

STILL WATERS
By Christopher Owen

A FIVE MINUTE PLAY

SUMMARY OF CONTENT:

A psychiatric consulting room. A consultation. There is an issue regarding silence, when to remain silent and when to speak.

SET: DESK (TABLES). TWO CHAIRS.

CHARACTERS:

JENNY IN HER 30'S.

JAMES 50-60.

PENELOPE – ANY AGE ABOVE 30.

Playing time: 5 minutes.

**TECH: (This is a comedy) LIGHTING: OVERALL WELL-LIT
ACTING AREA THROUGHOUT THE PIECE.**

PENELOPE IS SEATED IN ONE OF THE CHAIRS.

JENNY:

(OFF STAGE AND AT THE DOOR OF THE ROOM):

Good afternoon, James.

JAMES:

(OFF STAGE AND AT THE DOOR OF THE ROOM):

Good afternoon, Jenny. Everything ok?

JENNY:

Yes, thank you.

JAMES ENTERS THE ROOM

JAMES:

Ah, yes. Penelope. Here we are. Well now, Penelope. (CHECKS HIS WATCH) I'm sorry to say we've only 4 minutes today. A number of meetings, consultations and so on. I am sorry about that. Now then, you and I have been having these weekly consultations for 6 weeks now, haven't we? - and in all that time, Penelope, you haven't said a word, have you? Mmm? Do you think we can go on like this? I mean, the fact is, it's me, the psychiatrist who for the most part is supposed to remain silent. It's me not you. I mean, traditionally speaking, you remaining silent and me talking doesn't comply with the methodology that we in the field of psychiatry have become use to. Traditionally, what happens is, I

sit or stand here, I listen to you, and I nod, and I go mmm,mmm, and now and then I may reflect back what the patient has said, as a sort of encouragement for you

to rattle away with your complaints and miseries and god-knows-what, but – Penelope – you’re not rattling away, are you?

CHECKS WATCH

3 minutes to go.

Of course, one remaining silent may have the advantage of protecting oneself in some way. I wonder how you (may) feel about that.

I had a fella came to see me - a priest, nice chap. For three weeks he didn’t say a word. In the third week, just before he left, he said he had this terrible, terrible compulsion, when he stood up in the pulpit to preach to shout at his congregation: Fuck off! I said to him, ‘fuck off’ may not be enough. I said to him, what you can do – Penelope, mm - is to go in to some quiet place in your head, where you’re feeling safe, and, I said to him, where your God is looking after you - and in this quiet place in your head, you can stand up in your pulpit and shout at the congregation: ‘fuck off, you arseholes! Go and shit yourselves. Bugger off the lot of you!’ and so on and so on. I have to say he was rather appalled by this suggestion.

When he came the following week, I said to him, ‘How did you get on, in the pulpit?’

He said, ‘Oh, I’ve no trouble now.’

I said to him, ‘Did you do what I suggested – in the privacy of your head?’

He said ‘No, I didn’t need to.’ He said, ‘You did it for me.’ he said.

I wonder what you feel about that.

HE CHECKS HIS WATCH.

1 minute to go.

I'm wondering in what way your silence may be helping you. Of course, as I say, you don't have to speak, unless you want to speak, on the other hand, you may not not want to speak, or you may not not want to not speak or not, whatever you decide or not decide. Mm? Well, that's it for today. See you same time next week. Thank you very much – goodbye.

HE LEAVES.

PENELOPE RISES, PRESSES THE INTERCOM:

PENELOPE:

Jenny.

JENNY:

Yes, Penelope?

PENELOPE:

I'm ready for the next patient now.

JENNY:

The patient – he was delusional still, was he?

PENELOPE:

Yes. This week he thinks he's a consultant psychiatrist.

JENNY:

Oh, dear. Gracious. What did you have to say about that?

PENELOPE:

I rarely, if ever, say anything about anything, Jenny. Silence, that's the key to this job.

JENNY:

Yes, Penelope.

JENNY CLOSSES THE DOOR.

**TECH CUE: JENNY MIMING CLOSING THE DOOR
FADE TO DBO.**

END.