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April 10, 2023

DO YOU SEE IT

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An abstract of  
a thesis submitted to the Faculty of Emory College of Arts and Sciences  
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## Abstract

### DO YOU SEE IT

By Alexis Catherine Jenkins

*DO YOU SEE IT* is a psychodrama story that follows Mya Carter, an aspiring musician, who struggles to balance her pursuit of music and finding a medical solution for her undiagnosable skin disease. This short film represents the completion of all stages of production consistent with the process in the motion picture industry.



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You all have served as an integral piece of a significant season of my life.

## Land Acknowledgment

This note acknowledges the Muscogee (Creek) people who lived, worked, produced knowledge on, and nurtured the land where the locations of filming are now located. In 1821, the Muscogee were forced to relinquish this land. In recognition of the sustained oppression, land dispossession, and involuntary removals of the Muscogee and Cherokee peoples from Georgia and the Southeast, I sought to honor the Muscogee Nation and other Indigenous caretakers of this land by humbly seeking knowledge of their histories and committing to respectful stewardship of the land.

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## Personal Statement

The idea of pursuing medical racism as the overarching theme for my thesis became clear to me after watching the visceral execution of George Floyd in May 2020 (Hill). The focal point and widespread outrage of the video clip concentrated on the police officers violating a plethora of legal and humanitarian ethics. However, the total length of the recorded event highlights the negligence and lack of urgency of the delayed and inattentive response of the paramedics to Mr. Floyd's body once they arrived to the scene (Harvin). This phenomenon inspired me to interrogate the covert prejudices and bigoted practices in the medical field in America, as John Hoberman writes in *Black and Blue: The Origins and Consequences of Medical Racism* (1-17). *DO YOU SEE IT*, at its core, follows an unraveling family dynamic during a desperate time. The story navigates the collision of two contrasting grieving styles between a young girl and her mother over financial pressures, predatory coercion from a medical authority, and a perceived familial loss. On a subtextual level, this film invokes commentary on how structural racism—systematically flawed institutions (Yearby et al.)—can profoundly impact and irrevocably disrupt the welfare of family structures and relations (Wilcox and Rowe).

Over the past few years, I have analyzed the long history of medical mistreatment and brutality from which Black Americans have generationally suffered. My interdisciplinary study of this topic has equipped me to comment on this national plight through the lens of my artistic craft. Throughout this thesis, I spearheaded the development of a film production that depicts the intimate account between a despairing daughter and a struggling mother who are the next targets of medical racism. My persistent adherence to and vivid vision of this narrative concept leads me to believe I did not choose this story independently. Instead, its timeliness, gravitational pull, and the palpable responsibility I have felt to share it since 2020 reveal that it chose me in return.

Three years later, this film is a response to not only my video observation of a cohort of first responders' situational negligence but also a symbol of institutional failure toward Black Americans throughout history. This is *DO YOU SEE IT*.

## Literature Review

The following literature review contains descriptions and analyses of the extensive research I have conducted for this film production and includes a first-hand reflection on my thesis process throughout this past academic year. The contextual parameters of this scholarly review prepared me for the many evolutions and stages that this production underwent.

## RESEARCH

*Medical Experimentation on Black Americans.* Libraries of archival medical records document the exploitation and mutilation of enslaved African Americans, dating back to the southern Antebellum period in the early to mid 1800s. Deirdre Cooper Owens' text *Medical Bondage: Race, Gender, and the Origins of American Gynecology* identifies this particular branch of structural racism as medical racism. She claims it is an anthropological paradigm of tactics for furtive bigotry and eugenic practices in healthcare facilities (109). The subtext of this thesis film bears the history of the hidden yet disenfranchising truth that has existed for many years in the folds and fabric of American racism: unethical, and often nonconsensual, medical experimentation on Black Americans.

In her fifth chapter, "Historical Black Superbodies and the Medical Gaze," Owens uncovers the myriad of ways white society and white medical practitioners reduced the value of Black people to their physical bodies during slavery. These reductions included the presumed resilience and supposed heightened pain tolerance of Black bodies, which opened the floodgates of perverted curiosity (111). Owens vocalizes that even the diagrammatic representation of human anatomy as we know it, for example, derives from the practices of involuntary subjugation of African-American victims (109), with women bearing the brunt of this abuse (108-121). These harmful conclusions permitted white people to dissect, mangle, explore, and

sacrifice the internal landscapes of Black people's bodies in the name of medical advancement (121).

Owens paints the picture in the context of consent: "The term 'medical superbodies' helps clarify how the unknowing gynecological contributions of these women fit into past dialectics surrounding issues of biology, race, normalcy, and medicine" (109). White people did not view Black people as sentient nor consenting beings, much less as equal peers. Thus, white doctors exploited this leverage to use Black bodies as a biological playground. The overwhelming social science literature and social justice advocacy on racial obscenities distinguishes the matter as a significant problem site of study, most especially pronounced in academic writing. However, though the volume of critical analysis via written publications expands as John Hoberman expresses in *Black and Blue: The Origins and Consequences of Medical Racism* (1), my thesis works to contribute to this polarizing conversation, specifically through cinema as art-activism.

Although the practice of invasive probing of Black Americans in clinical research may seem far outdated, certified research studies, scientific data, and posthumous biographies – such as that of Henrietta Lacks, whose death was just 70 years ago – prove that this is still a pertinent issue to discuss. With relevance to Lacks' case, in 1951, her cancer cells were stolen and outsourced for research for the immortalization and reproducibility of the HeLa cell line. Scientific writer Rebecca Skloot, author of *The Immortal Life of Henrietta Lacks*, explores the reports of Johns Hopkins doctors, medical staff, and clinical researchers nonconsensually extracting and sampling Henrietta Lacks' tissue cells for clinical studies. Skloot's investigation highlights how Lacks' experience was "illegal, immoral, and deplorable" (263) and how modern microscopic studies and discoveries in human biomedicine continue to benefit from this human rights violation in present-day studies.

Historical events as complex as Lacks' elucidate and contextualize the current distrust that Black individuals have toward the American healthcare system. When the initial issuance of Coronavirus vaccines was instated and campaigned for across the United States in 2020, media outlets observed Black Americans' hesitancy about the legitimacy of COVID-19 treatment (Ober). This demographic critically questioned the safety of the newly formed and quickly distributed injections based on recent and historic healthcare experiences in America. Many skeptics backed their justified wariness with references to the unethical practices exhibited in The Tuskegee Study of Untreated Syphilis in the Negro Male (Ober). Similar to Lacks' account, the nuances of the Tuskegee study involved white physicians influencing their racialized ulterior motives in treating their Black patients (McVean B.Sc.). This communal guardedness pinpoints an underlying keynote I aimed to validate in my thesis – the visibility for the many victims whose welfare was violated or threatened under the care of medical institutions.

With the same title as Skloot's book, the Emmy-nominated HBO film (Wolfe) uncovers the anonymization of Lacks' first-hand recollection of events through her family's perspective. Both written and filmic works recognize Lacks' personal story on a commercial stage and poetically steer the conversation of medical racism to the forefront of literary and cinematic focus. I chose to illustrate the abuse of power and trust in American medicine in my film with a resemblant goal. Through this thesis, my scholastic and art-activist roots push the discourse regarding covert structural racism to the foreground of the independent filmmaking sphere.

## SCREENWRITING

*Research to Screenwriting.* To produce a strong film, one must begin with a strong screenplay, and in order to write a strong screenplay, certain storytelling elements must be in order. When crafting the script for my thesis, I focused extra attention on developing the characters, building



the diegetic world, and setting up a clear narrative structure. Due to the limited runtime of this film, it was vital to meet the mark on these principles and convey my ideas clearly and succinctly. As I completed the research stage of this project and began scripting, I identified and extracted the core of my story amidst the summation of my scholarly research.

Throughout production, I faced the most frequent and significant changes to my original vision during the writing process in simplifying the story. Linda J. Cowgill expresses in *Writing Short Films* that the defining characteristics of a quality short film are focus and specificity (14). When I started working on the short screenplay, I felt an intrinsic responsibility to include nearly every part of my research into the story. Additionally, the early script drafts simultaneously conveyed three different storylines with equal narrative hierarchy through flashbacks and dialogue-heavy expository scenes. These A, B, and C plot lines included Mya's illness, Esme's financial predicament, and the relationship between Mya and her seemingly deceased father, Thomas. Both experiences produced a screenplay resembling the beats of a feature-length film more than a cohesive short story. Significant condensation, specificity, and focus resulted in the revised script (Appendix A) more effectively and concisely exercising a show-don't-tell strategy by progressing linearly, fixating on present-day conflicts, and prioritizing scenic action over dialogue.

In addition, I revised my writing approach based on Aristotle's three-act structure mentioned in Paul Chitlik's book, *Rewrite, 2nd Edition* (36-37). Employing this traditional layout as a writing guide established a more simplistic apparatus to support the refinement of my storytelling approach. This method enabled me to more succinctly generate captivating yet sensible external motivations, obstacles, and clear character arcs. For example, within the first page of my locked script—and thus, the first minute of the final film—a third of the settings, three

of the characters, and the overarching conflict are introduced. In practice, Aristotle's three-act structure provided efficient ways to distinguish the fundamental variables of each beat as benchmarks in the story.

Furthermore, the overall premise of Chitlik's text emphasizes that writing is a recursive process. Using his text, I became more efficient at differentiating the necessary information that *must* remain from the surplus that I, as a visual thinker, *wanted* to salvage. Throughout this thesis, I learned how to approach the scriptwriting process as a writer rather than a director. I formulated a visual outline draft (Appendix B) for my revised script idea, preserving the filmic qualities of the story while incorporating a cohesive structure as a means to a clear beginning, middle, and end. These revisions clarified each intended detail I would later need as a director in rehearsals and the storyboarding process. The progress of the written story allowed the production to have direction and definition.

*Cultural Dynamics.* The final learning curve I experienced in the writing stage was navigating the cultural implications of sensitively representing a struggling, Black, single-parent household. As a Black woman writing Black characters, it was a much more complex process than I anticipated. Firstly, I needed to effectively portray the authenticity and relatability of a people through words, mannerisms, and world-building. With this, I understood that a significant part of this responsibility meant incorporating the colloquial language and dynamics of a witty mother and her stubborn child, using the framework of African American Vernacular English. The other concern with cultural dynamics involved being aware of cinematic tropes regarding race, gender, and class. Despite Esme's objectively brutal financial reality, it was critical to avoid typecasting her as an angry Black woman. Likewise, I evaded cliché cop-out symbolism relating to hygiene or education when depicting low-class status. Altogether, it is true that the story itself follows the

plot-driven conflict of an unfortunate life circumstance. However, the odds are that the demographic of characters I chose to compose would inevitably harbor the weight of blanketed representation, whether I wanted them to or not.

The struggle I ultimately chipped away at was forming a non-monotypic physiology, sociology, and psychology for my characters, especially Esme Carter. This challenge required their composition to include as much dimension, depth, and dynamism as possible to create the space for these characters to experience interesting emotional arcs. To navigate this crossroads, I returned to Cowgill's texts. Her work prompted me to consider that "The 'why' relates to the protagonist's conscious motivation; these are the reasons he understands and gives for the pursuit of his goal" (39). Specifically for Esme, her "whys" represented "why not this emotion instead," "why now," and "why me [Esme]." When I determined the "whys," I then wrestled with the "hows," including "how to diversify her personality amidst trials" and "how to distinguish the difference between and timing of her mild irritation from provoked fury."

To steer away from stereotypes, I stopped referencing media representation of Black women, which demonstrates a heavily filtered and singular interpretation of a people and started observing a variety of real people. Some of the most vibrant and unique personalities I know are Black women from different generations, including myself. In a sense, I conducted research in textual conversations, questioning and observing, "How do they or I instinctually respond to defeat?" versus "How do they or I act when justice is served?" Making these fundamental connections enabled my writing to read more naturally.

Overall, this project provide me with the space to be a scholar but also permitted me to be a writer and filmmaker, respectively. This production undoubtedly allowed me to interweave my different skill sets together—research, observation, and writing—and allow them to shine

independently at their appropriate times. Though I grappled with when and how to manage these tradeoffs early on, I eventually got my second wind and worked around the clock to recover and properly deliver a worthy story.

## DIRECTION

*Preparation of the Performance.* Storytelling is the axis point that bridges together all film departments, personnel, and production stages to support the in-front-of-camera performance. The desired results of compelling performances, in part, depend on how well the director aligns the actors' efforts with the story's goals. In making decisions, as the director, I had an obligation to be mindful of and consistent with the script while guiding talent through their interpretation of it. Texts such as Judith Weston's *Directing Actors* divulge pathways for the director's work related to the performance. All throughout her writing, Weston emphasizes the director has due diligence to hone the actors' psychological and emotional training to evoke a promising performance. My directorial journey reflected her commentary, as I was hands-on in supporting the actors in connecting the script work with aspects that identify back to their core. This type of communication allows the actors to understand the narrative stakes better and create opportunities for their characters.

The defining moment that solidified the official selection of Zynia Cooper as Mya Denise Carter and Altamese Rogers as Esme Carter occurred during their chemistry read when I asked if they would voluntarily be friends with their respective characters. Their responses to this question assured me that the actresses could connect with and assimilate into their characters' very real, emotive, and humane qualities despite the heroines' flaws. During our first rehearsal and continuing into the start of filming, I set the tone by prioritizing breathing exercises, physical and vocal warmups, and icebreaker activities. This directorial instinct allowed the talent to rid

themselves of any nervousness and refocus their attention on the story and characters. Considering the two lead characters' relationship demanded convincing chemistry, I was particularly interested in guiding them through partner warmups to build trust between both actresses. One of the main warmups I conducted was a mirroring exercise, in which one actress would mime, and the other would follow her lead until they traded off. This activity aimed to maintain their eye contact, engage the surrounding space and their bodies through their controlled movement, and trust the decisions of their scene partner.

Later in the production, we shifted to more appropriate warmups for larger groups when the supporting and day-player talent joined rehearsals. Ultimately, warmups became a staple feature that prepared the actor for their performance by allowing them to become more comfortable in their own skin and establish a positive rapport among the ensemble. Throughout her work, Weston highlights the significance of individual emotional beats relating to our human emotional capacity to feel, emote, and emphasize. When an actor is willing to be vulnerable and commit to their characters, only then can they begin to produce memorable performances that allow the audience to better engage with the story.

The most effective strategies involved me asking the actors in-depth questions, and they, in turn, sought my thoughts on their characters' circumstances, relationships, and personalities. I intended to gauge their insights into and comprehension of their characters and the story. I used in-rehearsal discussion prompts and assigned homework, such as creating character biographies and diary entries, that encouraged them to not only break down scenes by who, what, when, where, and why, but also to understand the more complex imagining of their characters' emotions and arcs. In initial meetings, I employed a technique built off Uta Hagen's famous "Nine

Questions Exercise" (Ates) (see also Appendix C) in which the actor responds, in first-person, to a series of questions from the perspective of their character.

After accomplishing the foundational interior character work, the actors could better read between the lines of the script to play the subtext. Their strong character and story choices assured me I could trust them to use the script as a canvas rather than sacrosanct, which informed my judgment on allowing them to slightly improvise the day of principal photography. Once it was time to film, we had developed such a foundation of trust, that when one actor went slightly off-script, the other recovered well and played the story, not the script. Their subtle improvisation produced a more natural performance overall. It also proved how the actors sincerely took the responsibility of bringing these characters to life.

*Departmental Collaboration.* The most artistically charged aspect of the directorial process was the most collaborative. This film's pre-production stage, a crucial transition period between the script and the screen, involved a team of two dozen people. Most of my creative consultation involved the camera and art departments. My Director of Photography and I were determined to illustrate the unconventional and disturbing narrative themes, using character arcs and emotional tensions as our guide. To achieve this storytelling goal, we pulled visual and narrative inspiration from various film and television works. *Get Out* (Peele) and *When They See Us* (DuVernay) were ideal references for covert, racially-motivated surgical operations. *Euphoria* (Levinson) was a leading model that depicted a strained mother-daughter dynamic. As well, in order to aesthetically portray the narrative dysfunction, we employed a lens kit that produces impressionistic distortion through skewed bokeh and subtly distorted edges. The visual quality and our compositional framing choices delivered clever and signature visuals—some uniquely motivated by specific characters.

My Director of Photography and I dissected the emotional significance behind each shot, referenced film and television stills and scenes, and storyboarded for hours over multiple days. We eventually landed on a series of shot types that precisely portrayed each character's emotional arc. For example, the tracking movement reveal of Esme at the dinner table (Appendix A, 1) signified that she was always one beat behind Mya until, eventually, later in the film, she was no longer. As well, the off-puttingly close framing of Doctor Silvano in both the exam room (Appendix A, 2) and operating room (Appendix A, 8) scenes intentionally engage tight, off-centered, canted, and/or low-angled shot types to allude to his abnormal character traits and heightened power hierarchy. There are endless decisions we pivoted back and forth on, but ultimately our mapping of the cinematic landscape met the intentions of the beats in the screenplay.

Cinematography only fulfills part of the visual aesthetic goals. The Production Designer further fleshed out the world-building by designing and personally handpicking the practical elements seen in each shot, such as props and set decoration. She and I spent weeks discussing the idea behind Mya's room, capitalizing on a mixture of the epitome of teenage maximalism and an obsessed music fanatic. Regarding the exam room, a special touch I strongly desired to incorporate was avian symbolism, inspired by Alfred Hitchcock's fear and the historical representation of birds in his work, such as *The Birds*. Though these details may be an abstract easter egg, the principles behind them forced me to be intentional and specific when drawing out thematic connections. The diligent attention to this decorative incorporation is emphasized in the final frame of Esme (Appendix A, 9), when a framed bird photograph shares the shot with her as Doctor Silvano escorts Mya to the underground clinical trials while wearing a bird tie.

Furthermore, film is the only medium that combines visual elements with sonic characteristics, whether narrative or experimental. To that end, music offers additional subtextual details of who Mya is with the genres she listens to. Her exploration of music doubles as a form of escapism with memories of her father and a driving force to build his legacy through her, beginning with the pursuit of her school's music program. Moreover, crafting the musical profile for this film required tactility and attention to detail. I collaborated with two composers, one specifically responsible for the film's ambient score and the other for composing the end titles song. The latter artist and I have partnered on a complete soundtrack, developing a lineup of five tracks that share the perspective of Mya Carter, Esme Carter, Doctor Silvano, and Thomas Carter, and the featured end credits theme song. In addition, the ambient score mirrors itself throughout the film, serving as its connective tissue between the beginning and finale with a repeating melodic scheme. This repetition bridges the otherwise fleeting pieces of the story, allowing them to breathe and parallel to other important moments.

Without a doubt, the rigorous demands of collaboration stretched my capacity as a storyteller and creative thinker, and my perspective on how audience members engage with stories. I found a balance of articulating my input and yielding to the overflow of knowledge and advisory my creative teams shared with me. They held jurisdiction over key aspects of the production, so it was reassuring how seriously they considered each stylistic decision from the characters' vantage point. Overall, I had the pleasure of working alongside artistically intelligent and creatively astute department heads who could tailor the framework of the characters' personhoods with the story's underlying themes.

## PRODUCTION

The merit of the above-the-line crew in filmmaking predominately determines the trajectory and



quality of a film production set and experience. This part of the crew spearheads the story's creative direction, logistical procedures, and narrative essence. As the film's producer, accommodating different work styles and delegating tasks to a multi-departmental crew has been profoundly insightful. The tasks require administrative documentation, supervising each department's activity, and securing and managing funds. Maureen A. Ryan's book *Producer to Producer* streamlines the film production stages from development through the final distribution stages. Ryan details all throughout that thoroughness is a distinctive characteristic of handling any production process. From a producer's standpoint, I remained available to my team members throughout pre-production and observed each decision, exercising shrewd managerial and administrative judgments as required.

*Administrative Leadership.* Onboarding dozens of compensated crew members required nothing short of a meticulous organization strategy and communication standard. A project of this scale with countless intricate details could otherwise quickly become disorderly. I managed the high volume of documentation for all personnel regarding labor, payment terms, and other relevant production-related concerns through contracts and talent release waivers. These documents are a formal meeting of the minds and were applied throughout production.

Though the practical nature of filmmaking is less risky than other pre-professional industries, the labor-intensive and legal parameters still involve significant hazards, and part of a producer's responsibilities include mitigating these risks. Furthermore, in addition to legal coverage, I secured short-term production insurance. This insurance financially protected the production from claims of damage to third-party property, as well as equipment rentals from camera, grip and electric, and prop houses. Navigating the learning curve of sourcing the most affordable yet all-inclusive premium was challenging. However, obtaining a certificate of

insurance for these rental establishments was necessary to access the production supplies my team and I planned for.

*Care Labor*. Regarding team building, there is always a slight risk when working with unfamiliar individuals. Though my instinct was to collaborate with Emory students and alums, I explored additional options due to my accelerated production timeline. This decision led to developing partnerships with filmmakers outside of the safety nets of Emory's ecosystem. The assembled team developed a strong rapport with each other. However, in rare cases, team members' task non-fulfillment delayed progress, which caused me, as the producer, to make personal sacrifices to accommodate for the unattended liabilities.

The impact of overcompensating for these periodic workload imbalances has evolved my philosophy on leadership beyond exclusively focusing on fulfilling project goals. I now consider having a dependable and consistent support system a central element of effective leadership. Leah Lakshmi Piepzna-Samarasinha, author of *Care Work: Dreaming Disability Justice*, defines my retrospective desire for community care as one in which "we are in control, joyful, building community, loved, giving, and receiving, that doesn't burn anyone out or abuse or underpay anyone in the process" (33). The political and ethical stakes of establishing a careweb involve "shift[ing] our collective social understanding of care" (44), starting with deconstructing the stigmatization of asking for support. Navigating leadership as a Black woman and advocating for one's own need for aid can be daunting due to the existing connotations that we are not worthy or deserving of roles of high distinction (Graham). This idea promotes imposter syndrome (Nance-Nash), and the political framework of this social and internalized stigma can lead to an individual abusing their own boundaries to prioritize and serve the collective work. Loree Erickson's model of collective care includes "disability as part of our social understanding of

mutual care" (Piepzna-Samarasinha 43). Erickson's radical notion of caring for one another acknowledges the limitations of the body, and I learned more about my own limits as my care labor increased, serving simultaneously as the director and producer. For example, despite the complex labor I performed as a producer, I had to remain aware of my facial expressions and body language as a director. My behavior needed to signal optimism and care regardless of the situation to uphold the crew's morale and support my actors' emotional reassurance on set. In short, the dual nature of working overtime yet still bearing the weight of community care as a director-producer at times exhausted my bandwidth. However, though personal fatigue occasionally crowned, professional judgment reminded me of the bigger picture. Thus, a new goal and reminder emerged: to replenish my cup throughout the process, which in my case was fueled through engaging with my religious faith, external carewebs of family and friends, and the sustained enthusiasm of the art itself.

*Financial Responsibility.* This film has been in development for over a year, which means I have been preparing for the financial impact of this project for just as long. This includes saving funds, applying for internal and external grants, and strategizing on how to market this film the best way possible in efforts to crowdfund for it effectively. I gathered many insights from the experience itself and returned to Maureen A. Ryan's *Producer to Producer* to prepare for the production's financial responsibilities. As Ryan states, the guide to a budget breakdown correlates with information from the script to determine various production costs, ranging from locations to music copyright (106-108), which this pre-production followed. Considering that this is the largest project I have ever undergone regarding scale, scope, collaboration caliber, and thematic significance, totaling fifteen thousand dollars, it warranted communal support.

Before production, I launched a crowdfunding campaign that details the film's content and significance and incentivized investors with exclusive perks, such as limited edition merch I designed (Appendix D), behind-the-scenes content, and more. It reached approximately thirty percent of the total costs it took to support this film production, and the remaining budget was met by out-of-pocket funding. The ultimate reason I decided to proceed with—and successfully fulfilled—an ambitious budget and set of professional expectations was to open myself up to work at, on a micro-scale, the standards and protocols of the motion picture industry. The financial responsibility accounts for paying crew, renting equipment and locations, craft services, insuring my set, purchasing the copyright of the featured music, and more. In other words, at the start of this thesis, I recognized that as an outgoing senior, I face the horizons of my near and far future post-graduation. Therefore, I opted to work with such a complex budget and procedural approach at this stage of my education and life to better equip and prepare myself for the expectations of a filmmaker at the industry level. I aspire to hold positions at the highest tier of leadership in the film industry in the ascension of my career, and stepping into the given realities I engaged in throughout this thesis has propelled me in the direction necessary to obtain that objective in my future more readily.

## CONCLUSION

This production was unconventional in its story, process, and timeline—its own unique snowflake of a being. But alas, despite the production hiccups, my commitment to serving this story and my team with quality efforts has never wavered. Throughout this thesis, I navigated through some of the most unpredictable storms and weathered past the most adverse realities I have ever experienced throughout my filmmaking journey. However, oddly enough, I would not trade it for any other experience. It evolved me as a filmmaker and emerging scholar and has

matured me as a leader and person in many ways I could have never imagined beforehand. Some lessons I learned pertain to determining my interpersonal and professional boundaries. Others shed light on the tedious intricacies of the business. All of which I will take forward with me in the future seasons of my career.

At the beginning of this production process, one of the goals I set out to accomplish was to further define and sculpt the skills I have garnered throughout the past four years and venture out into new artistic territory. Through this thesis, the idea of storytelling expanded for me as I became involved with sharing a fuller and more complete body of work—that is, producing a film, first and foremost, and also supervising the development of its correlating self-contained soundtrack, developing associative merch, and managing the film's social media presence. It has allowed me to fuse together all those creative ends to hone in on my existing filmmaking skills, nurture my newly developed talents in other creative mediums, and ultimately develop a broader foundation for my artistic career hereafter Emory.

It was an honor to rise to the opportunity of telling a story so meaningful to so many near and far. Throughout it all, regardless of circumstance, I maintained a posture of gratitude, heart, curiosity, and resilience, and as much as I recognize I came out a much stronger filmmaker than when I started, I wish to have also carved out an enriched experience for all those involved from conceptualization to execution. My dedicated efforts of recovery from and triumph over my seemingly indestructible obstacles demonstrate the magnitude of my commitment to the art, practice, and my high standards for future filmmaking ventures. With this reflection, I rest and concur in the present, gauging the areas in which I exuded strength and identifying opportunities for growth to prepare for future conquests.

Appendix A

DO YOU SEE IT

by

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Details of a dated, suburban home. Plastic couch covers. A trinket dish with overdue bills, a bus pass, and house keys. A framed photograph of a jovial man next to a lifted vinyl player.

MYA CARTER (17) sits at a table, with alarmingly rashy hands folded together over her soul-food supper. A set of headphones rest on her neck.

MYA

As always, thank you, Lord, for this day, for this food, and for your grace. I especially want to ask for...

She peeks over at her mother.

MYA (CONT'D)

Your provision in helping us afford this music program this summer.

Her mother, ESMÉ CARTER (late-30s), sitting next to her, cuts in.

ESMÉ

Yes, Father, and thank you for your hand over Thomas' soul and even now Mya's health. May tomorrow's appointment be filled only with good news, in Jesus' name.

BOTH

Amen.

They dig into to their food.

ESMÉ

Can't afford that program, M.

MYA

That's why I prayed for it-

ESMÉ

Unless, a boatload of free cash drops right here on this plate of mashed potatoes, we're not doing it. You're not doing it.

MYA

But our aid crosses over during the summer!

ESMÉ

It doesn't.

Mya attempts to get another word in but Esmé cocks her head at her. Mya retreats, and plasticware scraping fill the room.

ESMÉ (CONT'D)

Pass the salt, please.

2

**INT. BEDROOM - DAY**

2

Mya sits at her desk, clicking and typing away. She draws an 'E. Carter' autograph above the form's parent signature line.

Distant footsteps wax and wane nearby Mya. She quickly clicks on another site until the footsteps pass. A bit more of typing later, and a DING and celebratory animation trigger on her screen -- "Submission Complete" for the St. Catherine's Summer Music Program.

ESMÉ (O.S.)

Mya, come on! We're gonna be late!

She turns the computer off and grabs her headphones and CD player.

3

**INT. EXAM ROOM - DAY**

3

Mya's leg shakes vigorously. She spaces out, picking away at her peeling arm skin.

Esmé looks up from her watch and places her hand on the arm that Mya irritates. With a soft smile, Esmé reassures her.

ESMÉ

You gon' be good. Chill out.

DOCTOR SILVANO (early-30s) knocks and pops in with a promising smile. He's already reading from a dossier.

DOCTOR SILVANO

Hello, hello! Morning to you both.  
Thanks for stopping in for your  
follow-up.

He swivels around to the computer monitor and types eagerly.

ESMÉ

Well, it was like sitting on pins  
and needles, just waiting. You  
know? But how we looking?



DOCTOR SILVANO

Mya's bloodwork, unfortunately,  
came back inconclusive. But no need  
to fret just yet-

Esmé glances at Mya's arms.

ESMÉ

Isn't this just, like- Psoriasis,  
though? The flare ups mostly happen  
when she's in school. So, could be  
stress related.

He swivels back to them and crosses his legs, hands on top.

DOCTOR SILVANO

Yes, ma'am. I understand your  
concern. We actually knocked  
psoriasis out first since that was  
our initial inkling as well.

He halfway turns to retrieve his folder and extends a  
"clinical trial" brochure to Esmé.

DOCTOR SILVANO (CONT'D)

Good news, though. A visiting  
research team in the pediatric  
department is hosting a research  
trial. They administer cancer  
biopsies, bacterial culture tests-  
All the things, really. We can  
admit her today, if you-

MYA

Woah- woah. Admit me?

He acknowledges Mya with a breath and head nod.

DOCTOR SILVANO

I know it could sound scary, but...

He redirects his attention to Esmé.

DOCTOR SILVANO (CONT'D)

Mrs. Carter.

ESMÉ

Esmé, please.

DOCTOR SILVANO

Esmé...The office has informed me that you're several payments behind, and given that this trial is compensated for voluntary participation-

Mya ejects her CD, exhales on it, and rubs it on her shirt.

MYA

Okay, fine. We'll do it next year.

Doctor Silvano shakes his head.

DOCTOR SILVANO

That actually won't be permissible. You won't qualify for pediatric care anymore by then and our research team is only here for a brief while.

MYA

No prob. We can just use our own insurance then, right, Mom?

DOCTOR SILVANO

(to Esmé)

I'm sorry to say, ma'am, but I do urge you to consider your insurance is no longer going through with us. If you can't catch up, you're potentially looking at all forms of treatment being delayed.

ESMÉ

...For how long?

He doesn't flinch. Defeat settles in Esmé's eyes.

4

**INT. CAR - DAY**

4

Mya throws her book bag on the car floor and slams the door behind her. Esmé gets in on the driver's side.

MYA

I'm not doing it.

Esmé scoffs at her, tossing the brochure by the cupholders.

ESMÉ

Trading music for comedy now, huh?  
Go 'head, Jamie Foxx.

Esmé's phone dings from her purse and she reaches for it. It's an email for the school's music engineering program.

ESMÉ (CONT'D)

Oh, oh okay. Yeah, and also slick too, apparently. Who gave you permission to sign up for this?

Mya's plan is foiled. She tiptoes in her approach.

MYA

...Okay... So I see we're now on same page about the trial conflicting with my music program.

Esmé tugs on her seatbelt and struggles to buckle it.

ESMÉ

Lord, she's rich with jokes today.

In her own world, Mya stares at the pamphlet, unimpressed.

MYA

There's no way I'm forfeiting that. And it's right before senior year... Yeah, no.

Esmé gives up on the seat beat. It retracts back quickly.

ESMÉ

Jesus CHRIST, Mya! Call the frickin' school and cancel your application. I'm not playing with you today.

Esmé tries to start the car, but it takes a couple tries.

ESMÉ (CONT'D)

And I want it done by the time I get home.

Mya rests her head on the window, pouting. Finally, the engine starts and Esmé's buckle clicks.

5

**INT. DOORWAY - NIGHT**

5

Two full trash bags of CDs block the front door. Each disc is Sharpie'd with label variations of "Thomas Carter's Mixtape". A sticky-note on top reads, "Since you treat me and dad's work like trash, here you go."

The door slams in to bags, failing to fling all the way open.

ESMÉ (O.S.)  
The...hell? Mya, come open the door!

Esmé struggles at first but pounds an opening wide enough for her to squeeze by. She bends over to read the note.

ESMÉ (CONT'D)  
What...in the HELL?

She kicks the bags out her way and rips off her tennis shoes.

6 INT. HALLWAY - CONTINUOUS

6

Esmé knocks on Mya's door. No response. She pounds again.

ESMÉ  
Mya, open the door.

Nothing.

7 INT. BEDROOM - CONTINUOUS

7

Esmé barges in, still armed with her purse. She stomps toward Mya who sits at her desk, and snatches her headphones off.

Mya stands up intuitively.

MYA  
Hey!-

ESMÉ  
Why are you trying to torture me?

Esmé's tone is steady, but her lip purses, nearly quivering.

MYA  
Wh- What do you-

ESMÉ  
You think I don't miss him too?

Mya frown releases into a state of realization.

ESMÉ (CONT'D)  
You think this is easy for me?  
Working overtime at a dead-ass end  
job? ...Huh?

Mya rolls her eyes and looks afar. Esmé scornfully tries to realign herself with Mya's view.

ESMÉ (CONT'D)

Just to try and peel off my BACK  
his leftover mortgage debt from his  
studio? Huh? Huh?

Mya remains deadpan and silent.

ESMÉ (CONT'D)

Nah... Nah, you don't get, do you?

Esmé reaches for her wallet out of her purse. She turns it  
upside down and shakes it aimlessly in Mya's face, looking  
for something to fall out. Nothing.

She accentuates each word.

ESMÉ (CONT'D)

We have nothing left, Mya. Not a  
frickin' dime.

Esmé amplifies her voice.

ESMÉ (CONT'D)

You been wanting to get this rash  
gone so you can finally get your  
life going, yeah? Well, you damn  
got it!

Mya's eyes lock with Esmé's. Mya's swell until a tear breaks.

Esmé exchanges her wallet for the clinical trial brochure.  
She takes one of Mya's hands to slap the pamphlet down in,  
and places Mya's other hand over it.

ESMÉ (CONT'D)

You want to be like your father so  
bad? Well, at least he stepped up  
and tried to support this family!

MYA

I know!

ESMÉ

Well, if you know, then SHOW UP!

They stare each other down.

Mya grabs her headphones off the ground and storms out.

Esmé and Mya wait silently and slightly angled away from each  
other. Mya's arms are crossed, and her headphones are on.

Doctor Silvano enters with a jolly smile.

He extends a wad of papers to Esmé. As she reaches forward, Esmé glances at Mya, who repays her a glare.

DOCTOR SILVANO  
Sign everywhere by the red Xs, and  
don't forget to date each signature-

The door creaks open and a NURSE (mid-30s) peeks in.

NURSE  
Doctor Silvano. A word, please?

Doctor Silvano forces a polite smile at Esmé and posts his pointer finger up as in "one minute."

The doctor and nurse whisper by the door.

NURSE (CONT'D)  
We need your immediate assistance  
with the patient in G-237. Now.

DOCTOR SILVANO  
Again? It can't wait?

NURSE  
I'm afraid not.

Doctor Silvano sighs and turns back toward the Carter's.

DOCTOR SILVANO  
I'll give you some time to fill the  
rest of those out. I'll only be a  
moment.

He leaves. Esmé nods at his dismissal and returns to signing. Mya lingers on the medics until the door shuts.

We descend into a mostly dark and isolated space. Light shines from an open door across the way.

Doctor Silvano walks toward a grown man sitting barely erect and tied down to a cot. An IV drip stations next to him. The man's hospital gown has bled through in the abdomen area.

Doctor Silvano leans over to the man's cowered level to align his mouth to the man's ear.

DOCTOR SILVANO  
Despite you being a naughty boy,  
Mr. Carter, we got a real treat for  
you. You'll never guess who.

THOMAS CARTER (late-30s) moans in pain but he severely lacks  
energy for a full cry. Doctor Silvano smiles.

DOCTOR SILVANO (CONT'D)  
Ahh, alright. Alright. I hate  
surprises too... It's none other  
than your dear darling, Mya.

Doctor Silvano snickers.

Thomas explodes. He jolts his body in an attempt to free  
himself... Or at least hit Doctor Silvano. The doctor dodges.

DOCTOR SILVANO (CONT'D)  
I knew that'd be a fan favorite.

Doctor Silvano walks away. He meets up with the nurse.

DOCTOR SILVANO (CONT'D)  
  
See that? Old saying goes, 'Hit  
dogs always holler.' Mhm... Go  
ahead and make room for one more  
down here. We got us a puppy on the  
way.

Thomas fights for his life trying to break free. The door  
shuts and it's complete darkness.

10

**INT. HOSPITAL HALLWAY - CONTINUOUS**

10

Mya walks alongside Doctor Silvano, hesitantly. Esmé watches  
her down the aisle, giving her a soft smile and supportive  
thumbs up.

Mya looks over her shoulder to her mother, dishing out a  
solemn smile and wave.

**END CREDITS.**

Appendix B

DO YOU SEE IT - VISUAL OUTLINE

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**INT. BEDROOM - NIGHT**

Details of a teenage girl's room. A framed nuclear-family portrait. Cassette player. Bus pass.

The shakiness of a female adolescent voice recites a prayer. The voice belongs to MYA CARTER (17). Her hands are gripping and massaging each other aggressively. They're alarmingly rashy.

Her mother next to her, ESMÉ CARTER (mid-30s), peeks over, now concerned, to check on Mya. With her eyes still closed, tears stream down Mya's face and her throat closes up at the mention of her deceased father.

Esmé pats Mya's hand gently and finishes the prayer with a reference to Mya's skin illness.

**INT. BEDROOM - LATER**

Mya sits criss-cross on her bed. Esmé on the edge. Esmé sets Mya's nightstand clock, asking her daughter not to be late to tomorrow's follow-up appointment.

Esmé leans in with her forehead to place it on Mya's. She tells Mya she loves her, and reminds her that her dad does too. She gives Mya a forehead kiss then turns the light off.

**INT. BEDROOM - DAY**

Mya sits at her desk, clicking and typing away. A ding and animation trigger from her screen -- "Submission Complete" for the St. Catherine's Summer Music Program.

She shuts her computer as Esmé calls out to leave.

**INT. EXAM ROOM - DAY**

Mya's leg shakes vigorously. Her eyes are spaced out as she picks at the skin on her arm.

Esmé looks up from her watch and places her hand on the arm that's being picked. Esmé reassures she will be okay. Mya taps a spotty beat on her cassette player instead.

DOCTOR SILVANO (mid-40s) storms in.

He treks past them towards a computer, offering a cold hello. Without making eye contact, he cracks open a dossier, then finally addresses Mya by name and thanks them for coming back for a follow-up.

He mentions that based on bloodwork, the tests are inconclusive.

Esmé glances at Mya's arms and petitions for it being psoriasis.

Doctor Silvano states otherwise. He extends a brochure to her about their clinic offering a 6-week research trial, that Mya qualifies for by age. She would be admitted for skin biopsies to rule out cancer.

Esmé shoves the brochure back, assuring him she can't afford the treatment plan. He holts the pushback with his hand and pries into Esmé's financial debts with the clinic. He pulls out a few more documents and states it's paid and a limited time offering since Mya is turning 18 soon. He encourages them to consider their disadvantaged situation.

Esmé grabs the papers and retracts the brochure.

**INT. CAR - CONTINUOUS**

Mya throws her book bag on the car floor and slams her door behind her, claiming that she's not going to participate.

Esmé gets in on the driver's side, tossing the brochure by the cupholders. She scoffs at Mya's statement, sarcastically suggesting that Mya pay the medical bills off herself.

Mya looks at the pamphlet, unimpressed. She brings up that the trial conflicts with the music program she applied to.

Esmé picks up and waves the brochure in her face. She tells her she has no other option and to call the school before she gets back home from work to rescind her application.

Esmé tries to starts the car, but it takes a couple tries.

**INT. DOORWAY - NIGHT**

A box of cassettes wait in front of the house door. Esmé struggles to open the door fully and kicks it slightly out of her way. She removes her shoes, talking angrily to herself.

**INT. HALLWAY - CONTINUOUS**

Esmé knocks on Mya's door. No response. She knocks again, calling Mya's name. Nothing.

**INT. BEDROOM - CONTINUOUS**

Esmé barges in, still armed with her purse, and approaches Mya sitting at her desk. She snatches Mya's headphones off her ears.

Mya stands up quickly. Esmé asks why is Mya trying to torture her. She's holding in her temper.

Mya stammers a confused response.

Esmé blows up, asking Mya if she thinks that Esmé doesn't miss Thomas too, Mya's father. Mya's silent.

Esmé reaches for her wallet out of her purse. She turns it upside down in front of Mya's face and exclaims they have nothing. She's shaking it aimlessly, anticipating something to fall out. Not even coins.

Mya never breaks her frowning eye contact with Esmé. Her eyes swell until finally a tear breaks.

Esmé exchanges her wallet for the brochure and contract. She hands her daughter the documents, saying that if Mya wants to be like her father so badly, then she should help support the family like he did.

**INT. EXAM ROOM - DAY**

Esmé and Mya wait silently. This time, no ticks from Mya.

Doctor Silvano enters with a jolly smile. He holds his hand out to take the papers.

Esmé thanks Mya with a soft smile.

As Doctor Silvano flips through the pages, a NURSE pops in and requests his emergent assistance with another patient.

Doctor Silvano and the nurse whisper at the door. He turns back toward the Carter's, says he will process the paperwork, and dismisses them. They gather their things to leave.

**INT. OPERATING ROOM - CONTINUOUS**

It's mostly dark and completely isolated with the exception of a man sitting barely erect, tied to a cot. His hospital gown is bled through in the abdomen area.

Doctor Silvano walks toward him and leans over to his cowered level. His mouth aligns to the man's ear but Doctor Silvano's eye contact remains fixed on the floor.

Doctor Silvano comments on the man's reported misbehavior, using his name, MR. CARTER. He smiles at Thomas and calmly reassures him that despite his lack of cooperation, Doctor Silvano will reward him a special treat. He promises Thomas a visit from a special guest, his daughter.

Thomas outbursts, crying. Doctor Silvano dismisses himself.

**END CREDITS.**

## Appendix C

Below is an exercise from Uta Hagen that I distributed to all of my actors in preparation for their performance on screen.

1. Who am I? – name, age, education, relationships, beliefs, fears, etc.
2. What time is it? – time of day, season, year, etc.
3. Where am I? – physical location (bedroom, office..), city, state, country, etc.
4. What surrounds me? – setting, props, etc.
5. What are my circumstances? – what happened just before the action of the scene begins?
6. What are my relationships? – relationship to scene partner or characters not directly depicted in the scene but important to you? Relationship to events and objects?
7. What do I want? – what's my immediate objective (in the scene) and what's my super-objective (an overall goal that carries throughout the story) Use the format: "In this scene, I want (character name) to (active verb) in order to, or so that (motivation for character)." Example; Woody from Toy Story: In this scene, I want Buzz Lightyear to obey my commands so that I can keep the rest of the toys safe and out of harm's way.
8. What's in my way? – obstacles, stakes, etc.
9. How do I get what I want? – tactics or active actions (i.e., ambushing, commanding, charming, belittling)?



## Appendix D





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