds herself in the difficult zone of navigating multiple institutional contexts that not only define productive and reproductive life in neoliberal capitalism, but also involve all the attendant forms of intervention; bodily discipline; and

reformulation, rearrangement, or redesign of domestic space and daily routines in order to reach the desired goal of subjective reconstitution within normative regimes.

Foucault refers to the entirety of these forms and discourses as a “thoroughly heterogeneous ensemble consisting of discourses, institutions, architectural forms, regulatory decisions, laws, administrative measures, scientific statements, philosophical, moral and philanthropic propositions—in short, the said as much as the unsaid” (1980, 194). What Foucault’s notion of the apparatus, or more properly the *dispositif*, does is establish the interdependencies of forms of knowledge and a radical inadequacy to extant insomnia and sleep discourses. These discourses have their origins in the sleep sciences, which extract sleep from both the said and the unsaid rhythms and patterns within a population in order to constitute it, fully formed, as an object of knowledge that can then define normative models of sleep. The disciplinary transformations of space and time that define modernity through the intensification and consolidation of the sleep rhythms within a linear social order operate as a discursive background to the overtly stated normativizing work of the medical sciences. The first task for this dissertation has thus been to cast aside the temptation to read sleep on the terms of the sleep sciences, in order to determine the manner in which the rhythmic expressions of sleep and wakefulness are situated within a naturalizing system of cosmic rhythms of night and day alongside the linear rhythms of the socially organized world. The second task has been to read the forms of appropriation made by insomniacs as they navigate the institutional practices and symbolic potencies of insomnia in order to appropriate a coherent sense of self from within the dissembling and disordering affects and effects of arrhythmic forms of sleep.

What I have undertaken in this dissertation is, then, a process of articulating the “system of relations that can be established between these elements” (Foucault 1980, 194) that accompany,

regularize, and normalize patterns of sleep that are then apprehended within the disciplinary apparatus of biomedicine. When Foucault points us to the unsaid as much as the said, he is pointing to the situation of the sleeping body in a vast network of socially organized practices that must be delineated in order to move away from the reification of sleep in the sleep sciences. This dissertation thus sets out to better understand the manner in which the disciplinary modalities of power has progressively taken hold of, and refined, the functional design of spaces of private, public, and institutional life in order to render them in terms of a linear rhythmic organization of everyday life. The result is the articulation of architectural forms and institutional practices, including their situation within a temporal architecture of the day, that defines the Foucaultian *dispositif*. We can see the operation of power within these interdependencies in the sorting of bodies into bedrooms, the commodification of the practice of sleep, and the relation of the bedroom to the vast institutional networks that define the experience of everyday life, and the implication of the sleeping body in a historical context geared to produce a normalized expression of sleep.

The expression of sleep is then articulated to processes of naturalization. The scientific production of sleep as an object is the production of an internal, biological environment that is then attuned to circadian rhythms of night and day. Or, rather, the body is disciplined into consolidated forms of sleep and wakefulness by these rhythms. These cosmic, rhythmic expressions of biological life are then mapped onto the cyclical repetitions of the linear organization of social life. The result is a naturalization of the expression of sleep in eight-hour blocks. The perceived intrusions upon this naturalized rhythm become the focus of evolutionary chronobiology and extend to studies from the social sciences, all of which posit some method of a return to nature (such as Dement's camping, Roenneberg's Urf and Mrk, and Morrisoe's

pastoral dream home). Any program, including many extant works in the social sciences, that takes a biologically defined reification of sleep as its foundation replicates a biopolitical declension at the heart of sleep research. This pattern of replication of the biopolitical impulse marks the inadequacy of most media reports and social science research on sleep. Other, more complex works, such as those from Greene, Morrisoe, Wolf-Mayer, and Scrivner, tend to frame the question of insomnia as a suffering produced in the conflict between biology and the boundary-usurping effects of modernity and its forms of instilled nervousness (or contagion) that replicate insomnia as a psychological condition.

The second task of the dissertation concerns the attendant forms of understanding and appropriation of insomniacs that appear with the sardonic rejection of English pastoral ideologies of the countryside in *Withnail and I* (1987). To be in a park and to be practically dead, as expressed by Withnail, or to be suspended in time as in Marwood's allusion to Harold Lloyd's *Safety Last* (1923), undermines the naturalism of these discourses. What is more significant in Marwood and Withnail's response to English pastoralism, and in Morrisoe's and Greene's rejection of CBT and the sleep sciences, is that arrhythmic sleep is caught up in these expansive yet integrative discourses such that the sufferer assumes a distinct positionality within them. Categorized and identified as a specific type of person and social problem following the moral discourses regarding the threats posed by improper sleepers, the insomniac accumulates more than just wakefulness; s/he also takes on a distinct epistemology defined by sleeplessness within capitalism. The sufferer is thereby caught up in networks of relations that enframe the function, expression, timing, and purpose of sleep, as well as the means of securing it. The discourses of sleep and insomnia produce a symbolic potency of insomnia, an archive of meanings, that intersects with the positionality of the sufferer. The result is a set of appropriations that define

how the suffering of sleeplessness is understood. These appropriations form the distinct and gendered approaches to reconsolidating what is proper to the now incoherent subject.

In the chapter on androcentric insomnia, the dissertation demonstrated the reorganization or reinterpretation of discursive networks linking insomnia with modernity through a white masculine embodiment. Insomnia is, here, a modern form of madness inflicted on the disciplined white male body. White privilege is thereby transformed into a paradigm of suffering as a result of the alienation of labour and the immiseration caused by the demasculinizing effects of bureaucratic subordination. Armed with a form of acute suffering now understood in terms of its positionality within neoliberal capitalism, the now continuous, but yet mad, gaze of the androcentric insomniac becomes a privileged epistemological position from which to critique gendered and work structures within capitalism. It thus becomes the grounds upon which an aggressively misogynistic and reactionary anti-capitalist/anti-modern modality emerges. Appearing as a crisis of accumulation, and a critique of the disciplinary effects of consumer society and bureaucracy in the films *Taxi Driver* (1976) and *Fight Club* (1999), these films highlight the fluid and shifting forms of interpretation and appropriation that links insomnia to gender and neoliberalism.

In contrast, the gynocentric memoir provides a gendered mapping of the institutional and ideological networks that shape sleep and insomnia discourses. Beyond the indictments of the gendered impacts of sleep science and clinical approaches to those suffering from disordered sleep, there is the mobilization of suffering in order to claim disability status. This is an obvious response to the kinds of acute suffering imposed by prolonged periods of sleeplessness and arrhythmic modalities of sleep and wakefulness. These women must constantly confront a productivist oriented world that seemingly enjoys pathologizing sufferers or denying the reality

of their suffering, all while trying to navigate the myriad permutations of disciplinary sleep discourses. To gain recognition for one's suffering can have a transformative effect for the sufferer, particularly if that recognition comes with forms of accommodation that enable her to better move through the world or possibly gain access to interventions that ameliorate suffering.

However, we can turn back to the short-lived notion of Erichsen's disease discussed by Scrivner to better understand why the quest for sleep disability recognition is fraught with difficulty. Erichsen's disease was a diagnostic category developed for those suffering from traumas related to the earliest railway accidents. Brought to testify against claimants suffering from being "shaken," Herbert Page (1845-1926) "was troubled by the lack of empirical evidence of injury or lesion in Erichsen's disease and complained that this caused people occasionally to abuse the legal system" (Scrivner 2014, 165). As with the troubles of self-reporting identified by Kroker and the hostility reported by Greene at sleep science conferences, without an organic etiology insomnia cannot fully appear within the frame of recognition without the character of the individual being brought into question. Jasbir Puar refers to the problem of recognition in disability rights discourses as a function of two factors. The first is the problem of a lack of recognition outlined here. The second problem is the more complex notion of what Puar calls debility. Debilitation is "distinct from the term "disablement" because it foregrounds the slow wearing down of population instead of the event of becoming disabled...the former comprehends those bodies that are sustained in a perpetual state of debilitation precisely through foreclosing the social, cultural, and political translation to disability" (xiii-xiv). Similar to the Derridean terminology of capital as a process that "wears as it grows" (1994, 41), debility is the slow wearing of a population that forces a reorientation away from the kinds of rights recognition so urgently claimed by Greene. In understanding sleep as a rhythmic complex that articulates the

biological to the “said and the unsaid,” and in understanding sleeplessness as an arrhythmic modality co-constituted through the wearing and the growth of modernity, puts into question the assumptions that undergird integrationist and adaptive approaches geared to the idea that we are merely an agglomeration of different chronotypes who must follow differentially programmed sleep and wakefulness rhythms. Tinkering with the design of the time structure of the capitalist day or the contexts or spaces of sleep to accommodate differential chronotypes becomes an absurdist practice even as it produces some positive results for the portion of the population that can be biopolitically managed. Rather, the biopolitical management of sleep necessitates an expansion of the discursive practice to restore the disarticulated elements that structure sleep and the care of the self in the disciplinary apparatuses of neoliberal capital. In order to address the conjoint problems of subjective disorganization attendant to arrhythmic sleep, we need to understand sleep as a modality that emerges from an invisible background to create subjects who are organized discursively through hygienic practices, the disciplinary organization of space, and the normalization and capturing apparatuses of the sleep sciences.

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