

Acting as Trauma-informed Adult Learning and Personal Development

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Abstract

Trauma-informed theoretical and practice development are current directions in human services, social work, teacher education, and other professions. There is evidence that adults who participate in formal and informal education for arts and performance-based activities, have experienced a traumatic event in their lives. This article outlines the first stage of an ongoing research project on trauma and drama production processes that reviews some of the academic literature exploring examples of how acting and performance has been used as a form of trauma-informed personal development. This summary of relevant literature aims to highlight acting, theatre, performance, and drama as possible creative arts therapy alternatives within current social work practices, as they offer a non-threatening alternative to talking therapies, highlighting that there is evidence of improvements in people's social lives through involvement in the creative arts.

Keywords: *Trauma-informed; Personal development; Dramatherapy; Therapeutic theatre; Acting; Trauma-informed education*

Introduction

We are all actors, being a citizen is not living in a society, it is changing it. (Augusto Boal, March 27, 2009)

Anecdotal evidence indicates that adults who choose to participate in formal and informal acting or performance-based activities have often experienced a traumatic event in their lives. The aim of this article is to explore how acting, and performance can be used as a form of trauma-informed personal development, with a focus on adults who choose performing as a social activity. This literature scan (Munn et al., 2018) highlights acting, theatre, performance, and drama as possible creative arts alternatives within social work education and practices. There is evidence they offer a non-threatening alternative to talking therapies and improvements in the lives of adult participants. The literature scan (Munn et al., 2018) explores the origins of theatre and drama, linked back to 6th century Greece through to its more modern roots in 1700s' and 1800s' Europe and how theatre can be therapy – and to develop an understanding of how drama and acting activities can be therapeutic. It also explores how adults are exploring concepts like childhood play, personal development and the exploration of memories and emotions through theatre and performances.

Trauma-informed education of adults in drama and the creative arts needs to nurture an individual's learning *and* performance, with an understanding that effective learning cannot take place while trauma is impacting an individual's life. The article provides three examples of trauma-informed theatre and performance, one with war veterans, another of performance and people with disabilities and then *theatre of inclusion* and *necessary theatre* assisting people experiencing homelessness. The article concludes with a supposition that theatre, acting and performance art can be used within social work practices to improve the well-being of clients with a trauma history and that these frameworks need to be explored in welfare and social work education.

A brief history of drama, theatre and dramatherapy

Drama and theatre are terms used interchangeably – however, they are different. Drama which explores physical expression, and enactment, was developed by the Greeks as early as the 6th century. *Drama* can occur in formal (theatres) or informal (classrooms, streets, homes) settings. Sophocles (Landy & Montgomery, 2012) was the first to build a physical theatre between a temple and a stadium, highlighting the idea that being involved in drama in a theatre provides a link between the physical body and the spirit, and healing through acting. *Theatre* is a term that refers to more structured performance of drama, with performers on a stage, and separate from spectators, with rehearsals, and eventually a performance (Landy & Montgomery, 2012; Langley, 2006).

Modern drama and theatre as therapy can be traced back to 1700s France where theatre performance was used in prisons, and with patients in mental hospitals in the 1800s onwards (Landy & Montgomery, 2012). The early 1900s saw an evolution from drama, theatre, and performance in its most common form into dramatherapy, or theatre as therapy (Landy & Montgomery, 2012).

There has been an evolution in the combining of the two concepts; they offer similar key principles including play, movement, group involvement, actor/audience relationships, rituals, metaphors, and exploration. The research indicated that techniques and concepts are taken from psychology, psychodrama, sociology, psychotherapy, psychodrama, and drama (Landy, 1983; Langley, 2006). The literature scan indicated that several ‘founding fathers’ in the early 1900s created theatre as *theatre practice* which was, in fact, drama activities as therapy and which could now be called “drama practices” in social contexts.

Evreinov was linked to the creation of *Theatrotherapy* and Vladamir Iljne referred to his own method as “Therapeutic Theatre” (Langley, 2006). They both chose to use elements from drama and structured theatrical performance but performances for others, or the wider community, were not used. Jacob Levi Moreno taught theatrical skills to his psychotherapy group to address emotional issues – Moreno is known as the creator of psychodrama (Langley, 2006; Snow et al., 2003).

Theatre as therapy has been used by many playwrights and directors, including Constantin Stanislavski in the 1920s and 1930s with spontaneous performance or improvisation, Bertolt Brecht in the 1920s to 1950s with alienation in theatre, Antonin Artaud in the 1920s and 1930s with the *Theatre of Cruelty*, Jerzy Grotowski in the 1960s and 1970s with a focus on audience–actor relationships and using the body to communicate rather than through a script, and Augusto Boal (1960s–1980s) as founder of the *Theatre of the Oppressed* in South America (Langley, 2006).

Methodology

This article summarises a literature review (Munn et al., 2018) conducted in 2019-2020; there is a hierarchy of literature- and research-based evidence reviews and synthesis with methodology ranging from literature scans, scoping reviews, and systematic reviews, each with a different purpose and method (Munn et al., 2018). The project summarised in this article was conducted as part of post-graduate social work studies and can be described as a literature scan even though it has all the elements of a scoping review (Munn et al., 2018); that is, identifying the available evidence in each field, clarifying concepts, examining how research is conducted in this field and identifying characteristics and factors connected to this field (Munn et al., 2018). It identified research and knowledge gaps but, due to this field being so broad and diverse, the literature scan fell short of being a formal scoping review as a precursor to a systematic review (Munn et al., 2018). All the research used for this literature scan were sourced through data bases from the Federation University Australia library and online via Google Scholar using key terms. Relevant literature and research were then chosen based on topic relevance and their focus on adults – that is program or research participants over the age of 18. All articles were written in English and were classified in the data bases as social sciences and peer-reviewed studies.

The initial literature search revealed many hundreds of articles on drama, theatre and theatre for trauma purposes dating back hundreds of years; it was then decided to focus on theatre

within the specific contexts of *social practices*, *social inclusion*, and *social realism* to limit this specific literature scan. Articles were then summarised in an annotated bibliography document; discussion then ensued concerning the research as to which topics to summarise in detail as analysis and a literature review of over 15,000 words was written as a post-graduate social work student report; this report has been distilled and summarised here in this article.

Theatre as therapy

People as performers

The literature scan revealed many theatre and research projects that located diverse reasons why people pursued creative and artistic endeavours: some performers genuinely thought of it as a calling, that they were born to be a performer, they like to make people laugh, they like the attention they get when they are in the theatre space. These people enjoy expressing their artistic nature through their vivid imagination, or the enjoyment of mimicking, others go into acting to learn how to sing and dance so they can serenade their love interest (Minkoff, 2014). The literature broadly indicated that some people become performers because they are using the audience or other cast members as a proxy for another person, usually a parent, or someone they are seeking approval from (Minkoff, 2014). Others become actors to try and conquer a fear, usually public speaking, learning how to face the audience, project their voice and speak clearly (Minkoff, 2014). This idea of metamorphosis or performing to transform which positively affects psychological well-being, allows the actor to have a personal evolution, replacing old beliefs with new ones, and effectively learning to use real memories to evoke emotion in their performances (Snow et al., 2003). Adults who have taken to acting have also been rewarded with a strong sense of community, working with like-minded people, to create a performance for an audience they learn to work as a team (Snow et al., 2003).

Drama as play

When an adult chooses to explore drama, acting, and performance, there is some innate part of themselves that wants to explore the land of make-believe. Theatre offers a safe space to be absorbed in the moment and be a new character. By reverting to earlier stages of psycho-social development, this space allows the individual to explore relationships, emotions and to deal with possible traumatic experiences (Langley, 2006).

Therapeutic play, through the theatrical space, allows participants to remember play activities from their childhood (Bruun, 2012). Play can include movement, which can be used by people of all abilities, from able-bodied people completing dances, to elderly or wheelchair-bound people using their hands to create movement and nodding their heads. Research indicated that an adult, given the chance, will choose a role or character that indicates their hidden desires, for example, for a male to play a sword maker or hunter allows them to explore their masculinity within the role (Bruun, 2012). Acting can be used by adults to therapeutically explore personal and emotional issues through play. Acting has helped people come to terms with a personal crisis, a new disability or illness. The theatre space can be used to process the internal struggle, and release it, as it can be seen as a safe space (Langley, 2006).

Trauma-informed adult learning processes

Theatre has become a bridge, helping people to understand personal lived experiences, and teaching skills on how to interact in this world outside of theatre. Whilst some performers choose the traditional route of talking-based therapies, and they have found this to be beneficial, others have found that they have started healing through the theatre process (Langley, 2006). Becoming a performer allows feelings and emotions to be processed, as if they are the character, or they view another character who has experienced something like their lived experience (Landy & Montgomery, 2012). Whilst there is not an expectation for a theatre teacher or director to become a counsellor or social worker, it is suggested that learning basic psycho-social skills can assist producers and directors of performances with performers who experience triggers or personal difficulties during the creation of theatre (Ali & Wolfert, 2016).

The literature scan indicated that, to be a trauma-informed acting teacher or performance facilitator or theatre director, various theories need to be understood to better connect to student performers and their lived experiences. It is important to understand that everyone has feelings, as well as internal struggles, and these can be triggered at any point in time; This is known as “psychosocial practice” (Payne, 2016). A teacher or learning facilitator should be able to support a student with coping skills and self-regulation, as well as working through triggering behaviours or memories, especially within the acting or performance space, where a script or scene may be triggering for the performer (Payne, 2016).

Attachment theory and trauma

When working with performers, a teacher is unlikely to know their background or any form of traumatic experiences in their past. Having a small understanding of attachment theory can allow a teacher to understand the links between early childhood experiences, and how these events can unconsciously affect each performer into adulthood. Attachment theory was identified by Bowlby in the 1950s (Payne, 2016) who believed that the attachments formed in infancy with parents or caregivers will have a lasting impact through to adulthood (Lishman et al., 2018). ‘Normal’ attachments provide an adult with the capacity to cope with the vacillations of life. Negative attachment in infancy can impact how relationships are formed, as well as the internal struggle with emotions, and coping with the emotions of others (Lishman et al., 2018). Negative attachment experiences are often linked to neglect and abuse, with 40% of all adults experiencing attachment issues in childhood which can lead to psychological damage (Allan et al., 2009; Lishman et al., 2018; Payne, 2016). When a teacher can understand how trauma affects attachments, they can more effectively use this in classroom and theatre activities by being aware of behavioural changes of participants and being able to provide one-to-one support, vary activities and/or refer individuals for more formal counselling or support.

Cognitive behaviour therapy

Cognitive behavioural therapy (CBT) is a framework that facilitates how individuals manage their thoughts, feelings, and behaviours. Encouraging actors to share their feelings and insights about current and past events enables them to learn to empathize and connect with others (Aaltonen & Bruun, 2014). When an actor is taken through theatrical exercises using open

dialogue, including asking questions, it allows the performer a space to identify trauma, triggers, or problems in their lives, and learn new ways of representing and living a more fulfilling life (Payne, 2016).

CBT can be used in theatre to develop basic social skills that can be created by observation activities, to model appropriate behaviours. Mindfulness and stress-reduction exercises can also be used to train performers to be in the present, during rehearsals or a performance, especially for performers with anxiety (Aaltonen & Bruun, 2014; Landy & Montgomery, 2012; Payne, 2016).

Person-centred theory

The person-centred approach is linked to Carl Rogers, who developed the process in the 1940s and 1950s (Payne, 2016). Rogers wrote about “unconditional positive regard” being essential to all relationship-based communication. The idea of being person-centred, highlights that everyone is the expert in what is occurring in their life and allows them space to talk, and determine their path for the future, rather than being told what to do by a teacher or social worker (Payne, 2016). Person-centredness, whilst usually linked to social work, counselling, and psychology, can be used in drama processes and theatre spaces. Adults who go into drama and theatrical production often have the potential to be great actors and their teacher and mentor should be fostering this potential, placing the student first and allowing them to develop and grow as individuals (Murphy et al., 2012).

Empowerment theory

Teaching is often about having power over a student; this is usually because they are young and need guidance. When teaching adults, having power over, is more complex. Research indicates that it can cause individuals’ emotions to become intense and act out. With similar thinking to the person-centred approach, a teacher needs to empower their students for positive changes to occur. Empowerment requires the sharing of knowledge in a way that is understood, and helps individuals to grow (Allan et al., 2009).

Empowerment theory aims to give a client or performer a voice, to allow them to make decisions that are appropriate for them. Teachers and performing arts group leaders can empower their performers by respecting them and hearing what they have to say. This can be demonstrated by being non-judgemental and offering unconditional positive regard, which can lead to significant improvements to well-being. Teachers can empower through inclusion, in decision making and by modelling appropriate behaviour and performers can gain the skills to advocate for themselves, and their community (Allan et al., 2009).

Trauma-informed psychoeducation

When working in a theatre or performance space, trauma-informed psychoeducation is often promoted and utilised. Individuals who have had a traumatic experience may be triggered at any time. It needs to be understood that traumatic experiences will differ from person to person,

even if they were involved in the same traumatic event, and without realising it, a performer may experience a flashback, or anxiety that such a traumatic experience may occur again (Brunzell et al., 2016).

Psychoeducation promotes resilience and encourages the normalising or validating of traumatic experiences. It also supports the trauma-affected person so they can learn their triggers and develop the skills to manage them. Teachers can help in co-regulating a student who is experiencing these difficult emotions by making their voices quieter and being mindful of their use of language with the student. They can sit side by side rather than face-on and try to refrain from using quick movements that can cause distress for the student.

Trauma-informed teachers are encouraging, genuine and warm towards their students, which helps with positive outcomes for students, building trust with their students, validating how a student is feeling and offer safety so the student can be vulnerable, encouraging learning and personal development (Brunzell et al., 2016). Teachers can also use elements of trauma-informed positive education (TIPE), which uses a strengths-based or person-centred approach to working with students. TIPE applies an adaptive approach to teaching, accommodating the students' abilities and needs. TIPE encourages the idea that students can set goals (e.g., developing the confidence to get up in front of an audience and present a monologue). Students will be able to reflect on their goals and go back and reassess or reframe their goals if needed. These skills can build confidence and develop a growth mindset (Brunzell et al., 2016).

Examples of drama and theatre as social practice and therapy

Linking social theory as described above and what can be termed 'social practice' – that is practices in social work, adult education, counselling and drama and creative arts – is something that is relatively recent in the development of professions (Adams et al., 2002, 2009; Payne, 2016). Following are three examples, in different contexts, of how drama and theatre have been used as a form of social practice and/or therapy with veterans, people with disabilities and people experiencing homelessness.

Veterans and theatre therapy

Current practices for treating veterans for post-traumatic stress disorder (PTSD), depression and/or anxiety relies heavily on prolonged exposure (PE) therapy and cognitive behaviour therapy (CBT) with a trauma focus (Bird, 2014). Research identified that veterans are reluctant to engage in these forms of talking therapy, as it is viewed as weakness within a system that rewards strength. Veterans are concerned with being labelled as mentally ill and will avoid treatment and suffer in silence (Ali et al., 2018).

One trauma-based program in the USA, aiming to help veterans' transition from military to civilian life is the DE-CRUIT program, an evidence-based trauma treatment, developed with the Veterans Centre for the Performing Arts (VCPA) (Ali & Wolfert, 2016).

The program is actively supported by psychologists, and researchers, using Shakespeare's plays to highlight the similarities between modern day military experiences, and those of the past (Ali et al., 2019). The DE-CRUIT program has created an algorithm, matching veterans and their identified traumatic experience to a character's similar experience. This process was influenced by previous theatre-based programs working with veterans, including "Theatre of War", where veterans are the audience members and "Theatre of the Oppressed", allowing veterans to create changes through the performance they are watching (Ali et al., 2018).

DE-CRUIT researchers (Ali & Wolfert, 2016) studied the monologues created by the veterans and found that majority of their trauma experiences were not from their time in the military but were, rather, from before they enlisted. These past traumas were also the reason they joined the military. Common themes found were family violence, financial concerns, negative neighbourhood experiences and the need to feel safe or in control of their lives and environment.

Researchers interviewed veterans about their lived experiences whilst in the military to understand the trauma that had been experienced (Ali & Wolfert, 2016; Ali et al., 2018). Other researchers (Beaty et al., 2018) have been exploring the brain and its function with creative thought, using brain imaging to study participants when they are "imagining or daydreaming". Marron et al. (2018) researched the brain's neural networks and how these are associated with creative and internal thoughts. The DE-CRUIT program used electroencephalograms (EEGs) to explore neuro-cognitive functioning combined with a systemic and structured approach of exploring trauma throughout the lifespan of a person, to better understand traumatic experiences (Ali & Wolfert, 2016; Ali et al., 2019).

Performance and people with disabilities

Theatre can be a positive place for people with disabilities, whether their disabilities are learning, behavioural or physical in nature. The reason theatre can be a powerful place is because much can be learnt that does not require a person to be verbal. Theatre allows a space that can be adapted depending on the needs of each participant who can learn to be more independent through various exploratory activities. Theatre can help participants gain the voice which they have lost within their usual community settings (Langley, 2006).

Whilst most of the studies indicate that performances and theatre groups last around three months, one study in Montreal, Canada, created through the Centre for the Art in Human Development at Concordia University (Snow et al., 2003) ran over a two-year period, with 12 months further preparation with a performance (*The Legend of Pinocchio*) as the outcome. A total of 20 participants, all with developmental delays, engaged in the program with art and drama-based activities occurring twice a week for the first 18 months. The program's aim was to be therapeutic in nature and worked to create and achieve goals for each of the participants (Snow et al., 2003). Interviews occurred at the start of the group engagement, as well as at the completion. Due to the participants engaging for such a significant time, the group facilitators were able to get to know each participant, their strengths, and areas for development. Each participant was spoken about during a panel with centre staff, with clinical supervisors involved.

The staff presented any issues or barriers the theatre group needed to be aware of, and each participant was involved in various assessments using creative arts therapies, where data were collected. Using these data, each person was chosen for a specific role within the play (Snow et al., 2003).

The researchers (Snow et al., 2003) highlighted the voices of participants, and their positive observations. Participants were noted to have engaged better within their group and their confidence and self-esteem increased. Final reports indicated that participants were happier overall and felt they could accomplish more than previously (Snow et al., 2003).

Theatre of inclusion and the homeless

People who experience homelessness are outsiders to mainstream society, they have often experienced shame at finding themselves homeless, with nowhere to belong. Bruun (2012) completed a study over a four-month period in London, working with 19 participants (one was female, 18 were male), three facilitators and a complex needs worker, who referred the participants to the program. Bruun followed the idea of “Necessary Theatre” created by Brook, who acknowledges the healing power of theatre and artistic practices. Another theatrical group that inspired this study was Augusto Boal’s “Theatre of the Oppressed: Cardboard Citizens” program in 2012. Bruun’s study aimed to highlight the realities of being homeless, and what it meant for those present (Bruun, 2012).

The study indicated that participants were chosen if they had a dual diagnosis of substance misuse and mental health concerns. Strict rules were in place that professionals were never to be alone with a participant, and participants could go within the program building during sessions. Bruun explored the complexities of working with a mostly male population when all but one of the professionals was female. This led to participants pushing boundaries, as well as making sexual comments that needed to be confronted. Bruun also explores the difficulties of trying to include the complex needs worker into the sessions; however, this affected the dynamics, and the openness of participants (Bruun, 2012).

One of the themes that emerged from the group sessions was that the characters always experienced a level of transformation. The character starts off as a monster or a goblin and, by the end of the performance, is transformed into a king or prince. This can represent the participants’ desires for transformation, from living through homelessness, to wanting to have their own place and space. This theatre group allowed the participants a safe space to express how they were feeling, and process their current living situations, and allowed them to explore their past. Participants were able to gain confidence and found a voice through the theatre process; these sessions allowed participants to find a sense of belonging within the group and help others going through the same homelessness experience (Bruun, 2012).

Using therapeutic theatre in social work contexts

Cordero Ramos and Bellerin (2017) created social and creative theatre experiences in Spain to assess the suitability of theatre in a social work setting. Their study used empowerment and capability as their primary focus, highlighting the high levels of unemployment and homelessness due to the decline of the labour market in Spain. They created an intervention called “the theatre of inclusion”, the homeless community that participated were able to create performances about their lived experiences and, after their performances, discussions were held with the audience about the performance, and key issues presented (Cordero Ramos & Bellerin, 2017). The key point they highlighted was that theatre can be used in social work settings as a tool of inclusion and empowerment. It can be used to represent a community concern which promotes discussions. It also allows minority groups to be seen and heard, and for personal and social growth to occur (Cordero Ramos & Bellerin, 2017).

Therapeutic theatre and social work

The literature scan outlined here explored how theatre can be used therapeutically within various community settings, from mandated clients to those recruited to participate because they met the group requirement. The exploration into theatre allows a shift in the power balance between teacher and student, theatre director and performer or social worker and client to fluctuate. Research indicates that the teacher, director, or social worker usually has power over the other person but theatre as a therapeutic space can allow the other person to grow and develop (Adams et al., 2009).

If theatre is to be used in social work practices, participants should have a choice about their participation. Social workers need to be respectful of each participant and their personal history, set therapeutic goals that work towards positive changes for the future. Some key points that need to be considered when developing a theatre group within a social workspace, include everything being transparent and predictable (Adams et al., 2009).

One example is allowing participants to choose their own name for the duration for the workshop or therapy process. This allows participants to feel safe, and to have an identity they have chosen for their time with peers. Drama or theatre sessions should be at the same time each week, with the same predictable schedule. All sessions should start with activities that help regulate each participant and bring them into the space and ready to learn or perform. A good technique involves mindfulness or self-regulation techniques. Ensuring that all sessions are fun and have an element of play or creativity allows participants to feel safe and enable creation of secure attachments with the teacher or social worker (Brunzell et al., 2016; Moore et al., 2017; Animbom Ngong, 2014; Snow et al., 2003).

Group drama therapy or theatre sessions should aim to build strengths and positive emotions, with the development of interpersonal and communication skills at the forefront. Whilst only one group highlighted having snacks provided during sessions (Brunzell et al., 2016) having food and drinks available for participants enhances attendance and participation in activities. Facilitators will not be aware of when group members last ate and having some food in their

belly will make learning a little easier (Brunzell et al., 2016; Moore et al., 2017). These forms of social work practices do link to formal groupwork theories and practices as used in social work education (Adams et al., 2009).

Limitations and areas for further study

Reviewing the research revealed that there were limitations to the studies that were scoped. Many researchers reported that time frames with their theatre group were usually short-term, running between 6-12 weeks on average. Sample sizes for the studies were also small – an average of 20 people per group – and there appeared to be a lack of diversity within the research groups, with most of the participants being Caucasian females. It was not possible from the evidence presented in the current research to determine if there would be any positive impacts for other genders or ethnicities. The research did indicate that there were issues around gender, with male participants pushing boundaries, and making sexual comments to female facilitators. Most of the studies explored the short-term effects of theatre performance and improved mental health and self-esteem with indications that participants are usually referred to a group program with a therapeutic intention.

Conclusion

It can be concluded that people in diverse contexts who participate in drama or theatre-based activities have some level of improvement to their interpersonal and communication skills, personal growth as well as improvements seen within participants' physical and mental health (Brunzell et al., 2016; Moore, et al., 2017). As outlined in the examples summarised here, participants in drama or theatre as therapy felt that they were part of a community when engaged in theatre groups with like-minded people. Theatre group participants were shown to flourish when time had been taken to get to know them. Roles were allocated according to their abilities, and goals were set to explore skills that they could potentially learn from the character, or from interactions with other characters whilst in a particular role. When theatre groups have a longer duration, there is time get to know the group, their preferences for role-plays within small groups, or if they have a desire to complete a big performance as their end goal. Theatre groups also allow participants to look at what roles they are accepting in their own lives, how they present themselves, and to learn new skills to create a new and better version of themselves (Brunzell et al., 2016; Moore et al., 2017; Animbom Ngong, 2014; Snow et al., 2003).

Drama and theatre performance for personal development is an area of social practice and social research that is in its formative days. Further research in all contexts and cultures of drama and creative arts as therapy needs to occur. Longitudinal studies will help better understand the long-term benefits of drama and theatre to group participants. Further exploration into what motivates adults to go into acting and performance as a learning experience and as personal development needs to be explored as social work contexts and practices in the future. Social work and psychological programs and practice are occurring and evidence of both the practice frameworks and the outcome for individuals needs to be explored.

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