

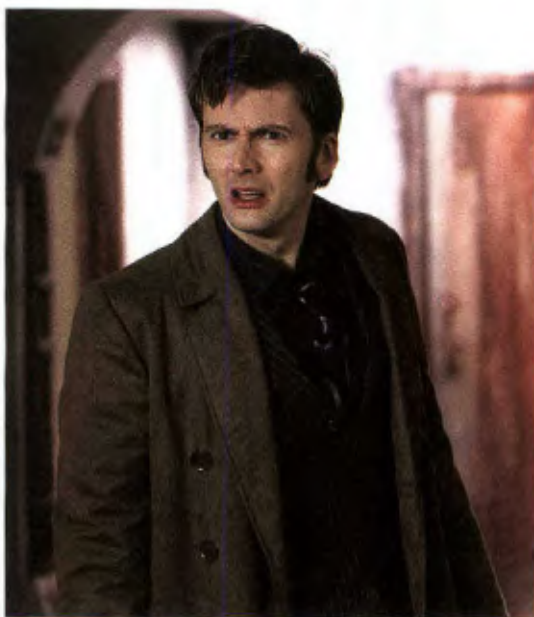
The Lovely Smallness of Doctor Who

By Ken Chen

Keywords: Doctor Who, science fiction, war, horror, tragic idealism, escapism, work

I

Like many nerds of America, I spent the dinners of my adolescence watching re-runs of *Doctor Who* (1963-1989, 2005-), the nearly 30 year old BBC fantasy drama about a nine hundred year old time-travelling alien - known only as the Doctor - and his whimsical encounters with cybernetic, suction-cupping, bug-eyed monsters. While *Doctor Who* is a British institution, the show's American appeal has largely been limited to geeks - like my sister and I who, in the late eighties and early nineties, before eating dinners that my mom had brought home from her work cafeteria, would flick the remote to KTEH-54, the PBS affiliate for San Jose. We'd unlatch the steaming white Styrofoam boxes and scarf down the contents within - meat-loaf and cauliflower, lobed and branched like white brains - as the Doctor and his incessantly screaming companions sprinted down corridors until smacking into the episode's 24 minute mark and a horrific cliffhanger: the Doctor and his companion gunned down by a firing squad so abruptly they don't even have a chance to scream; deep in some bare tunnel; or facing an assassin shoving the Doctor into green marsh waters, apparently drowning him. A cliffhanger threatens us with the future; the appeal is seeing whether the threat will be carried out. Yet *Doctor Who's* cliffhangers often had a musty feel. My sister and I watched knowing that the show had been cancelled in 1989 and maybe decades had passed since these cliffhangers had aired. The bullets dangled in mid-air. The drowning waters froze and waited until it was again seven p.m. in our lives. Appropriately for a time travel



'Appropriately for a time travel drama, *Doctor Who* in America has always been a retrospective show, a broadcast in amber.'

drama, *Doctor Who* in America has always been a retrospective show, a broadcast in amber.

In 2005, the BBC relaunched *Doctor Who* as its flagship show, hoisting the programme into the present tense: Britney Spears is on the soundtrack, the show satirizes the inept news media, the war in Iraq, and *Big Brother*, and the current incarnation of the Doctor dons slimly tailored suits, skinny ties, and Chucks, as opposed to the stern smock-coated Doctors of the sixties. The new *Doctor Who* is a hokey blockbuster, comball yet also generously weird - a bargain warehouse of hopped up science fantasy: stars that are alive, cat-faced nurses, diseases that turn your face into a gas mask, journalists with

holes in their foreheads and everyone's favorite monsters from the old show, the Daleks and the Cybermen, squealing, Nazi-like battalions of de-humanization. The best episodes suggest an awkward and entirely unique mongrel genre, melding pulp horror, a quaint sentimentality, and a sense of time storming its way over us, smothering everything with hopeless age. Yet, unlike the classic series, which felt theatrical in its general lack of quick cutting, multiple cameras, or blocking, even the new series's humdrum episodes fly by with a dorky momentum, so revved up that they feel like trailers for themselves. The typical *Doctor Who* episode eagerly rehearses all the bad conventions of pulp science fiction: the Doctor's companion is a beautiful hostage, the villain laughs maniacally and the narrative consists almost entirely of pseudo-scientific exposition and running. (The Doctor's favorite tool - the sonic screwdriver - is fundamentally a magic wand that opens doors so he can run through them even faster.) So bent on suspense, so loosely tethered to reality; the standard *Doctor Who* episode seems to levitate. The show seems less akin to hard science fiction than ballet - an abstract, pulsing surface that floats just slightly above meaning.

The show's executive producer, Russell T. Davies, however, has invented a new way for the show to be meaningful. Like much science fiction, *Doctor Who* cannot rest itself in setting or time, class or race, or any of the other familiar moorings of life. Yet the show is even more nomadic than other science fiction franchises; the Doctor travels to a new time and place each episode, so the genre, setting and supporting cast are rarely the same. Yet Davies has brilliantly retro-fitted *Doctor Who* with a subtext. Hidden beneath the plot of the first two seasons, the Doctor and his companion, Rose (pop star Billie Piper), have slowly fallen in love. (Piper's replacement - Martha Jones, played by Freema Agyeman - was essentially a rebound companion.) Next to the new show's repressed passions, classic *Doctor Who* now seems flat and innocent - a perpetual adolescence of adventures, so little spotlight on the human heart.

The show's mythology allows the Doctor to 'regenerate' - gaining a new body and personality while remaining the same self - but the two actors who've played the new Doctor (Christopher Eccleston and David Tennant, consecutively) have both portrayed him as a wounded loner.

Decked out in a leather jacket, smacking around his companions with his blue-collar Northern brogue, Eccleston's Doctor bounces around like a gleeful roughneck. He's a big-eared, fat-nosed imp with a balloon head and delicate cheekbones - a macho, scholarly clown as grotesque and beautiful as Jean-Paul Belmondo. While the Doctor has traditionally been an archetypal English eccentric, a benevolent mix of Santa Claus, an Oxford don and your grandpa, Eccleston reinvented him as an asshole. Tennant's Doctor is more sensitive, but more alien - chirping, more guilty than compassionate and perpetually alarmed, thanks to the way his big, anime eyeballs make him look like a stunned hart or a nervous boy playing dress-up. Although his Doctor is vaguely omnipotent, he also seems feckless and distracted - he's a twerpy demigod. Eccleston and Tennant play the Doctor quite differently, but their take on the role looks surprisingly similar when viewed against the original series - the classic Doctor was never this manic. The new Doctors are bipolar thrill junkies, jaunting and gambolling just so they can distract themselves from post-traumatic stress. While they're plausibly smitten in a way the old Doctors never were, the cause isn't romance - it's trauma. This is because of Davies' second, more political revision to the show's continuity. Thanks to a never-televised Time War, the Doctor is now the last of his race, the Timelords - a status that, if taken seriously and somewhat loosely, makes him a survivor of genocide.

II

The new *Doctor Who* is a war show. The incidental music is symphonic, martial and silly, the show's scale ever expanding to a wider, more hopeless portrait of apocalypse, each season ending with an onslaught of mechanical villains, swarming in, breaking skyscrapers, killing everyone. Yet we never see the actual Time War - just the war's repercussions rippling out around it, irreparable but somehow invisible, less like a military campaign than a rumour. This is a particularly appropriate depiction of war after September 11, when we have no storyline upon which to hook our war, and no higher view than our own fears. While many of us have actually adopted fearfulness as a hobby over the last few years, *Doctor Who* is often about whether the dangers we encounter genuinely deserve our fear. The

show switches genre every episode (e.g. historical romance, dystopian cyberpunk, Dickensian ghost story, young adults novel, WWII military drama), but these different styles only become intelligible through the conventions of the show's true mode - horror.

Unlike a psychological novel that allows a patient reader to deepen her experience with, say, an overarching plot or characters we sit with over time, every *Doctor Who* episode feels like a first episode, a discrete *tabula rasa* for new monsters, settings, conflicts and supporting characters. (The only recurring characters in *Doctor Who* are the Doctor and his companion.) The horror plot is well suited for television so forgetful of larger themes, because horror restricts the story to purely local mysteries. The emphasis in *Doctor Who* is not on season-long arcs (though these do exist), but on episode-specific questions, enigmatic threats whose sources only reveal themselves halfway into the episode. Will she leave the room alive? What is the shadow behind the door? These disposable questions hypnotize us, rendering any subject matter automatically interesting, though the show's nouns are interesting as loud noises in the plot rather than as any intrinsically interest content. *Doctor Who's* small jolts of story - the shots lurching from the monster's viewpoint; expendable characters dying first; the villain acting menacingly but never revealing himself until the third act - slips over any other genre, which is why the show is so different each week but never feels like pastiche.

Though *Doctor Who's* horror has an innocuous, pulpy tang to it, horror itself has become our representative mode. Consider how readily some of our biggest blockbusters - *The Lord of the Rings*, *Spiderman*, *Harry Potter*, and the *Star Wars* franchises - avail themselves of horror conventions. (The former two are even directed by former horror-comedy directors.) These works are not just horror films masquerading as family films. They present life as a dark, unceasing slog in which we are epic heroes (rather than individuals) whose world view is fearful and moral (rather than aesthetic, capitalistic, etc.) and who are always besieged by Manichean forces (rather than positively building a better life). This world view of tragic idealism is not fundamentally dissimilar from that of the 'war on terror'.

A recent *New Republic* article by John B. Judis described the work of psychologists Sheldon Solomon, Jeff Greenberg, and Tom Pyszczynski,



'The new *Doctor Who* is a war show. The incidental music is symphonic, martial and silly, the show's scale ever-expanding to a wider, more hopeless portrait of apocalypse...'

who argue two premises: first, that September 11 forced us to recognize our own mortality; second, that this 'mortality salience' initiates a second psychological response, which they term 'world view defense'. World view defense is characterized by an antipathy towards other groups, religions and nations, and, in Judis's words, 'the protection of tradition against social experimentation, of community values against individual prerogatives ... and of religious dictates against secular norms' (2007). These premises - a fear of death and a fearful, rearward orthodoxy - describe the ideology of tragic idealism. The first premise threatens the private self, which in films like *Lord of the Rings*, is shallowly moralistic, exclusively brave and teetering always on the verge of fear (for that is what it means to be always brave). The second premise threatens the public sphere, which is depicted as both dangerous and the only value.

These films rely on horror tropes, rather than those of action or science fiction, because horror allows them to best dramatize the fear of death. This fear reveals itself in one of tragic idealism's favourite visual conventions: sublime spectacles of urban destruction. The destruction occurs at a medium level, more apocalyptic

Articles The Lovely Smallness of Doctor Who

than social breakdown (e.g. *Escape from New York* [1981]) but more personal than apocalypse (e.g. *Independence Day* [1996]). The magnitude of carnage in a film series like *The Lord of the Rings* is never about character; rather, the danger lays underneath the characters like a field, containing them into a threatened collective. Because the fear is social and the danger absolute, any sense of civilization is submerged, leaving only primal values - security, the display of strength, the fear of impurity and death. The first season of *Heroes* is a vision of New York in ruins: the new J.J. Abrams film (*Cloverfield* [2008]) beheads the Statue of Liberty; and in *X-Men 3* (2006), the Golden Gate Bridge is torn from the ground by a man who essentially spends the film training terrorist cells in the woods. (The film ends with the US military annihilated by infernal fire.) The *Transformers* (2007) film even offers a fighter jet hurtling through a skyscraper, an image the poet Joshua Clover called 'the Rosetta Stone of American cultural imagery for the foreseeable future' (2007). These nightmares are really rehearsals, even if they are rehearsals that occur after the fact. Trauma provokes a need for repetition, Freud wrote, and when on *Doctor Who* one sees an alien starship shattering Big Ben, the President being vaporized or armed soldiers storming the streets of London, it's not hard to see the World Trade Centers smoking behind the images.

But works of tragic idealism not only offer dioramas of our public fears - they model something more private. They are stories of moral puberty, training films that show us how to evolve from innocent child to questing knight. The protagonists are orphans, like Peter Parker, Anakin Skywalker and Harry Potter, who find themselves redeemed by the public they protect. Every *Harry Potter* film ends with an authority figure assuring Harry of his virtue and *Spiderman* routinely finds himself racked by saintly tortures, only to find himself rescued by the very people he had been trying to save. Whereas the typical narrative in American film has often been that of authenticity, the hero fulfilling his dream by being utterly himself, *Harry Potter* and *Spiderman* are really films of responsibility. In these films, the hero's private life has been amputated. We follow the velocity of the self as it flies up towards its goal and find that it leads right back to the public, the only goal. *Doctor Who* is no exception: frequently, the Doctor must choose between different types of



'Depicting the threats as always nearly overwhelming, the tragic idealist narrative presents life as a frightening quest.'

responsibility (for example, saving his companion or saving the Earth) and, in the third season finale, everyone on a now decimated earth chants the Doctor's name in unison (i.e. 'Doctor'), magically and embarrassingly rehabilitating him back from near death. These works charge us with being not just good people, but citizens willing to sacrifice ourselves for the community. Under the light of ubiquitous danger, individuality reveals itself as a scrawny virtue, less crucial than utter vigilance against the enemy, the black horde so eager to contaminate us with otherness.

Depicting difficulties as always nearly overwhelming, the tragic idealist narrative asks us to view life as a frightening quest. This fearfulness has pernicious public consequences, but it has a rather debilitating private one. Tragic idealism encourages us to think of ourselves as victims. In a typical Hollywood film, the protagonist is sympathetic because he is good; he may flaunt an adorable child or possess the wife, house and upper-class profession that the audience desires. Tragic idealist films like *Spiderman* and *The Lord of the Rings* do the opposite: the audience recognizes a fragility that they themselves possess; they recognize that their life is also a struggle. Similarly, the war on terror's problem for private life is that it offers itself as an all too ready analogy. We eagerly puff up our troubles, conflating our life with military actions we know

nothing about. We find ourselves infected with the belief that life is warlike and pessimistic, and fret only on our encroaching death. While anti-war critics argue that we cannot wage war on something as diffuse and conceptual as 'terror', right-wing hawks already imagine all of life as war. The war on terror is merely a literalization of their pre-existing world view. The potency of this metaphor - 'life is a struggle' - has allowed the Right to frame its recklessness as valiant masculinity, a willingness to face the unpleasant truths of war. (Curiously enough, this has allowed the right wing to monopolize the idea of the romantic hero, a role that once belonged to the Left via icons like abolitionists, muck-raking journalists and civil rights leaders.) *Doctor Who* does share tragic idealism's gloomy view of the universe, which it depicts as ominous, fragile and sweaty. In fact, as the show progresses with little elaboration as to exactly why the Time War was fought, the Doctor seems less like a survivor of war than someone afflicted with the universal hurt of being alive. But *Doctor Who* deviates from tragic idealist narratives in one crucial respect - it does not admonish us to be afraid.

Like other didactic art focusing on one exemplary character - say, the *New Testament*, the *Analects of Confucius*, or *Rocky* - *Doctor Who* advocates a specific way of living your life. The show may not be great art, but the character of the Doctor shows us what a progressive war hero might look like: hopeful, humane, idiosyncratic and gentle, not Lancelot or Superman, but Jimmy Carter and Carl Sagan. What distinguishes the Doctor from the knights of tragic idealism is his harmlessness. While the tragic idealist film focuses on pornographic violence, the Doctor defeats his enemies without force (e.g. playing a church organ loud enough to deafen a hulking mutant or telling a haunting godlike child to go to his room). The show is endearing in its willingness to embarrass itself - its love of eccentricity and pacifism, its incessant optimism and its willingness to eschew anything that seems overtly cool or badass. The Doctor isn't an alpha male or a warrior guardian of his folk - he's a charismatic dork whose accoutrements include a screwdriver, psychic paper, 3-D glasses, an orange, a banana, and the Tardis, the Doctor's rickety time machine stuck in the shape of a blue police call box. This trophy of technological superiority, the Tardis, isn't a gleaming spaceship, but a wonky lemon [A "lemon" is an Americanism used to refer to a malfunctioning car], rarely landing



'The potency of this metaphor - 'life is a struggle' - has allowed the Right to frame its recklessness as valiant masculinity, a willingness to face the unpleasant truths of war.'

where and when the Doctor wants. Its connotations are not militaristic or technological, like most science fiction accoutrements, but social: the icon of the blue box combines British nostalgia, obsolescent modernization and mysticism, not unlike C.S. Lewis's lamppost polishing the wilderness with its light. If the tragic idealist hero is a flattened knight, shorn of the irrelevant idiosyncrasies that the rest of us possess, a dumb automaton to his destiny, the Doctor is devoutly unheroic. He's a scientist, but one that possesses what William James called tender-minded values: idealist and optimistic, rather than fatalistic. He represents the scientist as artist, a mascot of quirky humanism set against the fungible monsters that have always been the show's villains, the flocks of Daleks, Cybermen and Autons that gather into a mob.

In *Doctor Who*, the hero differs from the enemy not necessarily because he is heroic, but because he is himself. This individuality is muffled by public commitments in *Spiderman* and *The Lord of the Rings*, but *Doctor Who* is always brushing its flashlight on the spotty humility of the self. The Doctor is frequently fallible, vain, petty, annoying, inconsiderate and even cowardly in the most admirable, human way: he is too human to make utilitarian choices. At the first season's



'What distinguishes the Doctor from the knights of tragic idealism is his harmlessness.'

end, Eccleston's Doctor encounters a seemingly infinite army of Daleks, the alien species that killed his own people. He has a weapon that could annihilate them, saving humanity, but at the cost of destroying Earth. The Doctor knows that activating the weapon would be the utility-maximizing choice, since defeating the Daleks would be 'worth' destroying the Earth for, but when the Daleks ask him if he's willing to be a killer or if he's actually just a coward, the Doctor throws down his weapons and says, 'Coward. Any day.' In a tragic idealist work, the moral of this scene would be that the Doctor simply isn't brave enough. The opposite is true - the Doctor is brave enough to understand that he doesn't need to be afraid of fear - that he is so at ease with the world that he knows that the realization of his fears is not the worst possible outcome. The show rejects any heroism distinguishable from being an admirable human being.

Tennant's Doctor is frequently amoral, but Eccleston's tenure on the show often explores the way that war distorts us not into heroes, but into crass avengers. In one episode, the Doctor captures a villain who asks him what moral right he possesses to imprison, judge and execute her. In another, the Doctor finds himself locked up with his doppelganger from the other side: apparently the last Dalek soldier in existence. When the Doctor yells that the Dalek should kill itself - 'Why don't you rid the universe of your

filth? Why don't you just die?' - the Dalek replies that the Doctor would have made a good Dalek. The Doctor recoils - he realizes that he's become a bigot. If *Doctor Who* is allergic to supposedly heroic virtues (Strength! Manliness! Duty!), this is because the Doctor reminds us how many valuable qualities do not have an obvious moral valence: creativity, intelligence, enthusiasm, curiosity, humour. Other escapist heroes act because it is their job (*James Bond* films, *Star Trek*), out of filial guilt (*Batman*, *Spiderman*), or out of the self-interested desire to protect one's own clan (*The Lord of the Rings*, *X-Men*). The Doctor, however, is a *flaneur* of crisis. He intervenes not just out of benevolence; he does it because it's fun.

In fact, after watching the stern, constipated faces of Tolkien's knights, it is astonishing to watch *Doctor Who* - he's so much happier to be alive than you are! Happiness is not a bovine state of passivity, as is often assumed, but an active engagement with the world. Happy people are not dupes; they are sceptical of self-important states - sorrow, regret and other occasionally vain emotions. This is why the heroism in *The Lord of the Rings* and *Spiderman* seems not just portentous, but unsustainable. Desperately clutching at their goal, perpetually ready to give up, the heroes in these films are workaholics. Yet it is possible that such severity is a more naïve approach to the world than simple joyfulness. These tragic idealist works think about ethical questions the way a child would - dualistic, uncontroversial, urged on by authority. In real life, most of us find ourselves less troubled by ethical dilemmas than logistical ones, such as 'What shall I eat for dinner tonight?' or 'When will I have children?' This does not mean that we are immoral or even amoral creatures, but that our concerns rarely take on the flavour of a moral struggle. When they do, our

moral choices do not really impose themselves on us like a mission; rather, they are continuous with our beliefs, our personality and self. They are our opinions, not our destiny. If we are willing to recognize happiness as a serious rather than trivial state, then the seriousness of tragic idealist works appears tyrannical - a fatalistic cynicism disguised as morality, rather than a liberalism that sees humaneness as the highest value.

Doctor Who is less rousing, less baroque and operatic, than any of these tragic idealist works, but it has power in its smallness, its clunky desire to stuff all its wobbly space stations and grimy cobblestone streets with the local colour of existence. The show offsets its horrific content with its tone, which is springy, humane and optimistic - its model of life is arguably that of tourism, the curious adventure. For *Doctor Who*, life is not a struggle between good and evil, but a frolic. The show tells us that we may always feel alienated, we may remain orphans and fallible nomads, but we can respond to war as we might to any other problem - eclectically and kindly. The answer, in other words, isn't questioning and bravery, but the shoddy old comforts of liberal humanism and the dreamier animating force behind this ideology - romantic hope!

III

But what if *Doctor Who*'s optimism is just escapism? The show is actually about this question. The Doctor is less a fully realized novelistic character, capable of change and growth, and more of a self that one can wear - magical, incapable of suffering harm, always wielding the pat solution. In every episode, he and his companion slip into a new cultural milieu - say, Dickensian England or a party at the end of the world; they are docents to this escapist reality. Yet because the Doctor can never escape the dangers inherent in life, his wonky giddiness often seems less like a real solution to tragedy, than a bad way of coping, a desperate refusal to accept consequences and grow up. In the new show, the companions' families are always nagging the Doctor and his companion away from intergalactic wonders and back towards a responsible domesticity. But *Doctor Who* is also critical of what such an adulthood might mean. As the show frequently points out, the worst thing that could happen to the Doctor isn't death; it's maturity - having to settle down, just like his viewing audience, and get a job.

In *Night and Day*, one of Virginia Woolf's early novels, Woolf describes the thoughts of Ralph Denham, a day-dreaming lawyer who can't help arriving at 'the melancholy belief that life for most people compels the exercise of the lower gifts and wastes the precious ones, until it forces us to agree that there is little virtue, as well as little profit, in what once seemed to us the noblest part of our inheritance' (1919: 104). *Doctor Who* criticizes work for the same Romantic, rather than Marxist, reason - it's disappointed in work for the way it hides our own potential from us. (The first episode of the new series begins with the Doctor literally rescuing Rose from her job.) In *Doctor Who*, the banality of working life is a ceiling that slowly lowers into a cell. When the show confronts the Doctor and his companion with the prospect of employment (e.g. in episodes like *School Reunion*, *The Satan Pit*, *Human Nature* and *Blink*), we note that the Doctor can master positron flows and Roman history, but finds work incomprehensible. It's his companions who are stuck doing manual labour: the Doctor twice works as a teacher, while Rose staffs a school cafeteria and department store and Martha scrubs floors as his maid. The Doctor eventually ejects Rose back into her home town of Cardiff, saving her life, but crushing her spirit. How can she go back to the department store now that she's seen the stars? At a local deli, Rose's boyfriend asks her mother if she's tried the new pizza place. 'What's it selling?' Rose's mother asks. He says, 'Pizza.' 'That's nice,' she replies. 'Do they deliver?' Rose scoffs at this lively dialogue and cries out: 'What do I do every day mom? What do I do? Get up. Catch the bus. Go to work. Come back home. Eat chips. And go to bed. Is that it?' Rose's boyfriend replies, 'It's what the rest of us do.'

This fatalism is a popular form of misery in our culture. Its popularity comes from how easily it lets us romanticize the dismal banality of life. Consider poems by Eliot and Larkin, Henry Greene novels, *The Office*, the cruddy humanism of *Vice* magazine's 'Do's and Don'ts', and the self-loathing despair of comic book artists like Chris Ware, Daniel Clowes and Ivan Brunetti. These works possess what might be called a nihilistic empathy. They recognize that we are grown-up and fallen, that we will not achieve our dreams, yet they do not inflict us with the miserable nature of life - they console us with it. Because everyone suffers, we are not alone in our pain. Yet *Doctor Who* tries to explain why such banality may be valuable. In a two-part episode written

by Paul Cornell, the Doctor becomes human, but still dreams of his past adventures every night, implying that if the Doctor were human, *even he would fall prey to the show's escapism*. Screenwriter Cornell then turns this escapism on its head. By the story's end, we learn that the Doctor's fantasies are actually about being human; his escapism centres on the mundane wonders he can never experience: marriage, children, dying of old age. When the Doctor (and in another episode, his nemesis, the Master) turn into human beings, stepping down from their godly Time Lord state, we notice instantly how much more interesting, less cartoonish and how much kinder they have become. Unlike *The Lord of the Rings*, a franchise purportedly about the special-ness of regular people but really about their irrelevance, *Doctor Who* celebrates the lovely smallness of human scale. The show loves to depict daily life - doing the laundry, Christmas dinner, tea and bath-robes - because these details collect into a thread that leads us back to the texture of being alive.

In one of the best episodes, *Father's Day*, Rose gets the Doctor to take her back to when she was an infant so she can see how her father died. To the Doctor's surprise, Rose sprints up and saves her father's life. The results are hardly a happy reunion: the obvious monsters lunge down at them, evil time pterodactyls [come to 'sterilize the wound in time', and more disappointingly, Rose's father turns out to be an inept shyster, trafficking in tonic water and Betamax tapes. When he asks Rose what kind of father he was, she tells him a beautiful lie: he read to her before bedtime every night, she says, and took the family on picnics every Saturday. The moment is not just sentimental - it is *about* sentimentality in a rather personal way. Since Rose's father obviously did none of these things, being dead, Rose is actually revealing to him the idealized childhood that she's always longed for. Her father grasps this immediately. He knows he'd be an oafish dad, not an infallible one, and replies, 'That's not me.' The show punctures Rose's sentimentality, but really trades it for another - a humanism that is sceptical to attribute life with any glory, but eager to engage with the banality that remains.

But unlike, say, *The Office*, *Doctor Who* offers these mundane scraps of life unsullied by any fatalism. It's escapist, but pedagogically escapist. In one episode, a woman (Donna, played by Catherine Tate) spends a day with the Doctor, but turns down his offer to travel with him - the adventuring is

inspiring, but too dangerous. When he asks her what she'll do next, her answer is surprisingly mundane for a science fiction romp: for starters, she says, she'll quit her temp job. The show encourages us, strangely enough, to be more like the Doctor - a self-actuating, curious soul who is never suffocated by his context, never cowed by hierarchy and always the main character of his own life. If the parental figures in our fantasy films are all distant fathers, powerful wizards unwilling to help us, the Doctor resembles humanity's nurturing mother, always giving pep talks about mankind's special potential. Thus, while a young man may identify with a superhero's secret identity because he believes that he too is a loser, *Doctor Who's* point is that no one is a loser. Our hopes can intersect with our ordinary lives and ordinary life is not a cell, but a germinal seed from which our dreams may sprout. *Doctor Who* is escapist, but it tries to plant escapism into something human, so that it can arise out of our smudged lives. Once the target of our escapism becomes our own ambitions, rather than the vicarious glamour of another, then it is no longer escapism. It becomes hope. •

Contributor details

Ken Chen is Executive Director of the Asian American Writers' Workshop. He is a graduate of Yale Law School and recently worked on an asylum case involving post-September 11 civil liberties and FGM (Female Genital Mutilation). His work has been published in *The Boston Review of Books*, *Radical Society*, and *Best American Essays 2006* and received a notable mention in *Best American Essays 2007*.

References

Clover, Joshua (2007), 'Transformers, Jane Dark's Sugar High!'. July 23. Available at: <http://janedark.com/2007/07/transformers.html> [accessed July 23, 2007]

Judis, John B. (2007), 'Death Grip: How Political Psychology Explains Bush's Ghastly Success', *The New Republic*, 27 August.

Available at: <http://www.tnr.com/docprint.mhtml?i=20070827&s=judis082707> [accessed August 27, 2007]

Woolf, Virginia (1919), *Night and Day*, 10th ed. London: Penguin Books.