

**“Modern Medicine Had to Start Somewhere:”
Performing Health and White Privilege in *The Knick***

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ABSTRACT: This essay examines the interrelations of health and white privilege in the U.S.-American historical and medical drama *The Knick* (2014-). Employing a broad definition of health and drawing from performance studies, this article argues that the everyday life within the series depicts a racist society, while the television series itself with its rhetoric of modernity and visual strategies makes white privilege visible in the context of health. The television series and everyday life within the show are examined in regard to their performative dimensions, i.e. both levels of performance do not merely represent, but take an active part in defining health and its surrounding discourses.

KEYWORDS: White Privilege, Health, Medicine, Performance Studies, Modernity, *The Knick*

Setting the Stage: Performing Health and White Privilege

Health has always been a highly-discussed topic in U.S.-American culture and politics, as, for instance, a historical overview of universal health care and health care politics on the website of the White House demonstrates.¹ Still, issues of health have had a particular currency lately due to the health care reform introduced in the form of the Affordable Care Act, which was signed into law in 2010 (see “About the Health Care Law”). Drawing from medical humanities and offering a critical and scholarly engagement with the topic of health and its surrounding discourses, the field of American Studies has recently dealt with many dimensions of health as well. Specific diseases and illness in general, contagion and epidemics, the health of the nation, and social inequalities in regard to health and medical treatment are topics that have all been considered in American Studies scholarship.² This article takes up such scholarly discourses on health by examining the U.S.-American Cinemax

¹ See “Healthcare in America: Healthcare Timeline” for an overview on the historical path to universal health care in the United States. Although the timeline also entails performative rhetoric and is constructed as well, it still shows that efforts and debates about health care have been going on long before 2010 and long before the Obama administration.

² To name only three recent examples of works within German and European American Studies that deal with dimensions of health: the conference volume of the 2012 convention of the European Association for American Studies in Izmir entitled *The Health of the Nation* (2014) edited by Meldan Tanrisal and Tanfer Emin Tunç; *Communicating Disease: Cultural Representations of American Medicine* (2013) edited by Carmen Birkle and Johanna Heil; *Yellow Fever Years: An Epidemiology of Nineteenth-Century American Literature and Culture* (forthcoming) by Ingrid Gessner.

television series *The Knick* (2014-).³ In doing so, this essay reads *The Knick* as a case study and as a site of performance particularly well-suited to negotiate white privilege regarding health and medical practice. Using a broad definition of performance, the subsequent analysis takes into account at least two interconnected levels of performance regarding the television series to show the performative dimensions of health and white privilege in *The Knick*: on the one hand, the series as a performance itself with its audio-visual aesthetics, visual frames, and camera angles; and on the other hand, everyday life within the television series as a performance of health and white privilege. Examining these two levels of performance, I argue that the everyday life within the series depicts a racist society that hides white privilege, while the television series itself with its rhetoric of modernity, visual strategies, and contrasts makes white privilege visible in the context of health. Although the focus of this paper is limited to the interconnection between racial inequalities and health and medical practice, health inequalities and issues on the basis of identity categories such as gender, sexuality, class, age, and their intersectionality with race are also acknowledged and not ignored. Moreover, ‘race’ as well as ‘whiteness’ and ‘blackness’ are regarded as social constructs and performative categories instead of essential biological facts. As a foundation for my analysis of *The Knick* and the argument I am developing here, I will first clarify the meaning(s) of the terms “performance,” “performative,” “health,” and “white privilege,” and point out their interconnections.

Performance Studies, Health, and White Privilege

No all-encompassing, comprehensive definition of performance studies or its object of study—performance—exist. For instance, performance studies scholar and professor of theater studies Henry Bial states that “boundaries between performance and not performance are constantly being tested, challenged, and remapped” (60). Thus, what constitutes performance is rather fluid and ever-changing and cannot be fixed to one specific and comprehensive definition. Richard Schechner, one of the founders of the field of performance studies and editor of the performance studies quarterly *The Drama Review*, also embraces a broad definition of performance by claiming that “every action is

³ By the time of publication of this essay, two seasons of *The Knick* have been broadcast in the United States, which are both subject of the subsequent analysis.

performance” and everything “can be studied ‘as’ performance” (38). This article goes along with these broad definitions that not only view performance in the traditional sense in connection to theater. Drawing from and expanding ideas of sociologist Erving Goffman, who applies theatrical terms and concepts to everyday life (cf. *The Presentation of Self in Everyday Life*, 1959), I suggest that performance also entails actions of everyday life. To broaden the scope of performance even further, Schechner points out that

[p]erformance must be construed as a “broad spectrum” or “continuum” of human actions ranging from ritual, play, sports, popular entertainments, the performing arts [...], and everyday life performances to the enactment of social, professional, gender, race, and class roles, and on to healing (from shamanism to surgery), the media, and the internet. (2)

Consequently, not only theater and other performing arts, such as dance and music, can be studied as performance, but also political speeches, festivities, protests, television series, and all aspects of life, even identity (cf. Butler with regard to gender and sexuality), have performative dimensions and therefore can be studied as performance. Because of this, performance studies provide a fruitful theoretical lens for an analysis of a television series as well as the concepts of health and white privilege important for this article.

A significant characteristic of performance is its active part in the creation of culture and thus its transformative potential at the same time as its reiterative nature. Schechner’s concept of performance as “restored behavior” or “twice-behaved behavior,” i.e. “the recombination of already behaved behaviors” (Schechner 35), stresses the reiterative characteristic of performance. Schechner’s definition also highlights performance’s transformative potential, as performance is always an “unstable ‘iteration’—repetition, but not quite exactly,” which “replaces stable representation” (Schechner 143). In other words, as no repeated performance is exactly the same, performance opens up an opportunity for social transformation, although a reaffirmation of social conditions and set norms can also be a result. To sum up these thoughts with Birgit M. Bauridl’s words, performance studies

views performances not as representations of but as participants in, contributors to, and agents in culture, politics, and society. It studies performance *as* culture, politics,

and ultimately life and, vice versa, culture, politics, and life *as* performance highlighting their performative dimensions. (55; emphasis in original)

This reiterative characteristic and transformative potential of performance is crucial for this essay's analysis of *The Knick*, as I do not regard performance as a representation of aspects or concepts, such as health or white privilege, but rather as a constituting entity for what health and white privilege mean on the two levels of performance, i.e. in the television series itself as well as in the society depicted within the show.

Thus, theoretical notions of performance studies are a useful framework for a scholarly discussion of the two concepts of health and white privilege as well as for the analysis of a television series. Due to performance studies' "inclusionary spirit" of embracing many fields (e.g., and not exclusively, theater studies, sociology, anthropology, cultural studies, gender studies), performance studies "is particularly attuned to issues of place, personhood, cultural citizenship, and equity" (Kirshenblatt-Gimblett 51). Thus, discourses of health and race are closely connected and intrinsic to this field. For instance, in my reading of the TV series, I use a broad definition of health that acknowledges all its semantic dimensions including social and cultural definitions of the concept that go beyond merely biological explanations for health and disease. Following Sarah Nettleton, I regard "[h]ealth status [as] clearly the consequence of factors other than biology" and understand health more broadly as "[p]atterns of mortality and morbidity, or a person's 'life chances', [that] are related to social structures and vary according to gender, social class, 'race' and age" (1). Defined in this manner, health is also related to exclusionary practices and normative processes of defining the 'healthy' body and distinguishing it from the socially or physically 'diseased' one. What is regarded as 'healthy' and 'not healthy' is defined, constituted, and constantly negotiated through performance in everyday life as well as in the media, for example, in a television series. Consequently, health can be understood as performative, i.e. as a result of and fluid definition through performance.

Due to exclusionary and normative processes linked to the concept, health is interrelated with discourses and social practices surrounding race and other identity categories. Especially in terms of racism, racial exclusion, and racial discrimination against people that are not perceived as 'white' in a U.S.-American context, performative aspects, health, and

race come together. Through the concept of performativity that Judith Butler applies to gender and sexuality, one can suggest a similar approach to other identity categories, such as race, as well. Butler claims that gender is “an identity tenuously constituted in time—an identity instituted through a stylized repetition of acts” (“Performative Acts” 187) and thus a performance that creates gender identity in the process. In other words, “[w]e do not perform what we are, but we become what we (repeatedly) perform” (Bauridl 68). The performance is also linked to “restored behavior” in the form of conventions and norms that are learned and reiterated and/or challenged and transformed. To explain this performative characteristic of gender identity, Butler borrows the term “citationality” from Jacques Derrida, which also explains identity formation as a process of reiteration. Thus, not only the social and cultural definition of a ‘healthy’ or ‘diseased’ body is constantly reaffirmed and challenged, but also identity formation including race and its systems of power is fluid and continuously negotiated within a society and culture.

Health and performative aspects further relate to white privilege, a concept loosely defined by Paula S. Rothenberg as “the other side of racism” (1). White privilege denotes a system of power that depends on racial inequality and racial oppression. In this system white people receive unearned benefits solely on the basis of race, and have advantages that are denied to people perceived as non-white (Rothenberg 2-3). Rothenberg sees the “power of whiteness” especially in the invisibility of white privilege, i.e. in the fact that advantages based on race are not regarded as a privilege. Rather, they are regarded as ‘earned’ or ‘normal.’ This invisibility of white privilege, Rothenberg argues, is also linked to the invisibility of whiteness itself as a race (Rothenberg 2). As Richard Dyer explains: “white domination [and thus also the oppression and discrimination of races other than white] is reproduced by the way that white people ‘colonise the definition of normal’” (“White” 45). Being blind to white privilege thus means falling prey to the misconception that “[t]here is no more powerful position than that of being ‘just’ human” (“The Matter of Whiteness” 10). “[B]eing ‘just’ human” means being the norm and privileged, while people read as non-white are excluded from and do not have access to the same advantages that people perceived as white enjoy, for instance in regard to medical treatment and health issues. Receiving privileges or being denied access to them depends on the way a person’s identity performance is perceived. With ‘performance’ I do not suggest a quality of pretending a

certain identity on purpose, but I rather point to performance as a process, as actions and behaviors that constitute and negotiate one's identity. In this process, one's actions and behavior are always measured against the set norms and the status quo, which are in turn also performatively defined. As a consequence, to the perception of whiteness as the norm and in order to make white privilege visible, Dyer calls for "making whiteness strange" (*White* 4). Similarly, Gwendolyn Audrey Foster sees the need to "destabilize the assumptions behind whiteness as a cultural norm" (1). As I will argue in this paper, *The Knick* takes part in making white privilege visible while at the same time depicting a racist society that hides white privilege and does not acknowledge it as such in order to maintain whiteness as the norm and socially-privileged race.

Taking these aspects of and interrelations between performance, health, and white privilege into account, this article argues in the following that the everyday life within the television series *The Knick* reiterates and thus constitutes a racist society, in which white privilege is kept invisible. However, on the performative level of the television series with the use of visual contrasts, multiple perspectives, and complex character depictions, *The Knick* at the same time makes white privilege visible in regard to health issues and practicing medicine. Thus, the series entails both a reiterative nature of racism as well as a transformative potential by functioning as a critical social commentary for the 21st century.

***The Knick*: Health, White Privilege, and Their Performative Dimensions**

As a medical drama set at the beginning of the 20th century, *The Knick* presents the viewer with many historical, but also seemingly timeless dimensions of health that are in some form or another still relevant today. Health issues treated in the series for example include the rhetoric and problems of epidemics through immigration (e.g., typhus starting in "Mr. Paris Shoes" 29:43; see also "Start Calling Me Dad"), women's and maternal health, drug addiction, and the modern aspiration to advance in medical and surgical procedures to cure diseases and obtain a 'healthy' body.⁴ Despite its focus on the hospital space, *The Knick* also presents dimensions of health that go beyond physical health. For instance, aspects

⁴ In the following, time references to the episodes of *The Knick* will be indicated in minutes and seconds.

concerned with the health of the nation, mental health, and ‘female hysteria’ feature in the show as well. Moreover, moral aspects of health are frequently touched upon, as, for example, corruption in the medical field and abortions performed by a nun are addressed. Social inequalities in matters of health and health care, including, for example, racially-segregated hospitals are further discourses surrounding the topic of health that are of concern in the series.

Taking all these aspects of health into account, one could argue that none of the characters in *The Knick* is actually ‘healthy’ in the broadest sense of the term: each character’s health is corrupted or compromised in some way, either through drugs, disease, or lack of morality, or through exclusion, discrimination, or not fitting the assumed ‘normative’ image set by society in regard to specific identity categories and their social position and expected roles. This claim is supported by the rather dark and gory visual aesthetics that not only firmly place the show in the past, but also imply a pessimism and critique on the lack of moral health in this modern age when advancement and progress are firmly embraced and propagated. In addition to the visual level, the show’s soundtrack, which frequently consists of dissonant rather than melodious sounds, irritates the viewers and highlights morally-questionable and suspicious activities in the series. For example, the dissonant music is used to underscore drug-abusing surgeon Dr. John Thackery’s accelerating heartbeat, when he injects cocaine solution into his body (see, e.g., “Method and Madness” 1:00-3:05). Here, the soundtrack as well as the visual impressions of the injection serve as a critical commentary on the notion of progress because Thackery’s drug addiction and his assumed need to take drugs in order to advance medical procedures are highlighted and disturbing to the viewer. At the same time, the television series depicts health and medical practice as a thrilling, exciting, gory, and for some, altruistic endeavor, but health is also a business, highlighted for example by the rivalry between ambulance drivers over injured and diseased patients (e.g., “Method and Madness” 18:18-19:15) and the hospitals’ competition for rich patients.⁵ While

⁵ Moreover, due to its corrupt superintendent Herman Barrow and its location in a poor neighborhood far away from patients with money, the Knick has financial problems that are frequently discussed at board meetings (see, e.g., “Method and Madness” 16:10-16:41). This aspect emphasizes the assumed altruistic nature of the Knick’s financial benefactors, but also points out that health is also regarded as a business endeavor. The end of the first season and the beginning of the second season highlight this notion of health even more when the board decides that the Knick should move uptown into the rich

there would be many ways to examine discourses around health in the series, this article will concentrate on racial inequalities and white privilege in regard to health and medical practice and how these aspects are performed by the series and by the society within the show.

The series explicitly deals with the concepts of and discourses surrounding health and white privilege, as it depicts an American society at the beginning of the 20th century, a time of modern progress, and at the same time, of racial segregation. The show is mainly set at the Knickerbocker hospital (short: the Knick), which is located in downtown New York City.⁶ Within the space of this racially-segregated hospital only people perceived as white are treated as patients whereas non-white staff members—mainly African Americans—are for the most part kept out of sight of the white staff, patients, and visitors. By rendering black labor invisible in the day-to-day business, white privilege is also kept invisible to white characters on the performative level of everyday life within the series, while it is revealed to the viewers of the show, who explicitly get to see non-white staff that works in the basement of the Knick. Thus, the television series visualizes the dire conditions that non-white staff has to face in their work environments. Moreover, non-white characters are kept in lower positions concerning their field of employment, their spatial location within the hospital, and their position within the character constellation of the television series. The viewers get to know mainly secondary non-white characters throughout the series, for instance, two African Americans who work in the basement to keep the furnace of the hospital going (see, e.g., “Method and Madness” 25:51-26:12; “The Busy Flea” 12:27-12:34), an African American woman that is denied treatment in the Knick on the basis of her race (“Mr. Paris Shoes” 22:00-22:50), a morally-corrupt Chinese American or Chinese immigrant who runs an opium den and brothel, and non-white patients that visit the secret clinic in the basement of the Knick including mainly African Americans, but also a Cuban immigrant. Most significantly, the only non-white main character in the show is African American physician Dr. Algernon Edwards, who is initially also confined to the basement and has to

neighborhoods to improve its financial situation and make profit by treating rich patients (see, e.g., “Crutchfield”). However, this endeavor fails when the construction site of the new Knickerbocker hospital is burned down (“Do You Remember Moon Flower?”).

⁶ A hospital located in Harlem that was named “Knickerbocker Hospital” in 1913 might have served as an inspiration for the Knickerbocker hospital in the fictional series (“Knickerbocker Hospital”).

work his way up to be allowed to do his job as deputy chief surgeon in the surgical theater of the Knick. These examples already suggest several aspects about the show and its treatment of health in connection to race and white privilege: the intersectionality of race and class, racial discrimination in regard to medical treatment, and the focus of the television series on a black-and-white binary through the choice of its main characters, which puts emphasis on the discriminatory practice of racial segregation.⁷ At the same time, these examples depict a visual marginalization of non-white characters within the space of the hospital, while they also visualize white privilege, as the series explicitly reveals racial inequalities and advantages of white characters that are regarded as ‘normal’ or ‘natural’ rather than privileges within the society of *The Knick*.

Geniuses at Work for Medical Progress: Edwards and Thackery

The slogan “Modern Medicine Had to Start Somewhere” on the DVD cover of the first season of the series emphasizes the close association of modernity and medical advancement in *The Knick*. Throughout the series’s first and second season, health and medical practice are linked to ideas of modernity and progress. It is implied that modern medicine is embodied by the brilliant white chief surgeon Dr. John Thackery, the protagonist of the series who is situated at the center and in the foreground of the DVD cover. Thackery, however, is addicted to cocaine. He believes that constant intoxication will help him develop new medical techniques faster than his competitors and thus accelerate the advancements in medicine quite literally on his own. In this way, health and the pursuit of health is directly paralleled with medical advancement, but also with addiction and madness, as Thackery

⁷ On the level of main characters, the series reaffirms a black-and-white binary in order to draw attention to a racially-segregated society, an aspect that this article will focus on without intending to reinforce a black-and-white binary itself. However, on the level of secondary characters, some non-white characters, other than African Americans, are portrayed within the series: for instance, the mysterious Chinese American or Chinese immigrant Ping Wu who owns an opium den and brothel. He is portrayed as immoral and rather as a criminal. For example, he takes over the loans of a loan shark, to whom white hospital manager Herman Barrow is indebted. In this way, he and his Chinese prostitutes gain access to the Knick’s health care by requesting from Barrow to treat them for a deductible on his debt in return (“Crutchfield”; “You’re No Rose”). This suggests that access to exclusive medical treatment and money seems to be only possible for non-white characters through criminal means due to the obstacles society puts in their way. Although both characters, Wu and Barrow, are depicted as immoral and rather shady, Barrow in the end gains access to the upper class and settles his debt with Wu, while Wu remains on a lower position and social standing in *The Knick*’s society due to his lack of whiteness (“Not Well at All”; “Do You Remember Moon Flower?”; “This Is All We Are”).

puts his own physical and mental health into jeopardy for progress and personal success. He is known among other physicians within the series for his experimental and questionable methods that are regarded as brilliant by some, while others reject them as cruel and immoral. His drug abuse and use of disputable methods culminates in his hospitalization to cure his drug addiction at the end of the first season. Before he agrees to be hospitalized, Thackery becomes paranoid due to his excessive drug abuse. In his self-centered attempt to win the race for the discovery of blood groups, he ruthlessly kills a patient, when he—in a delusional state of mind—simply carries out a blood transfusion procedure without knowing whether his theory is correct (“Crutchfield”). Thus, *The Knick* portrays the notion of modernity as rather immoral, exploitative, and self-destructive by paralleling it with Thackery’s drug addiction and immoral behavior and thereby uttering a critique on modern notions of advancement. At the same time, on the performative level of everyday life within the series, modernity and technical as well as medical advancement are highly celebrated and valued, and Thackery’s reputation as a brilliant surgeon is determined by his ability to advance in medical treatment and surgical procedures. In other words, the ambiguous presentation of Thackery as the embodiment of medical progress leaves an equivocal statement about modernity itself.

An important aspect of *The Knick’s* creation of a narrative of health and modernity is its connection to whiteness. Not only Thackery, the surgeon who is presented as the embodiment of modernity, is white, but the main setting of the series is also a rather white space. The Knickerbocker hospital is a hospital exclusively reserved for white patients treated by almost exclusively white doctors and staff, following the conventions of the racially-segregated American society of the 1900s. Depicting this white space as the origin of modern medicine excludes non-white doctors from this endeavor and choreography of brilliancy and progress that is so much embraced by the society within the series. On the performative level of the television series, the exclusion of non-white expertise and credit for modern medicine is paralleled with the initial exclusion and rejection of African American surgeon Dr. Algernon Edwards, who arrives back in New York City after receiving medical training in Europe. In the beginning of the series, Edwards is not allowed to perform surgeries in the surgical theater of the Knick (see, e.g., “Method and Madness” 43:40-48:35).

Despite having studied at several highly prestigious institutions, he is not acknowledged by Thackery and his white colleagues as a valuable and skilled surgeon.

One of the reasons why Thackery opposes the hospital board's decision to hire Edwards as deputy chief surgeon at the Knick is his plan to promote his white colleague Dr. Everett Gallinger to this position ("Method and Madness"). However, that Edwards's skin color plays a role in this rejection as well becomes apparent in his indirect and direct introduction to Thackery and the viewer. Edwards's entrance as a character into the series is striking, as his race at first remains invisible to Thackery as well as to the viewer. His reputation precedes him: an outstanding medical degree from Harvard, high-ranking medical positions he held in Europe, and his overall medical brilliance are presented and discussed at a meeting of the hospital board ("Method and Madness" 17:05-18:16) even before Edwards physically appears at the Knick and on the scene of the television series. In this way, Edwards is introduced as a surgeon whose skills and ingenuity match that of Thackery. On paper, he momentarily 'passes' as white, i.e. as the assumed 'invisible' race that is supposedly "'just' human" (Dyer, "The Matter of Whiteness" 10). The characters and the viewers in these initial moments of the series assume that Edwards is white because of his outstanding CV and because he has been trained in a western European and American medical tradition that is presumed to be white. Moreover, the intersectionality between race, class, and gender is shown in this indirect presentation of Edwards: Edwards has an outstanding reputation and CV as a surgeon and medical scholar that people within such a society as presented in *The Knick* would only attribute to a white man of a higher class.

This assumption is proven by Thackery's overt surprise when meeting Edwards in person for the first time ("Method and Madness" 26:13-28:08). During their first encounter and Edwards's direct entrance into the series, Edwards states to Thackery that he is "beginning to think that [Thackery] was not told everything about [him]" and suggests that the chief surgeon must have expected "something lighter" making a direct connection between Thackery's rude behavior towards him and his race ("Method and Madness" 27:01-27:13). These statements indicate that Edwards notices Thackery's rejection on the basis of his skin color and he is aware of the initial invisibility of his race to his boss. Thackery clearly repudiates Edwards on the basis of racial bias and utters that he is "not interested in

integrated hospital staff" ("Method and Madness" 27:17-27:21). By revealing that Edwards is black when he appears in front of Thackery and showing Thackery's rejection of him, the series makes white privilege in terms of practicing medicine visible and at the same time makes the viewers reflect on their own racial presuppositions and reactions to Edwards's indirect and direct introduction into the series. Thackery even accuses Edwards of not mentioning his race on his credentials. When Edwards then asks him challengingly if Thackery has his race written on his own CV, Thackery simply answers "there is no need for it to be" ("Method and Madness" 27:33-27:34), thereby directly claiming that whiteness is the norm and thereby emphasizing the power and privilege connected to whiteness. Within the kind of racist society depicted in *The Knick*, the degrees and skills Edwards has gained and achieved are invalidated by not being seen as white.

In opposition to Thackery's medical career, the TV series frequently portrays Edwards's career path and his position at the Knick as a privilege that the Robertsons, a rich, upper-class, white family for whom his parents work as driver and cook give to him. Although Edwards is also hired for his extraordinary skill, brilliancy, and outstanding CV, the position is offered to him due to his personal connection to the Robertsons, who grant major financial support to the Knick (see, e.g., "Mr. Paris Shoes" 18:33-18:41). Only by hiring Edwards, the hospital can secure further financial support from the Robertsons such as the coverage of the cost of installing electric lighting ("Method and Madness" 34:06-34:50). Edwards's connection to the Robertsons is repeatedly emphasized and used to create a rhetoric of privilege surrounding Edwards and his medical career in connection to his race. This aspect is made very explicit in particular at a party at the Robertsons: Captain Robertson, the family's patriarch, presents Edwards to everyone as a model minority when he states that "you will never meet a Negro with this much ability and ingenuity as this one" ("Where's the Dignity?" 26:42-26:47). He thereby stresses that his protégé is a talented surgeon *despite* his race. The camera frame visually focuses on Edwards's disturbed and pained facial expression ("Where's the Dignity?" 26:47), which he hides from white people during these occasions, but which are explicitly apparent to the viewers of the series. These kind of close-ups indicate Edwards's own perspective and show that he does not agree with this presentation of himself, but rather struggles with racial discrimination in a white American society. This struggle becomes apparent in his frequent physical fights with other blacks that he himself

provokes on purpose (e.g., “The Busy Flea” 48:16-50:25). By highlighting Edwards’s own perspective, the series exposes racial discrimination as an injustice and makes white privilege visible. Furthermore, the contrast between Thackery’s and Edwards’s medical careers in terms of privilege also make white privilege visible to the viewer: within the society of the series, Edwards’s connection to the Robertsons and his medical career are stressed as a privilege, while Thackery’s advantage on the basis of his whiteness is mainly denied and kept invisible. Edwards’s supposed privilege that he only has access to through his connection to an upper-class, white, liberal family is stressed throughout the series by other characters. The advantages he has are always mentioned in connection to his race, while Thackery’s white privilege of working as a physician at the Knick is mainly kept invisible, although he, too, holds his position at the Knick due to his personal connection with Captain Robertson (“Do You Remember Moon Flower?”). Despite this fact, Thackery’s privilege of working at the Knick and his outstanding medical career is never associated with his whiteness, i.e. his white privilege remains invisible. For the white doctors working at the Knick, the exceptional reputation for medical progress is mainly emphasized as a privilege, but not attributed to racial categories.

Although Edwards is perceived as African American within the society of the series, he also stands in between races and social classes. For example, Edwards’s exquisite clothes designate him as belonging to a higher class than the other, mainly working-class African Americans that are portrayed in the series. Edwards lives among them, yet they do not accept him as one of their peers (“Mr. Paris Shoes”). Thus, he does not only face discrimination on the basis of his skin color in the white hospital, but he is also confronted with intolerance due to his appearance as a member of a higher class in the neighborhood and building where he lives. That he lives among working-class African Americans in a building with dirty running water and cockroaches and that he has to share one bathroom with an entire floor (“Mr. Paris Shoes”) is the result of racially-segregated spaces. The contrast between his bad living conditions and those of the Robertsons who live in a big, elaborate house with staff tending to their every need is directly shown by the television series at the beginning of the episode “Mr. Paris Shoes.” The cross-cuts between Edwards’s and Cornelia Robertson’s morning rituals (“Mr. Paris Shoes” 0:11-4:19) reveal the class and racial privileges the Robertsons enjoy while similar privileges are denied to Edwards.

Although he embraces white, western medical traditions, is trained in prestigious American and European medical institutions, and his overall behavior and appearance fits into the white, upper-class society depicted in the series, he is still not perceived as an equal to his white colleagues. As a result, he has to live in a run-down building and does not have as high a standing in society as Thackery and the Robertsons do, which reveals white privilege to the viewer.

Edwards's isolation and exclusion from the surgical theater gradually breaks down in the first season of the series and he even becomes chief surgeon himself at the beginning of the second season ("Ten Knots"). Through this development, the narrative of whiteness as the origin of modernity and modern medicine is partly challenged by Edwards and his medical brilliance that even Thackery has to acknowledge. However, as Edwards learned and perfected his surgical and medical skills at Harvard University and in Europe, the medical tradition he draws from is also stemming from a western and white perspective on medicine and medical procedures. Thus, Edwards also embraces a white medical tradition and rather stands for medical advancement in this tradition as well. Because he is black, Edwards's scientific progress and his advancement in medical procedures are not met with the same enthusiasm that the hospital board has for Thackery's research. During his time as chief surgeon, Edwards develops several new surgical methods and is a brilliant medical practitioner. However, this position is only temporary. As soon as Thackery returns from a rehabilitation facility, Edwards is expected to give up the job as chief surgeon in favor of Thackery ("You're No Rose"). This shows that Thackery's work is valued more in the society of *The Knick*, although Edwards's ambitions and his work as a medical researcher and surgeon are similar, maybe even superior to Thackery's.

Despite a certain improvement of Edwards's situation within the Knick throughout the first season of the series, discrimination and oppression on the basis of the intersection of race and class continues both inside and outside the hospital. Moreover, Edwards attempts to write himself into the dominantly white medical journal landscape by publishing his research and having Thackery present his paper on a self-developed hernia treatment at a medical conference ("Working Late a Lot" 8:22-8:46; 9:20-11:23). However, Edwards is never truly acknowledged by the white medical landscape of New York City. It is Thackery who enjoys a

high reputation in white medical academia despite jeopardizing his patients' lives through his ruthless experimentations. As Edwards is dependent on Thackery's reputation in order to publish articles and as he is at the same time fascinated by Thackery's research, he frequently supports Thackery in his research endeavors. Thus, Thackery comes to accept and value Edwards for his complicity and secrecy rather than fully and directly acknowledging him for his skill. This relationship between Thackery and Edwards is especially demonstrated when Thackery discovers the research that Edwards has done in his secret underground clinic in the basement of the Knick where he treats patients regarded as non-white. Edwards wants Thackery to co-author his article on a hernia treatment to get recognition in white American academia. Furthermore, Edwards threatens to take all of his future scientific discoveries elsewhere, if he is not welcomed at the Knick and is not allowed to perform surgeries. He states to Thackery: "And you will miss out on all the fun" ("Start Calling Me Dad" 44:46-44:51). In turn, Thackery welcomes him at the Knick, which demonstrates his self-centered longing for reputation and fame that is to be gained from scientific discoveries and the development of new medical procedures. Thackery has not overcome his racial bias, he simply sees his own benefits in this strategic alliance. Both surgeons are dependent on each other at this moment of the series: Edwards cannot publish anything in medical journals or speak at conferences without Thackery, whereas Thackery is eager to use Edwards to develop new surgical methods and advance medical research and his own reputation. Edwards appears morally superior to Thackery in these scenes, as he is more interested in taking an active part in medical advancement than in his own professional reputation or personal gain.

Thus, by paralleling Edwards's and Thackery's outstanding skills and at the same time juxtaposing their different social and professional standing, *The Knick* exposes the privilege Thackery has mainly on the basis of his whiteness. A dichotomy between Thackery and Edwards is created by frequently placing them in spatially-opposing positions within the camera frame. This visual staging of the two racially-different characters who are otherwise at least similar in skill and profession is a performative element of the television series that exposes white privilege through contrast. However, Thackery's privilege is not acknowledged as such within the society of *The Knick*. Although Thackery and Edwards seem to have similar talents and medical brilliance, Thackery is famous and successful as a surgeon, but Edwards

cannot even publish or present a scholarly article in an American medical journal or at a conference without a white front as co-author and/or presenter (e.g., “Working Late a Lot” 8:22-8:46; 9:20-11:23). Edwards is not that widely known due to the lack of access to resources on the basis of his lack of whiteness. In this context, whiteness functions as a kind of “property,” to use Cheryl I. Harris’s term, that allows for social and professional upward mobility in a racist society while denying the same to people not read as white and thus not read as the norm.

Edwards even assumes at the beginning that he himself is superior to Thackery in terms of medical skills (“Where’s the Dignity?” 22:54-23:02). He proves this to the viewer and to the white doctors with a medical procedure that he developed together with a French colleague and that nobody else at the Knick knows how to perform (“Where’s the Dignity?” 3:55-8:07). Instead of letting Edwards assist with the procedure, Thackery orders his deputy surgeons to steal the medical journal that contains an article published by Edwards and his colleague detailing the procedure (“Mr. Paris Shoes” 33:45-34:55). However, the article is written in French and as none of the white doctors at the Knick have a working knowledge of French, they have no choice but to allow Edwards in the surgical theater. While talking them through the surgery, Edwards leaves out a crucial detail, which jeopardizes the life of the patient but also forces Thackery to allow Edwards at the operating table to carry out the rest of the surgery (“Where’s the Dignity?” 3:53-8:39). Although he risks the life of the patient, Edwards is overall presented as the superior physician and surgeon on the performative level of the series: he is brilliant, hard-working, and even better educated. Thackery on the other hand is an immoral drug-addict who would stop at nothing to keep Edwards in isolation and out of the surgical theater, at least at the beginning of the series. However, within the society of *The Knick* Edwards’s professional and moral integrity are no match for Thackery’s superior social and professional standing. Because of this, white privilege becomes visible on the performative level of the television series.

Visual Contrasts: The White Space of the Surgical Theater and the Secret Clinic

The juxtaposition between the two surgeons as well as racial inequalities in regard to health are also demonstrated through the visual contrasts of racially-coded spaces. A significant space that signifies modernity in *The Knick* is the surgical theater. As the name already

implies, the space reminds of a theater setting with an overly-lit surgical stage on which the physicians perform surgeries and explain their procedure to spectators sitting in the dark audience section.⁸ Surgery itself is staged as a performance in the traditional sense of the term, which the characteristics of the space of the surgical theater itself suggest. Surgery is seen as an act and a transformative process of fixing the sick body, which is on display on the operating table, and thus the attempt to transform the sick body into a healthy one. In this particular context of modernity, the space also serves as a place for medical and surgical experimentation. The surgical theater stands out in the visual aesthetics of the show as it is the only place that is well-lit, while all the other frames shot outside of the surgical theater go along with the dark visual aesthetics of the show. This selective use of excessive lighting evokes notions of enlightenment, progress, and modernity symbolized by this specific space. It is on this surgical stage that scientific progress happens, if the DVD cover of the first season is to be believed, which, in addition to the afore-mentioned slogan of the show, also depicts the surgical theater and the show's medical staff. This space is highlighted in the series through the intense lighting, symbolizing and celebrating modernity as well as suggesting sterility and cleanliness. However, the frequent failure of medicine, medical progress, and modernity are also portrayed within this space, as many patients die on the operating table despite the newest technologies and surgical procedures. Almost every surgery is an attempt to reach scientific advancement. Medical progress is depicted as a trial-and-error process that precedes meticulous research before it is put to the test with every new attempt in the surgical theater. For example, the first surgery the viewer witnesses in *The Knick* is a placenta previa surgery. During this medical procedure, then deputy chief surgeon Thackery and chief surgeon Dr. J. M. Christiansen try out a new surgical method, which fails when the patient dies ("Method and Madness" 3:09-8:27). And while his mentor Christiansen cannot stomach yet another failed surgery and commits suicide, the dead woman and child for Thackery merely mean another (small) setback on the road to medical progress. Furthermore, the idea of the surgical theater as a sterile and clean space is also challenged during the surgeries, as the visual aesthetics of the show during those scenes confront the viewer with images of excessive blood loss and gore that portray the act of surgery itself as

⁸ The series's visual depictions of the Knick's surgical theater very much recall Thomas Eakins's oil paintings "The Agnew Clinic" (1889) and "The Gross Clinic" (1875).

butchery. These gory visual details undermine the idea of medicine as a sterile and clean discipline.

From this center stage of progress, Edwards is at first excluded on the basis of his skin color and when he is eventually admitted to the surgical theater, he at first seems to be merely a bystander because he is not allowed near the operating table (e.g., “Method and Madness” 47:21).⁹ He is visually and de facto marginalized in this significant space, while the white physicians of the Knick very literally work center-stage. With this racial choreography, modern medicine, health professions, and the attempt to maintain and recreate health are staged within the everyday life of *The Knick* as an exclusively white male endeavor. The surgical theater is clearly coded as a white space, since at first only white surgeons are allowed to actively take part in and advance medical progress. The overt racism Edwards has to face at work on a daily basis culminates in an act of violence in the surgical theater. Gallinger punches him after a surgery and Thackery’s only reaction is to tell Gallinger that “a surgeon needs his hands” and that he should “next time kick the man instead” to protect his hands from injuries (“Where’s the Dignity?” 8:08-8:31). In other words, Gallinger’s skills as a surgeon are regarded as more important than Edwards’s dignity. Moreover, the latter’s skills and abilities seem to be of little interest or no value to Thackery in this scene; after all, Edwards could have been seriously injured from the punch as well. This physical assault and discrimination excludes Edwards from active participation in the progress of science and thus, progress in the sense of achieving a physically healthy society, is racialized as a white endeavor. Additionally, white privilege is made visible through the performance of the series by depicting the surgical theater as a white space, but this privilege remains invisible within the racist and segregated society of the series.

A space that serves as a visual and performative contrast to the well-lit surgical theater of the Knick is the secret underground clinic for non-white patients that Edwards establishes in reaction to his exclusion from and marginalization in the surgical theater (“Mr. Paris Shoes” 22:55-24:34). The clinic is set up in the dark basement of the Knick, where Edwards’s

⁹ When considering the historical context, the presence of an African American physician in the surgical theater of a white hospital is striking. One could also argue that in a racially segregated society Edwards is allowed into the white space of the surgical theater despite being black.

assigned office is located (“Mr. Paris Shoes” 13:13-14:21). Here one can detect another form of spatial marginalization, exclusion, and racial discrimination in the decision to give Edwards an office far away from the surgical theater and the other surgeons. It is significant that his office is initially located in the basement near the furnace and coal storage where two working-class African Americans work. The space symbolizes a lower position within the Knick as well as a lower class within society. This secret clinic and thus also the contrast to the surgical theater are at first hidden from the sight of the white characters within the series. However, the visual contrast between these two spaces is made explicit to the viewer. In this way, white privilege in medical care remains hidden within the society of *The Knick*, while the performance on the level of the television series exposes the unequal conditions in medical treatment to the viewer. As opposed to the excessively-lit surgical theater, the secret clinic has an operating table that is only dimly lit. The lack of advanced medical equipment as well as the black ‘nurses’—originally laundresses and a seamstress—that Edwards hires and has to train rather quickly to be his assistants in the clinic indicate the racial inequalities in terms of medical treatment (“The Busy Flea” 12:55-13:30). The white privilege of being treated in the bright surgical theater of the Knick as opposed to the dark operating room in the basement becomes explicit to the viewer in this visual contrast. As Edwards has to keep the non-white space of the clinic hidden in the basement, the illusion of white privilege as the norm remains intact because the contrast is not visible to the white society in *The Knick*.

“Get the Rope”: Mob Violence and Racial Inequalities in Medical Care

An aspect that demonstrates that health and medical care are determined by social and racial issues is the fact that Edwards treats many black patients with hernias in his secret clinic. When Thackery discovers the underground clinic in the Knick (“Start Calling Me Dad” 37:41-45:08), Edwards tells him about a surgical treatment for hernia that he was able to develop and to perform perfectly, mainly due to the fact that he had so many patients with this condition to practice on (“Start Calling Me Dad” 41:39-43:00). A hernia is a condition, in which “an organ [...] pushes through the muscles that are around it” (“Hernia”). Edwards stresses that most of the patients with hernia are working-class blacks because their jobs require hard physical labor such as heavy lifting, which can cause this medical condition (“Start Calling Me Dad” 42:36-42:41). This insight into the causes of hernias reveal that

health and disease are to a large degree socially and racially determined. It is partly white privilege (connected to class privileges) that white middle- and upper-class citizens rarely have these kind of diseases. They have the privilege of not having to perform hard labor, which is not acknowledged as a privilege by the white society of New York City depicted in *The Knick*, but rather seen as ‘normal.’

Beside the contrasts between Thackery and Edwards and the spaces of the surgical theater and the secret clinic, *The Knick* offers several instances that demonstrate the interrelation between health and white privilege within the series. Throughout the first season, the viewers receive insight into African American hospitals only twice. These depictions emphasize once more the higher quality of medical care provided at the Knick to white patients. When a sick African American woman is turned away at the Knick on the basis of her race (“Mr. Paris Shoes” 21:59-22:45), Edwards goes to an African American clinic to find her and asks a nurse, if the woman was there. The nurse answers that the woman signed in, but had to leave for work and could not wait any longer to be treated (“Mr. Paris Shoes” 30:36-30:44). Here, health is exposed as an economic entity: health and health care cannot be taken for granted but one rather has to be able to afford them. Furthermore, this statement suggests that the clinic was crowded with patients and the waiting times were long, thereby implicitly speaking to the limited possibilities of health care in this clinic. By contrasting a supposedly crowded African American clinic and the spacious rooms in the Knick, the racial inequalities in matters of health care and medical treatment are shown by the series.

The only other impression of an African American clinic throughout the series is offered during a riot when the African American clinic is flooded with patients. In this episode, whose title “Get the Rope” already evokes racial violence and lynching, racial and social inequalities in terms of health and beyond are especially contrasted with the characters’ celebration of modernity and medical progress throughout the entire series. “Get the Rope” depicts a race riot that breaks out in front of the Knick. Violence by white Americans is directed at black citizens after a corrupt white police officer is killed by an African American (“Get the Rope” 5:48-7:12). By linking the space of the Knick to the riot, that is by turning a place of healing and modern medicine into a place of racial violence, this episode clearly links health, racial

inequalities, and notions of modernity. More significantly, a part of this episode takes place in the African American clinic. When the mob takes the hospital under siege (“Get the Rope” 14:06), the medical staff of the Knick has to flee to an African American clinic in order to treat the injured patients (“Get the Rope” 22:09-23:49). Arriving at the clinic with their patients, they find it under-staffed, under-equipped, and overcrowded. This visual impression of the African American clinic can certainly be regarded as exceptional and explained by the ongoing riot. Nonetheless, it serves a specific function, as the state of exception highlights and emphasizes the dire conditions of health care at this clinic and with it the racial inequalities regarding health in this society altogether. When Edwards needs to perform a procedure on a patient that usually requires anesthesia, another doctor informs him that they do not have any morphine or cocaine because the clinic hardly has enough anesthetics supplies to carry out their day-to-day business (“Get the Rope” 28:28-28:51).¹⁰ Although a general shortage of cocaine is proclaimed within the series, the Knick still has a supply and other means of anesthesia, while the provisions in the African American clinic are already used up. Through this contrast, having the necessary means to ease a patient’s pain and to keep a patient alive is exposed to the viewer as a privilege reserved for people perceived as white. The racialized and racially-segregated hospital spaces and their medical equipment in contrast uncover white privilege in matters of health and medical treatment and suggest that racial equality in a segregated society is impossible. As a matter of fact, the racially integrated microcosm of the African American clinic during the riot, where black and white medical staff join forces and work side by side in the best interest of their patients, seems only possible in this state of exception.

Connections to the 21st Century

To conclude, in the series *The Knick*, health is performed in connection to medical treatment and advancement of modern medicine. The racial choreography of the show as well as the spatial and visual performance of different racially-segregated spaces of medical treatment demonstrate the connection between white privilege and health/health care. Especially the race riot depicted in “Get the Rope” alludes to and reverberates with the current situation in

¹⁰ In this scene, the viewer witnesses one of the few selfless acts by Thackery who sacrifices the last cocaine vial that he had secured for his own (ab)use for an African American patient.

the United States in regard to racial issues, including, for example, police violence motivated by racism and race riots in the United States since the shooting of Michael Brown by a white police officer in Ferguson, Missouri, in 2014.¹¹ Thus, *The Knick's* historically-specific depiction reverberates with today's racial injustices, racial inequalities, and racism in a U.S.-American context. Because the series is set in 1900/1901, today's viewers may feel detached from the situations depicted and thus ignore the social issues addressed in the series that are still relevant today, as these problems are presented and visually choreographed within a world of the past. Although the society depicted in *The Knick* presents a racist society, the series with its focus on the uneasy juxtaposition of medical and technological modernity and blatant racial inequality makes white privilege visible to the viewer of the 21st century. The series reveals white privilege as unearned benefits through choreographing visual contrasts, offering character dichotomies, and providing not only a white, but also non-white perspectives on matters of race and privilege. The focus on medical advancement in particular is juxtaposed with social standstill and stagnation, for example in matters of racial (in)equality. In this way, the series also serves as a critical commentary, but does not go as far as suggesting specific transformative solutions within the racist society of *The Knick*.

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¹¹ In an interview published on the website of the *Express*, a British newspaper, André Holland, who plays Algernon Edwards in *The Knick*, directly draws parallels between the race riot in the episode "Get the Rope," which is based on the Tenderloin Race Riot of 1900, and race riots and racial tensions in today's United States (Debnath).

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