

Lesley University

DigitalCommons@Lesley

---

Expressive Therapies Capstone Theses

Graduate School of Arts and Social Sciences  
(GSASS)

---

Spring 5-22-2021

## Drama Therapy for Actor Training Programs

Emily Faith  
emilypfaith@gmail.com

Follow this and additional works at: [https://digitalcommons.lesley.edu/expressive\\_theses](https://digitalcommons.lesley.edu/expressive_theses)



Part of the [Acting Commons](#), [Higher Education Commons](#), and the [Social and Behavioral Sciences Commons](#)

---

### Recommended Citation

Faith, Emily, "Drama Therapy for Actor Training Programs" (2021). *Expressive Therapies Capstone Theses*. 429.

[https://digitalcommons.lesley.edu/expressive\\_theses/429](https://digitalcommons.lesley.edu/expressive_theses/429)

This Thesis is brought to you for free and open access by the Graduate School of Arts and Social Sciences (GSASS) at DigitalCommons@Lesley. It has been accepted for inclusion in Expressive Therapies Capstone Theses by an authorized administrator of DigitalCommons@Lesley. For more information, please contact [digitalcommons@lesley.edu](mailto:digitalcommons@lesley.edu), [cvrattos@lesley.edu](mailto:cvrattos@lesley.edu).

Drama Therapy for Actor Training Programs

A Critical Review of the Literature

Capstone Thesis

Lesley University

May 2021

Emily Faith

Drama Therapy

Tim Reagan

### Abstract

This review synthesizes the literature on the mental health trends and developmental stages of student actors in university theatre programs and the mental health issues they may suffer because of their field of training. I then review the potential negative impacts of COVID-19. Special attention is paid to drama therapy techniques to weave into college and university theatre programs to mitigate mental health concerns invoked by training.

### Key words:

Mental health, drama therapy, actor training, de-roling, COVID 19, aesthetic distance, and college students

## Drama Therapy for Actor Training Programs

### **Introduction**

The mental health concerns of professional actors have been noted both academically and within in the mainstream media. The number of reported substance abuse, sexual abuse, suicide and overdose for actors are staggering. With an industry of historical bias around body image, age, gender, ability, the instability, and rigors associated with the profession as well as the implications of COVID-19 on theatrical performances, a focus on the mental health of actors is imperative.

I believe that this focus should begin in college and university theatre training programs for two reasons. First, college students are at the developmental stage where a large percentage of mental health concerns arise. Depression, anxiety, and substance abuse disorders are just a few of the issues that negatively impact the mental health of students while in college, and professional actors are disproportionately faced with higher rates of these same struggles.

Second, and perhaps most importantly, this focus on mental wellness should begin in university training programs due to many professional actors citing their training as a significant source of harm and/or, setting harmful standards for behavior. Speaking with peers and drawing from personal experience, harm has included a push towards “authentic” performances, exclusion of intimacy directors in student and department rehearsals and sexual harassment. Also noted have been the absence of de-rolling practices, overindulgence in role, the perpetuation of an “ideal” body size and ability, racism, microaggressions, and tokenistic casting.

In light of the 2017 #MeToo movement, many training programs have attempted to create safer practices around student actor’s learning through the hiring of dramaturgs, intimacy directors and fight choreographers. There has also been a significant rise in number of Equity,

Diversity, and Inclusion trainings since the murder of George Floyd and subsequent resurgence of the Black Lives Matter movement. While these culture shifts move actor training towards the direction of safety, I am proposing the implementation of trauma-informed drama therapy practices to these programs to further promote mental wellness of student actors. I want to know how drama therapy techniques can positively impact that mental wellness of student actors.

Drama therapy is the intentional utilization of “play, embodiment, projection, role, story, metaphor, empathy, distancing, witnessing, performance, and improvisation to help people make meaningful change” (NADTA, 2019). Trauma-informed drama therapy understands and integrates the belief that “people’s behavior may be impacted or determined by previous traumatic events in their life” (Johnson & Sajnani, 2014, p. 5). Further, drama therapy asserts that trauma is “understood to be held in the body” (p. 9). This is a critical lens to view student actors training from, as acting is an embodied artform. This shared language between drama therapy and acting training makes drama therapy an ideal intervention for actor training programs. Specifically, I am proposing the drama therapy practices of de-roling, aesthetic distance, and group work to mitigate the mental health concerns of student actors and promote life-long wellness in professional actors.

I have also included the impact of COVID-19 on this population. In a time of development when many young adults are experiencing independence and preparing for future careers, safety protocols of college campuses and virtual learning halted or drastically changed opportunities for the usual personal and professional growth. I asked the question, “how does COVID-19 impact student actors?” and make a case for theatre faculty to utilize drama therapy infused curriculums when students return to in person learning. This research was limited at the time of this review as new studies continue to emerge.

This literature review takes a in depth look at the mental wellness trends of student actors, the impact of COVID-19, and makes a case for the implementation of drama therapy techniques to be infused into university training programs. My experience as a professional actor who attended a BFA Acting training program and additional post-graduate conservatory training programs grounds my literature review when appropriate.

### **Methods**

My research centers on the mental health of student-actors with a specific attention on trauma-informed drama therapy practices that could be implemented into theatre training programs. These interventions are not intended to serve as therapy, but rather to enhance the body of knowledge surrounding mental health and development of college aged theatre artists and create a system that supports their well-being. The following are search terms that were utilized in this review: Trauma-informed, drama therapy for actors, actor mental health, COVID-19, developmental stages of college students.

### **Literature Review**

#### **Mental Health of Student Actors**

Early childhood through high school educators are required to take human development courses in order to obtain their teaching license. College and university instructors are often not bound by the same educational requirements. This is particularly true of theatre professors who hold terminal degrees in acting, directing, technical theater and theatre studies. This gap in developmental education can be detrimental to the mental health and overall well-being of student actors. Research shows that “mental disorders account for nearly one-half of the disease burden for young adults in the United States” with most “lifetime mental disorders onset by age 24 years” (Hunt and Eisenburg, 2009). In addition to mental disorders, instructors should be

mindful of likely potential for trauma backgrounds within their student population. Female students make up most acting programs and statistically, ““The U.S Department of Justice and the Centers for Disease Control both estimate that one- fifth (20%) of women 24 years of age and younger have been raped. Forty-two percent of all female rape survivors were raped before they were 18, that is, before they even arrived at college” (Bailey & Dickenson, 2016, p. 6)

These statistics are vital information for acting instructors to possess, as topics around mental illness, rape, and abuse are often topics of the plays and scene work student actors participate in. In my own undergraduate theatre education, I reflect specifically on scene work from *The Glass Menagerie* by Tennessee Williams (1944), the musical *Ragtime* (Flaherty et al., 1996), the play *Rabbit Hole* (Lindsay-Abaire, 2006), the musical, *Hairspray* (Shaiman et al., 2002) and Neil Labutes’ *The Mercy Seat* (2002). In these productions, there were themes of racism, trauma, mental illness, alcoholism, and grief. Considering the previously mentioned statistics, it would be likely that to portray these roles, actors were be pulling from or pushing away the emotional memories of their own lived experiences, which can be extremely damaging. There is an urgent call for instructors to have a trauma-informed lens and developmentally appropriate curriculums. Now, more than ever, ““there is a need to outline critical issues to consider” when training student actors (Pedrelli, Nyer, & Yeung, et al, 2015).

### **Developmental Stage of Student Actors**

The years in which individuals traditionally attend college coincides with the developmental stage of emerging adulthood (Degges-White, S., & Borzumato-Gainey, 2013, p. 1). The transition to college-life might appear brief, but, it can span over the first few years as students “navigate their own complexity within a diverse community” (Degges-White, S., & Borzumato-Gainey, 2013, p. 2). In the United States, 18 years of age denotes “adulthood” and in

many ways, Deggs-White and Borzumato-Gainey (2013) argue that these students are “still very much adolescents and the developmental path of this group moves through many different landscapes, including cognitive, psychosocial, neurological, and emotional realms” (p. 2).

Instructors need to meet their students where they are developmentally.

The research strongly suggests that there are significant factors that contribute to the poor mental health of student actors. The years in which an emerging adult actor, ages 18-25 years old, attends a secondary education can be fraught with the makings of anxiety, stress, and depression. This is easy to believe as “students enter college at about the age of 17 years and are expected to acquire skills and education that will prepare them to enter the work force in a span of 3-6 years” (Bijulakshmi et al., 2020). If career pressure is not enough, many college student actors are navigating newfound independence and self-reliance. This can include managing their schedules, cooking, working, cultivating romantic relationships, expanding social circles, studying, navigating internships, managing sleep schedules, and faced with substance abuse and party culture for the first time (Degges-White & Borzumato-Gainey, 2014, p. 30). In regard to the latter, “approximately one in five college students meet the criteria for alcohol use disorder (Pedrelli, Nyer, & Yeung, *et al*, 2015). This number is more troubling when considering the high alcohol abuse rates of performers. In the Australian Actors Wellbeing Study (Seton, Maxwell, Sazbo, 2019), it was discovered that actors consume alcohol at higher levels than recommended and higher than the general population (p. 130). Another agitator towards the mental health of student actors is a collective lack of curfew. “For some, the freedom of being curfew-free can lead to overly late nights and inadequate rest. Lack of sleep can lead to issues with wellness and can compromise all aspects of a student’s life (Degges-White & Borzumato-Gainey, 2013, p. 30). Without sleep, it stands to reason that students would have difficulty remembering

lines, showing up to rehearsal and meeting expectations of course work. This could breed a lack of confidence, stress, and anxiety, negatively impacting the mental health of student actors.

New responsibilities, party culture and lack of sleep can all individually be detrimental to the mental wellness of college students. When these issues compound, it is imperative for facilitators to be mindful of the greater needs of their students in regard to mental health. Pulling from my own experience as a college student, I can attest to the fact that the decline of my mental health was intensified by being a theatre student. In the Australian Actors Survey (Seton, Maxwell, Szabo, 2019), the findings report that there are many contributors to the mental unwellness of actors, many of which mirror the same unwellness of college students. For example, “irregular working hours (e.g., unpredictable hours, split shifts, working evenings and weekends), problems finding time for families and social relationships, disturbed sleep patterns” (p. 129) were all mentioned as contributors to poor mental health. Specifically for actors, there is an added layer of “the toxic and competitive nature of the performing arts industry, as well as performance-induced anxiety” sprinkled on top (Seton, Maxwell & Szabo, 2019, p.129). The acting profession is begging for actor mental health support and this research supports the legitimacy of that claim.

While in college, students generally have access to university counseling centers for support. However, it must be considered that these training programs might not provide the time for students to engage in this type of emotional hygiene. In fact, there are significant barriers to help-seeking for student populations (Hunt and Eisenburg, 2009). Lack of time, privacy concerns, lack of emotional openness and financial constraints were all included as a barrier to seeking professional help (Hunt and Eisenburg, 2009). For many in conservatory or university training programs, required courses last all day with a small break before evening rehearsals.

This schedule leaves limited time for studying, homework, and day to day errands, let alone an hour-long therapy session. On campuses, many counselors only work Monday through Friday, therefore, weekend support might have to be left to an outside campus therapist which could impose financial burden on the individual.

With all that college theatre students are managing; mental health support is often not a priority, though it is critical for sustaining a career in the arts. The literature shows that for students of color, finding time for mental health support is even more crucial as “college students exposed to overt racism as well as intended and unintended micro-aggressions experienced a rise in cortisol levels, increased depression, and other effects including an increase of coronary artery disease” (Dunne, 2019, p.75). The research also presents literature around non-traditional students, students who attend college later in life, and the mental health implications that they face. These students often “face numerous stressors associated with having multiple roles, demands, and financial obligations.” (Pedrelli, Nyer, & Yeung, et al., 2015).

### **Negative Mental Health Impact of COVID-19 on Student Actors.**

It is impossible to ignore the impact of COVID-19 on today’s acting students. The unprecedented changes in learning due to COVID-19 have resulted in higher levels of stress, anxiety and depression in college students (Bijulakshmi et al., 2020). In the study titled “Psychological Impact of COVID 19 on the Amount of Perceived Stress among College Students Studying across Various Streams in India during the Period of Lockdown” (Bijulakshmi et al., 2020), researchers note that isolation and uncertainty that students face due to lockdown “can lead to persisting feelings of stress, resulting in many conditions like anxiety, post-traumatic stress disorder, depression and panic disorder” (Bijulakshmi et al., 2020, p. 2890). According to the same study, college students reported that their stressors were exacerbated by

many having to move home during the lockdown and the subsequent year (Bijulakshmi et al., 2020). It also discovered that distancing mandates have a marked “negative impact on the psycho-social wellbeing of people” (Bijulakshmi et al., 2020, p. 2890). When students return to in-person learning in the fall of 2021, professors and helping professionals should anticipate a higher percentage of help-seeking students.

To mitigate these stressors and continue a sense of academic normalcy, theatre programs across the country attempted connection and creation, virtually. While the virtual format of higher education was on the rise before COVID-19, many university theatre departments pivoted to online learning for the first time and were faced with new stressors (Bickle et al. 2019). Scholarship surrounding online learning and hybrid programs prior to COVID-19 addressed the complications and efficacy of the virtual classroom, citing issues for students and faculty surrounding “student self-direction, the lack of an in-person learning community (Pilgrim, et al., 2020, p. 29). Researchers also reported findings around “the decreased ability of the instructor to perceive important non-verbal cues that indicate understanding and engagement. The lack of these cues can create situations where instructors miss the learning needs of students” (Pilgrim, et al., 2020, p. 30). This is particularly challenging for acting students, as they are provided instruction not only in class, but also through their productions. Columbus State University (2020) reported “Our productions have always been the lab for what takes place in the classroom. The place where we put study into action” (para. 4. This loss of in person instruction could lead to lower confidence, less attunement between professor and student, higher levels of stress, and a lack of preparedness for a future career. While the research surrounding online learning appears fraught with doom and gloom for acting students, there are a handful of positive outcomes that should be further examined. For example, found benefits of online learning

include economic considerations, improved diversity, increased access for students who would not be able to relocate, and an academic schedule that fits the lives and learning styles of the students (Bickle et al., 2019). Although virtual learning has its drawbacks for actors, it has also shown to be beneficial. It is imperative that theatre educators strive to capture the positive moving forward in this stressful time.

### **Potential Harms of Acting Training**

Acting is often defined as “living truthfully under imaginary circumstances,” and the training to be able to do so is varied. Some acting training promotes an inside out approach, which “emphasizes utilization of internal factors, such as the actor’s imagination, memories, experienced emotional states, and in-the-moment experience and interaction with another actor to portray a role” (Burkhart, 2017, p. 11). Others submit to an outside-in approach which “highlights the influence of breath, facial expression, muscle tension, and physical positioning (combined, these factors are referred to as an “effector pattern” to support actors’ achieving particular emotional states (p. 12).

In my own training, which utilized both outside in and inside out techniques, there were still two main offenders within the training to the mental health of myself and others. First, students entering the program with previous trauma experienced pressure to pull on their past for realistic affect and heightened aesthetics. The second being incomplete, or lack of, training on how to get out of character, which I will refer to as de-rolling. The former was mainly limited to unsupervised student directed performances, while the latter was typically an afterthought.

No matter the preferred technique of a program, young actors can recognize both the cathartic benefits and harm of psyche purging that can arise when enrolling as another. Catharsis can be described as occurring “when the participant or viewer relives emotions, but is not

overwhelmed by them” (Landy, 1983, p. 177). However, actors and instructors should be mindful that “drama conventions and ploys that invite participants to tap into potentially dangerous inner spaces can unwittingly re-wound and prolong a healing process already underway” (Gaines, Butler, & Holmewood, 2015). Dangerously, this emotional vulnerability often emerges as the “quality most valued and required as a gestural symbol of commitment to the discipline of acting” (Arias, 2019, p. 13). This long-held belief can lead young actors to “suffer for their art – leading to irreversible psychological and emotional consequences” (Yekanians, 2019, p. 155). There is also a harmful notion that “young acting students are often willing to do whatever a director tells them to do with no protest, especially when auditioning for a part or exploring an ‘on-the-edge’ character” (Bailey & Dickenson, 2016, p. 7).

When these occurrences appear, it must be impressed by instructors that while acting can be cathartic, it does not serve as a replacement for therapy. This can prove difficult as “the temptation to follow and encourage them into under distanced territory is seductive, particularly when such brave efforts in this vein can be so engaging, inspirational, beautiful, politically, or socially transformative, or potentially contribute to participants’ well-being (Gaines, Butler, Holmewood, 2015, para. 19). Due to the developmental period that college students are in, the responsibility to self-manage emotional impact must not be solely left in the hands of the student actor, especially when dilemmas “arise when participants are too vulnerable to protect themselves or independently assert healthy boundaries” (Gaines, Butler, & Holmewood, 2015, para. 3). The literature around mental health of actors “suggest that traumatization can happen directly, by triggering an actor’s personal trauma memories, or indirectly, as a result of portraying and witnessing traumatic events” (Burkhart, 2017, p. 19). When students become overwhelmed, a “quasi-therapist role” often befalls theater faculty, asking professors to operate

outside their scopes of practice (Gaines, Butler, & Holmewood, 2015). I mention this particularly considering COVID-19 and the parallel toll the virus has taken on both student and instructor.

### **De-roling**

De-roling, or a “set of activities that assist the subjects of therapy in ‘disrobing’ themselves from their fictional characters” is a vital, yet often overlooked aspect of actor training (Gualeni, et al., 2017, p. 2). Alba Emoting provides a “step out” process “actions (e.g., deep breaths, stretching) designed to support actors in discharging role-associated emotions and returning to a neutral emotional state, to prevent negative emotional aftereffects” (Burkhart, 2018 p. 24) and some actors utilize personal rituals of running, mindfulness, taking off characters clothing and makeup and listening to music to get out of character.

In fact, “taking the time to de-role promotes positive mental health for actors” (Bailey & Dickenson, 2016, p. 4). Unfortunately, actor training is almost exclusively focused on getting into a role, but little to no direction is provided for actors to get out of the role (Tinkler, 2014). When instructors provide acting methods that they “insist actors’ practice in order to (re)produce authentic emotional performances on stage, while still asking them to somehow remain safe and psychologically detached from their real-life emotions offstage,” they are leaving young actors to their own underdeveloped cool down or de-rolling process (Yekanians, 2019, p. 159).

If an actor does not properly de-roll, their mental health can be put at risk as “the character’s tensions, eccentricities, and maladjustments can seep into the actor’s personal life” (Bailey & Dickenson, 2016, p. 2). The “blurred boundaries” between actor and character are often an unintended result of actor training. For example, the prominent Stanislavski technique encourages actors to “live oneself inside the part,” while the Meisner Method asks actors to “do much of their affective memory/emotional recall work as “homework” to be completed” (p. 2).

This is a potential danger to student actors if they have a related trauma history to their role. In fact, “In a worst-case scenario, without a way of de-rolling, actors who have emotional vulnerabilities due to past emotional or physical abuse can face re-traumatization” (p. 5).

Fortunately, drama therapy provides clear exercises for de-rolling practices. In drama therapy, de-rolling is facilitated to bring clients from their heightened roles, and back into their present reality. De-rolling allows time and space for clients to process their session, reconnect with their body, and set goals for future work. This can look like a magic box, where clients get to “leave” one thing in the box, and “take” something with them from session to support them during the week. De-rolling also can be as simple as saying “I am not Lady Macbeth, I am Emily” and then listing three similarities and three differences from the character.

In theatre training, de-rolling practices can be tailored to the specific needs of student actors depending on if they are in class, rehearsing or in production of a show. For example, during rehearsals directors can help actors de-roll by clearly delineate spaces for the character (the stage), and the actor, (the audience). Notes, corrections given from director to actor post-rehearsal, should take place after group de-rolling and not on stage and should be given to the actor, by their name, instead of the character name (Bailey & Dickenson, 2016, p. 11). Speaking to the actors by their name also aids in de-rolling as it separates “the entities separate entities in his mind as well as in the minds of the actor and the other cast members (p. 12). Additional techniques include “shaking limbs and body to literally shake the character off, or ritualistically stepping out of a performance by handing back a character's specific prop or costume piece to a director” (Kansas State University, 2014, para. 4).

The inclusion of de-rolling practices in college actor training promotes mental wellness by allowing performers to, “separate their work life from their home life and allows their

personality to continue individuating as an adult” (Bailey & Dickenson, 2016, p. 16).

Additionally, there is a wide breadth of scholarship noting the positive impact of cooling down or de-rolling for professional athletes, some of which includes “lengthy cooling-down processes as a core practice, often focused on reducing levels of physiological excitation, but in recognition of the complex correlation of heightened physiological and psychological activation” (Seton, Maxwell, and Szabo, 2019, p. 140). One challenge of implementing de-rolling practices is that many actors are excited to go home or see audience members after a show and do not take the time to fully cool down. Therefore, it is imperative that de-rolling be modeled and practiced in class and rehearsals so that each actor can modify their own de-rolling ritual to their specific needs, post show.

### **Aesthetic Distance**

Aesthetic distance is an expressive therapies term that utilizes an artistic medium to separate the art psychologically from reality. It can be defined as “a point in which the client can have access to their feelings and also maintain an observer stance” (Carey, 2006, p. 58).

Both in drama therapy practices and when directing actors, guiding a participant into aesthetic distance can be a tricky, and yet a vitally important realm. When actors are under-distanced from their roles, they might experience re-traumatization and be unable to separate their emotional experience from their characters. Under distancing can unwittingly be facilitated by acting techniques that draw from personal experiences. It can also occur unintentionally, as young actors either ignore warnings from instructors, or are surprised by the life-drama connection between themselves and their role.

Conversely, and perhaps the focal point of actor training is the over distanced actor. Over distanced actors might struggle to connect their effect to the emotions of the character. It is often

this phenomenon that acting techniques work to close the gap on. The challenge of aesthetic distance is that “it is up to the facilitator or therapist who modulates distance, or rather the therapist helps the client to achieve a balance of distance” (Landy, 1983, p. 178). So, the actor is not able to self-manage aesthetic distance, but rather, requires the support of a director.

To navigate aesthetic distance within theatre departments, instructors, directors, and student directors can employ drama therapy techniques to guide actors towards a state that can represent the emotional state of a character without becoming overwhelmed. For example, in particularly emotional scenes, the director can choose to “move from focus upon the protagonist to focus upon the group as a means of separating the protagonist from an intensity of feeling” (p. 182). That might look like a director calling “pause” in the middle of Lady Macbeth’s monologue and checking in with how the other characters are perceiving the sleepwalking scene. Conversely, aesthetic distance can be employed when Lady Macbeth and Macbeth are in intense dialogue, where the director might ask each character to improvise a monologue to create distance from the intensity experience when speaking directly to one another (p. 182). The challenge with aesthetic distance is that it can be difficult to know what is over or under distanced for everyone.

In the classroom, instructors might choose to utilize aesthetic distance when working on self-esteem, autonomy, self-trust, and resource building. An example would be having students create a social atom at the start of semester, halfway through, and at the end of the semester. A social atom is an “interpersonal map” that indicates the amount of influence others have on the student actor (Carey, 2006, p. 64). For actors, the inclusion of characters the actors have portrayed over the semester could be included in the social atom, allowing both the student and instructor to manage distance between roles.

## **Group Work**

Group work is a gift to theatre instructors who desire to create an intentional holding space for the mental wellness of student actors. Considering COVID-19, and the political and racial injustices of 2020 in the United States, in addition to previous trauma or mental health concerns, implementing drama therapy group practices holds space for the emotional state of student actors, bucking against the old saying “Leave it at the door.” Group work is also an opportunity for students to process how their role as actor has changed due to the pandemic.

Group work is probably the most familiar to actors, disguising in theatre games and exercises to promote community, confidence, flexibility, trust of others and self-trust, mastery, and emotional processing. In acting training, group work can be found in theatre games and warmups, improvisation courses, and the Laban Technique. Theatre games are a very familiar practice for acting students working on their improvisational, focus, noticing and spontaneity skills. Through the lens of drama therapy, these games turn into key moments for here and now processing. Esteemed drama therapist, Renee Emunah (2020) provides drama therapy exercises specifically for group work. Drawing from her research, a facilitator might pick up on the feelings of a group of actors and transform them into sound, movements, or words for the Group Mirror exercise (Emunah, 2020, p. 169). This would be an excellent exercise for processing around auditions, tech weekends, and graduation. These exercises could also contain larger feelings around the recent issues in the United States, including COVID-19, Black Lives Matter, and AAPI hate crimes. Having a safe space to process emotions through the artistic medium that feels most comfortable to student actors could relieve stress and promote a deeper sense of community and support.

### Discussion

After reviewing the literature, it is apparent that there are significant mental health risks for student actors. In a time of a young actor's career where they are being trained to access deep and repeatable emotions, they are also experiencing the same stress and mental health concerns of many college-aged students. In 2020, COVID-19 was an added stressor to the plate of student actors as their training and future career field came to a screeching halt. With most programs not being trained in trauma-informed practices, the potential for psychotically harm is significant. Fortunately, there are drama therapy practices that might help alleviate this issue.

The developmental stage and mental health trends of student actors indicate a high risk for continued mental health issues throughout the student's lifetime (Seton, Maxwell, and Szabo, 2019). This is due to the stress of managing schedules, disrupted sleep, substance abuse issues and academic pressures. With depression, anxiety and other mental illnesses developing by twenty-four years old, and the high percentage of students entering college with previous trauma, the student actor must carefully not neglect their emotional hygiene when preparing for a role. Student actors would greatly benefit from drama therapy practices that aid in shedding the character, create emotional distance from the character's experience and their own, and cultivate a sense of community. Unfortunately, at this time, drama therapy practices are not widely known and there is little research on the emotional impact of actor training.

While scholarship on the impact of COVID-19 on mental health for college students continues to emerge, the current literature suggests reoccurring themes surrounding the impact of social isolation, stress of returning to live with family members, and anxiety around future careers. As these students return to school in the Fall semester of 2021, theatre department

faculty should be wary of the mental wellness of their cohorts and how it may affect academic achievement and future career prospects.

American Theater Magazine's article titled "The ZOOM Where It Happens" (2020) mentions students and teachers alike are coming back to campus with a changed viewpoint on the arts. Students are returning with much more on-camera experience, slower lives, scarcity mindset and a greater focus on their mental health (American Theater Magazine, 2020). This shift in theatrical culture must be acknowledged and supported by theatre faculty.

There is also a marked uncertainty around the return of Broadway, touring productions, and indoor theatre, another stressor for theatre students. In the first eight months of 2020, "employment at U.S. performing arts companies fell by 52,500 workers, or nearly 55 percent. In the third quarter of 2020, the unemployment rates for actors and dancers and choreographers exceeded 50 percent" (National Endowment for the Arts, 2021, p.7). As I consider the socio-economic issues that face theatre artists, and the privilege that is often found in actor training programs, I wonder if the financial impacts of COVID-19 will cause a divergence in traditional actor training, where young actors skip university training all together and go straight into the workforce. Knowing the additional impact of COVID-19 on students should highly encourage professors and training teams to consider incorporating drama therapy group work practices into their fall curriculum.

In actor training, students are tasked with learning the objectives, motives, goals, histories, and emotional landscape of their character. In undergraduate training, this is often achieved by the Stanislavski Technique and Meisner Methods. Another technique, the Laban Movement (Wood & Young, 2018) allows students to discover how characters' bodies move through space and in relation to others. These methods to get an actor into the mind and body of

a character are often carefully scaffolded. However, the young actor might push deeper into their own personal experiences for the sake of a deeper or more realistic performance. The praise from peers and instructors might perpetuate harmful behavior, blurring the emotional experience of the actors with the character they are portraying. The lack of trauma-informed training that instructors hold when guiding students through their own psyche is one of the major dangers of the acting field.

As a result of the literature review, I recognize opportunities for acting professors to integrate drama therapy techniques into their training programs to support students with and offset potential for harm. De-roling and aesthetic distance give techniques for both the actor and director to create boundaries and unblur any “role confusion” (Arias, 2019, p. 23). This distance benefits the mental health of the actor and prevents the instructor from potentially working outside of their scope of practice and into a “quasi-therapist” role (Gaines, Butler, & Holmewood, 2015). Additional support for the student actor is supplied by drama therapies group work. Group interventions allow the group to process difficulties that arise, regulate emotions, and provide a space for the group to self-manage.

Research around the mental health of actors is growing and I believe that this literature review has established a strong foundation for my own future study. Moving forward, research could examine how aesthetic distance and de-rolling interventions can support devised theatre and experiential theatre. Devised theatre is not bound by a script, and much of the generation of the play utilizes the words, sounds, movement, and experiences of the actors involved. Because of the nature of devised theatre, it can nudge itself into under distanced territory. Within experiential theatre, researchers could investigate the aesthetic distance and de-rolling practices of the audience members and how their presence, or lack thereof, impacts their emotional

experience and mental health. I bring this to attention particularly considering how theatre's have pivoted to devised and experiential seasons due to COVID-19. I am interested in how a longitudinal study of a cohort over the four years of an undergraduate theatre program could provide insight to the mental health trends of student actors. Keeping track of roles played, mental health support, alcohol consumption, sleep patterns and post-graduation plans might prove prolific.

Through this research I discovered how drama therapy practices can positively impact the mental health of student actors, and it makes a call for these drama therapy practices being woven into the fabric of acting school curriculum. However, it would be negligent of my research to exclude the trauma theatre instructors faced this year, much like their students. There is a need for instructor support, which is why I propose theatre training programs to employ drama therapists for workshops, consultation, and curriculum building. For future research, I believe areas of focus include drama therapy for the student director and devised theatre. I also note that future research has the potential include a more robust look at the impact of COVID-19 on student actors and the professional field of theatre.

Challenges to this include the funding for drama therapists to continue research and to provide these curriculums to theatre departments through training and consultation. Additionally, the drama therapy field is still burgeoning. The growing field faces challenges to clinically justify the work. Luckily, there are drama therapists who are working towards manualization of drama therapy practices. There is also a residual old school mentality of theatre training, which subscribes to outdated and harmful practices that capitalize on trauma for aesthetic value. The "thick skin" mentality that perpetuates toxic behaviors in the acting workplace is still very much present. Lastly, there is the challenge of drama therapy practices being considered therapy or

therapeutic. I do not suggest that drama therapy informed practices should be a replacement for therapy, as much as I do a mental wellness safety precaution for student actors.

In a creative response to my critical look at trauma-informed actor training programs, I created a Haiku poem after each section of my literature review. Once I had completed the review, I created a culminative poem. I chose this artistic response to serve as an example of aesthetic distance and de-roling. Below I have included two figures. The first, my initial Haikus, and the second, a culminative poem that pulls words from each Haiku to make a new poem.

Figure 1

Haikus from Literature

The harm is present  
 We cannot put a mask on  
 The truth is coming

Come away dear one  
 That role does not own you now  
 Relax in yourself

No one is alone  
 Allow the group to hold you  
 Trust falling is fun

Someone help them now  
 They are struggling as well  
 Teaching is so hard

Give me more research  
 I have just gotten started  
 Student role is done

*Note.* The collection of Haikus inspired by each section of literature review

Figure 2

Leave It at The Door

Presently I run away  
 Relaxing alone  
 Feeling held feeling trust  
 You witnessed and helped my struggle  
 Give me a little more time to get it right  
 The process has just started but for now,  
 I am done.

*Note.* The final poem, with words taken from the original Haikus

In conclusion, drama therapy is a good fit for theatre departments, as actors and drama therapists share the same language. I like to think that we are cut from the same cloth, we just made different blankets. Facilitators of theatre and acting students being trauma-informed is imperative for their health after the major events of 2020 and drama therapy practices can support these urgent needs. And ultimately, these interventions beginning at the student level sets positive standards for mental health within the entirety of the performing arts field.

I believe that theatre training programs are the true catalyst for change in the theatre industry. Theatre departments that take drama therapy on for their best practices set the precedent for life-long mental wellness and sustain the careers of their students. Drama therapy gives actors the tools for a successful vocation. Additionally, it provides professors with an ethical and clear path forward to support their students. Drama therapy will not ask that actors leave their stories at the door, but rather invite them in, knowing that the foundation of research and the magic of theatre can hold space and boundaries for them all.

References

- Arias, Gabrielle L., "In the Wings: Actors & Mental Health A Critical Review of the Literature" (2019). Expressive Therapies Capstone Theses. 109.  
[https://digitalcommons.lesley.edu/expressive\\_theses/109](https://digitalcommons.lesley.edu/expressive_theses/109)
- Bailey, S., & Dickinson, P. (2016). The Importance of Safely De-roling. *Methods: A Journal of Acting Pedagogy*, 2, 1–18.
- Bickle, M. C., Rucker, R. D. and Burnsed, K. A. (2019), 'Online learning: Examination of attributes that promote student satisfaction', *Online Journal of Distance Learning Administration*, 22:1, pp. 1–8.
- Bijulakshmi, P., Ramasubramanian, V., Mathumathi, Rajendhiran, G., & Ramasubramanian, C. (2020). Psychological Impact of COVID 19 on the Amount of Perceived Stress among College Students Studying across Various Streams in India during the Period of Lockdown. *Journal of Evolution of Medical and Dental Sciences*, 9(39), 2889+.  
[https://link.gale.com/apps/doc/A638877458/AONE?u=les\\_main&sid=AONE&xid=b747e892](https://link.gale.com/apps/doc/A638877458/AONE?u=les_main&sid=AONE&xid=b747e892)
- Burkhart, J. N. (2018). "It's Like a Ghost": A qualitative analysis of the experiences of theatre actors performing in a play about child sexual abuse. *Dissertation Abstracts International: Section B: The Sciences and Engineering*, 78(9-B(E)), No-Specified. Retrieved from <http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=psyc15&NEWS=N&AN=2017-29364-111>
- Carey, L. J. (2006). *Expressive and creative arts methods for trauma survivors*. Jessica Kingsley Publishers.

- Dunn, K.A. (2019). Hidden Damage: When Uninformed Casting and Actor Training Disregard the Effect of Character Embodiment on Students of Color. *Theatre Symposium* 27, 68-79. doi:10.1353/tsy.2019.0005.
- Considine, A. (2020). The ZOOM Where It Happens. *American Theatre*, 37(4), 20–23.
- Emunah, Renée. *Acting for Real : Drama Therapy Process, Technique, and Performance : Drama Therapy Process, Technique, and Performance*, Taylor & Francis Group, 2019. ProQuest Ebook Central, <http://ebookcentral.proquest.com/lib/lesley/detail.action?docID=5899324>.
- Degges-White, S., & Borzumato-Gainey, C. (2014). *College student mental health counseling: a developmental approach*. Springer Publishing Company, LLC.
- Flaherty, S., Ahrens, L., McNally, T., Mitchell, B. S., Friedman, P., Mazzie, M., McDonald, A., Doctorow, E. L. (1996). *Songs from Ragtime: The musical*. Toronto, Ont.?: Livent Music.
- Gaines, A.M., Butler, J.D., & Holmwood, C. (2015). *Between Drama Education and Drama Therapy: International Approaches to Successful Navigation*. p-e-r-f-o-r-m-a-n-c-e, 2 (1-2). <http://p-e-r-f-o-r-m-a-n-c-e.org/?p=1223>
- Kansas State University. (2014, June 5). How de-roling may help actors shed intense roles. *ScienceDaily*. Retrieved April 26, 2021 from [www.sciencedaily.com/releases/2014/06/140605140011.htm](http://www.sciencedaily.com/releases/2014/06/140605140011.htm)
- Labute, N. (2002). *The Mercy Seat*. New York, NY, Faber & Faber
- Landy, R. J. (1983). The use of distancing in drama therapy. *The Arts in Psychotherapy*, 10(3), 175-185. doi:10.1016/0197-4556(83)90006-0
- Lindsay-Abaire, David. (2006). *Rabbit hole*. New York : Theatre Communications Group

National Endowment for the Arts (2021). *The Art of Reopening: A Guide to Practices Among Arts Organizations During COVID-19*.

<https://www.arts.gov/sites/default/files/The%20Art-of-Reopening.pdf>.

Pilgrim, K., Ventura, N., Bingen, A., Faith, E., Fort, J., Reyes, O., Richmond, M., Rosenthal-Schutt, S., Schwinn, S. A., & Butler, J. D. (2020). From a distance: Technology and the first low-residency drama therapy education program. *Drama Therapy Review*, 6(1), 27–48. [https://doi.org/https://doi.org/10.1386/dtr\\_00014\\_1](https://doi.org/https://doi.org/10.1386/dtr_00014_1)

Pedrelli, P., Nyer, M., Yeung, A., Zulauf, C., & Wilens, T. (2015). College Students: Mental Health Problems and Treatment Considerations. *Academic psychiatry: the journal of the American Association of Directors of Psychiatric Residency Training and the Association for Academic Psychiatry*, 39(5), 503–511. <https://doi.org/10.1007/s40596-014-0205-9>

Seton, M., Maxwell, I., & Szabó, M. (2019). Warming up/cooling down: managing the transition on and off stage. *Theatre, Dance and Performance Training*, 10(1), 127–141. <https://doi.org/10.1080/19443927.2018.1551813>

Shaiman, M., O'Donnell, M., Meehan, T., & Wittman, S. (2002). *Hairspray*. New York: Applause Theatre & Cinema Books.

The Show Must Go On: COVID-19's Impact on the Theatre Department. (2020, September 17). *UWIRE Text*, 1.

Young, J., & Wood, L. L. (2018). Laban: A guide figure between dance/movement therapy and drama therapy. *The Arts in Psychotherapy*, 57, 11–19.

<https://doi.org/10.1016/j.aip.2017.09.002>

**THESIS APPROVAL FORM**

Lesley University  
Graduate School of Arts & Social Sciences  
Expressive Therapies Division  
Master of Arts in Clinical Mental Health Counseling: Drama Therapy, MA

Student's Name: Emily Faith

Type of Project: Thesis

Title: Drama Therapy for Actor Training Programs

Date of Graduation: 05/22/2021

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: Tim Reagan, PhD, RDT