MEMOIRS OF THE FORGOTTEN ONES: THEATRE AND DRAMA WITH ADULT SURVIVORS OF CHILDHOOD TRAUMA AND ABUSE

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ABSTRACT

Memoirs of the Forgotten Ones was an autobiographical performance presented to the public in March 2007 by a group of adult survivors of institutional childhood abuse and trauma. The performance marked the culmination of 'Moving On', a collaborative action research project funded by the Australian Research Council and undertaken in partnership between Griffith University and Relationships Australia. The study explored the potential benefits of using drama and counselling with participants who experienced sexual and/or emotional abuse, trauma and neglect under the Queensland state care system during the 1930s to the 1970s. For 18 months I was engaged in Moving On as facilitator and director, helping participants to bring their experiences from the internal world of memory and trauma, to the external world of the stage. This paper describes the project in terms of its potential to engage participants in a transformative creative process, in which the often destructive internal narratives of individuals were externalised, validated and re-created to make autobiographical theatre.

INTRODUCTION

There is no curtain or raised stage. There is just a black space with a low wash of light. The dimness reveals three over-sized figures draped in fabric – two black and one white. These are the nuns, or brothers, or nurses, or doctors – whoever was charged with looking after the "forgotten one". Seated at the front of the stage is a rumpled white doll about the size of a child. (Author"screative reflection)

'Moving On' was a collaborative action research project, funded by the Australian Research Council, and undertaken by Griffith University and Relationships Australia's Aftercare Resource Centre. The research aimed to investigate how drama might empower adult survivors of institutional abuse to 'move on' from the trauma they had experienced as children. For 18 months, I was involved in Moving On as both facilitator and embodied researcher, helping participants to bring their experiences from the internal world of memory and trauma, to the external world of the stage. This paper describes the project in terms of its potential to engage participants in a transformative creative process, in which the often destructive internal narratives of individuals were externalised, validated and re-created to make autobiographical theatre. The paper also highlights the partnership between drama facilitators and counsellors who met on common ground from within their respective disciplines in the hope of providing a safe yet challenging creative space. The voices of participants helped to tell this story, in which the process was at times conflicting and at times harmonious; and in which certain individuals found social connection, a sense of community, and a movement towards healing and empowerment through negotiating the paradoxical world of drama.

BACKGROUND

The 'dramatic paradox' is a term that I have purposefully borrowed from Robert J. Landy who uses it to describe the oppositional duality that simultaneously exists within drama: 'being me but not me'

(1994, p.5). From the theory of performance, I found that a number of seminal artists such as Artaud (1958), Grotowski (1968) and Brook (1968) articulate how they might negotiate the paradox to yield more powerful experiences for actors and audiences alike. Theorists such as Evreinoff (1927), Wilshire (1982) and Schechner (1988) describe the theatre/life dichotomy – an embodiment of the paradox as approached from either side of the coin. Boal (1979) saw the dramatic paradox as a vital tool for social change. Heathcote (see Johnson & O'Neill 1991; Wagner 1976) Bolton (1979) and O'Toole (1992) have explored its value in drama education. And theorists and therapists such as Moreno (1977), Landy (1994), Emunah (1994), Duggan and Grainger (1997) and Blatner (2000), have further pursued it as a rich site for psychological healing and transformation. These previous explorations were vital in my study which positioned the dramatic paradox as a kind of gateway towards experiences of dramatic authenticity and positive transformation for the Moving On participants.

As the participants consistently described themselves as *survivors of abuse*, I therefore framed my analysis of their experiences to a certain extent within the literature of counselling, psychotherapy and drama therapy. The legacy of scholars and thinkers who inform applied drama theory such as Brecht (Needle & Thompson 1981; Willett 1964), Moreno (1977), Artaud (1958), Grotowski (1968), Schechner (1988), Brook (1968,1989), Boal (1979), Heathcote (see Johnson & O'Neill, 1991; Wagner 1976) and Courtney (1968,1995) expanded my search into areas such as *aesthetic engagement, meaning* and *truth*. Similarly, some of the literature of trauma and

psychotherapy yielded discussion around autobiographical memory, reality and the potential impact of trauma on the concept of self and story (Briere 2002; Cattanach 1996; Herman 1997; Meekums 1999).

The Moving On participant group was open, with newcomers welcome at any stage. Participants were aged in their 40s to 70s, and all had experienced significant problems resulting from the physical, sexual and/or emotional abuse that they endured as children. After the Commission of Inquiry into the Abuse of Children in Queensland Institutions *The Forde Report* (1999) was compiled, which officially detailed the extent of the abuse and neglect experienced by Queensland children whilst in state care. Subsequently, the Aftercare Resource Centre was established to service the community of former-residents, some of whom engaged in the Moving On project in varying degrees.

Although Moving On was an open group, a core of about 6 former-resident participants remained with the project from the outset, with other group members coming and going. I spent 18 months as a facilitator and director, moving us towards two public performances of their work. The first – a 'work-in-progress' allowed the group to safely try out their stories in front of an audience and receive valuable feedback. Seven months later, the second performance was the 'real thing': when we revisited, re-thought and reworked the scenes from the work-in-progress, hoping to create a more theatrically realised version for a paying public audience, and a deeper experience of emotional and dramatic engagement for the cast. The performance was called *Memoirs of the Forgotten Ones*.

There were four counsellors who worked on the project during my time who were often actively involved in the processes that took place. Also in the group were the researchers and originators of the project: Penny Bundy and Bruce Burton, experienced drama practitioners, Susan Kelly, a counsellor and PhD student and Merrelyn Bates, a social worker. During my time with the project, Penny and Bruce would support the process by working on scenes in smaller groups and Merrelyn would occasionally visit the group to offer her support and insights as she observed the process. Also supporting the drama process was the position of an undergraduate student placement whose role was to help facilitate, compile scripted material, assist with the production and perform if necessary.

TRAUMA & AUTOBIOGRAPHY

A summary of Briere's descriptions of the possible impacts of abuse and neglect includes: Difficult relationships due to a distorted perception of self and others; highly emotional responses to abuse-related stimuli (triggers); and difficulty in regulating strong emotions without resorting to avoidance strategies such as dissociation, sexual behaviour, eating disorders, aggression or substance abuse (2002,pp.2-6). Some of the Moving On participants had also been diagnosed with Post Traumatic Stress (PTS), with additional symptoms of this including flashbacks, nightmares and intrusive memories (American Psychiatric Association, 1994, cited in Briere, 2002). Gersie suggests that 'embedded in people's narratives are the practical, ethical and philosophical underpinnings upon which they habitually draw to make sense of life' (1997, p.211). Crossley believes that 'traumatic events in a person's life can lead to a radical sense of disorientation and the breakdown of a coherent life story' (2000, p.57). Narrative-based psychotherapy deals with *repairing* the trauma story (Crossley, p.57; Briere. p.21), and *integrating* this into the broader life story (Herman 1997; p.181). 'In the process of reconstruction, the trauma story does undergo a transformation, but only in the sense of becoming more present and more real. The fundamental premise of the psychotherapeutic work is a belief in the restorative power of truth-telling' (Herman,

p.181). The impact of trauma has the potential to operate in different ways as the participant attempts to create and articulate an authentic dramatic autobiographical narrative.

Hudgins suggests that 'experiential therapies directly target the disrupted and disorganised self-structures for true developmental repair' (2002, p.2). She points out, 'When trauma hits, the self becomes psychologically disorganised. The patterns and structures of self-organisation that were there, whether in childhood or as an adult, become frozen in time' (p.11).

Unconscious trauma material is experienced as sensations, nonverbal behaviours, and emotional tones Unprocessed memories of trauma are fragmented and free floating in unconscious awareness. Images are split apart. Sounds and smells hold feelings of terror and horror. Intense grief and rage are dissociated The pieces of reality are not labelled. They are not accessible by words. (Hudgins, p.13-14)

For Hudgins, talk therapy is not adequate in accessing this unconscious material (23). Moreno recognised drama as a form that might give voice to this emotional and unprocessed material by representing what he saw as the 'truth' that exists in psychological experience (Blatner, 2000, p.60). In her description of the abuse survivor, Cattanach states, 'Body boundaries have been so violated by aggression or through the emotional or sexual gratification of others that it becomes hard to value the self as a person with rights and needs' (1996, p.123). She suggests, 'Drama is an appropriate way to help heal the hurts of abuse through finding ways to validate the person and explore roles and identities which lead towards self determination' (124). According to informal conversations with two of the initiators of the Moving On project, this was one of the factors that influenced the counsellors at the Aftercare Resource Centre to search for a more creative intervention for their clients.

RESEARCH METHODOLOGY

The research methodology adopted for this study was deliberately eclectic. Primarily, I embraced Stake's (2005) notion of the case being simply a choice of what is to be studied which can then be approached using a range of methods. I was offered access to a range of qualitative data that was being collected as part of the larger study; although having decided to pursue the broad theme of 'authenticity', I then focused my research by conducting additional tape recorded interviews and discussions with various members of the group around this theme. I also conducted follow-up surveys and taped interviews with audience members and found that my own involvement with the project had generated 'artefacts' (Watson & Wilcox 2000, p.64) such as workshop plans, session notes and ideas, scripts and publicity materials. Being drawn to reflective practice as a research strategy, I invited participants to provide written reflections of their own experiences and created a consciously literary reflective narrative describing the project from my own point of view, which included fragments of narration created from my perceptions of the project, as well as the possible inner world of some participants.

As both researcher and facilitator of the process, I noticed a strong commitment from the participants, as well as facilitators and counsellors, to represent the stories of trauma and survival as *authentically* as possible. Under this broader banner of authenticity, I was interested in exploring the drive to tell these stories, as well as the possible tensions within the creative articulation of autobiography, the question of ownership, and how to artistically yet authentically approach the ugliness of abuse. These ideas shaped the interviews that I conducted with group and audience members, and informed my examination of videotapes from some of the first sessions in

which I had been involved. Concurrently, I explored the literature in relation to the question of authenticity or in many cases, 'truth'. The three main areas of literature – performance theory, applied drama, and counselling and psychotherapy, led me deeper into areas such as the paradoxical nature of drama, and the movement from the personal to the universal, as well as human responses to trauma in a psychotherapeutic frame, and the potential impact of this on the articulation of autobiographical material. These emerging notions of truth and authenticity found in the literature therefore influenced some of the interview questions and areas of focus for my own reflective material.

PROCESS

This workshop room is a bland and neutral space. It is a basement with no windows and fluorescent lights – the dull pale pipes that drain our energy of its natural light. It is free from major distractions, other than the chink of coins as the administrator reimburses bus fare, the ring-tones of mobile phones, the beguiling presence of tea and coffee, and the quietly compelling chat between counsellors and participants who need support. Utilitarian plastic chairs are arranged weekly in the obligatory circle. But when this bland space is full – it rattles and it rolls. As I descend the stairs, I see a fascinating, colourful slice of humanity. I feel the electricity of 18 personalities rubbing up against each other: hope against hope, fear against fear. (Author's creative reflection)

From early on, it was clear that the group wanted to use the theatrical form as testimony – to bring their stories out into the open – to tell the public what had happened to them – to push for compensation and accountability.

Being an activist of sorts I saw in a flash how the Moving On project could challenge society and help create debate in the community. (Lynne, participant, written reflection)

We want to show the people of Queensland what really happened in all homes, the cruelty of the nuns and others who were responsible for looking after us. (Patrick, participant, written reflection)

What began to evolve was therefore an autobiographical performance process, where participants would bring personal and at times extremely traumatic stories to share with the group. These stories would then be submitted to a process of 'dramatic rendering' where facilitators and counsellors worked with participants to develop, enact and rehearse their stories for the stage.

For me, one of the most fascinating aspects of Moving On was the working partnership that developed between drama facilitators and counsellors. Two worlds colliding may seem a bit strong – but it points to the meeting of two separate disciplines, each with its own practical and theoretical frameworks and agendas. The meeting of these two worlds is by no means new – from the use of role play in counselling and psychotherapy, through to discreet disciplines such as psychodrama and drama therapy – there is a history to draw upon. But Moving On created its own range of tensions and opportunities that arose out of this collaboration.

Perhaps most notably, we needed to achieve a balance between safety and risk. Drama is often all about risk – taking risks in improvisation and performance, tackling difficult material head-on, demanding participation from the audience by asking difficult questions. In this particular context, I was faced with making judgements about

how much risk the group and individuals within it were ready to take. For me, the maintenance of emotional safety in the room was paramount. However, we would not achieve what we set out to if we didn't go into difficult territory. For some of the counsellors, this appeared to be somewhat confronting – with the very immediate and direct nature of the drama at times moving people forward much more quickly than they might in one-to-one counselling sessions.

The desire for personal testimony in Moving On presented us with many tensions as we approached the autobiographical material with the 'language' of drama. Participants appeared to hold a strong sense of ownership over their stories which I wished to honour as best I could. Merrelyn echoed this sentiment in her approach to counselling: 'The way I operate therapeutically is that a person's perception is their reality – so if that's their truth, then that's what I work with.' A highly subjective notion of 'truth' or 'what *really* happened' underpinned the participants' drive for testimony.

When people talk about their lives, people lie sometimes, forget a little, exaggerate, become confused, get things wrong. Yet they are revealing truths . . . the guiding principle could be that all autobiographical memory is true: it is up to the interpreter to discover in what sense, where and for what purpose. (The Personal Narratives Group, 1989:269)

The impact of trauma on the coherence of a life story (Crossley 2000, p.57), as well as its potential impact on participants' memories and psychological experiences of their subjective 'reality' (Briere 2002; Herman 1997; and Hudgins, 2002), constantly operated within the workshop room, alongside the challenges in respecting participants' ownership of their stories and right to testimony.

'MOVING ON' OR STAYING HERE?

They are addicted to telling. Their instinct is to stay seated and tell the story. When moved to enact, they stand and they tell. She becomes frustrated with this, but knows that in standing and describing these details - "this is the dormitory, my bed was here, the nun came in this door..." the story begins to take on a third dimension. It begins the gradual process of externalisation. It begins to live again. (Author"screative reflection)

Ross (participant):	I prefer it [using cloth puppets instead of human actors] it allows you to
	remove yourself one step from it so that you're telling the story but it's not
	personalising the emotions so much.
Patrick (participant):	But if it's got to be real we can't use puppets just for a real performance
	can we?
Bruce (facilitator):	Why not?
Patrick:	Well, look at it this way – the performance has got to be real see? We're real
	people – not puppets.
Ross:	Yeah but the puppets can make it more real for the audience Patrick. They
	can tell the story better.

I saw my purpose in Moving On as to facilitate the participants in aesthetically rendering their autobiographical material, at the same time respecting their sense of ownership over the subjective truth of their experiences. By

working with the languages of theatre and drama I hoped that participants and audience alike would experience dramatic authenticity and therefore a deeper level of engagement with the material (Taylor 2003, p.34). I often noticed the participants revert to a kind of relentless *telling* where they seemed reluctant to enact their experiences (Landy, 2001, p.60). In trying to bring dramatic form to these experiences, I then experienced the tension of being told 'no, it didn't happen like that.' And how could I argue? Other practitioners have described a tendency for participants to favour naturalistic re-enactment as a way of more faithfully representing autobiography, yet suggest that this does not accurately capture their subjective experiences (Emunah 1994, p.60; Nicholson 2005, pp.89-90). It seemed to me that the only way to move the group from the telling to the *drama* was to spend considerable time in this naturalistic re-enactment, where 'facts' were honoured and participants were at least moved out of their storytelling chairs.

Moving into a more symbolic rendering of participants' stories, I was motivated by both artistic and therapeutic agendas. The multi-disciplinary literature explored for this study articulated a shared drive towards uncovering the deeper emotions and meanings that lie at the core of experience for both aesthetic and therapeutic benefit (Blatner 2000; Bolton 1979; Courtney 1995; Duggan & Grainger 1997; Herman 1997; Meekums 1999; O'Toole 1992) with a sense that these meanings, like identity itself, are constantly shifting (O'Toole 1992, p.217). I had described the search for deeper meanings to the participants as a search for 'emotional truth' the majority of which began to take place after the work-in-progress in which some participants had not moved far beyond factual re-enactment.

It appeared to me that the participants could be positioned on a kind of 'continuum of aesthetic literacy.' Courtney connects aesthetic thought with feelings, intuition and imagination adding, 'The kind of feeling carried by dramatic acts is usually beyond the reach of language' (1995, p.22). He suggests that symbol and metaphor originate in this intuitive realm and therefore provide an aesthetic language with which to describe it. The participants Ross and Lynne seemed to have developed a strong aesthetic literacy through their previous experiences with the arts. Ross, an undergraduate drama teaching student, often used dramatic language to support other participants, by both writing scripts and assisting with interpreting stories. Lynne had originally been born into a family of artists, dancers and musicians, and had gone on to express her trauma through painting and writing. Others, such as Zara and Joan had expressed their trauma through poetry; whereas participants such as Patrick and Glenda seemed to struggle with accessing and understanding this kind of language.

Regardless of how effectively participants engage with the aesthetic, it is worth noting that there may exist a potential pitfall in this kind of autobiographical process – that it might elicit self-indulgence or stagnation (Emunah 1994, p.292), or even an experience of re-traumatisation.

Sarah: What impact do you think it's having on the participants to be focusing primarily on their own stories in which they play themselves?
Merrelyn: I suppose I am ambivalent because I think a positive of it is that they're having their stories heard and I think that's been important to them But I think it's a fine line between having that as a positive and investigating how rehearsal can actually be a debriefing process for PTSD [post-traumatic stress disorder], and them getting stuck – 'this is the only identity I have'.

Indeed, I personally held concerns about this potential at various points throughout the process. It is difficult for me to gauge how much the focus on the trauma story might have caused some participants to be stuck in their

position as victims, or else to be re-traumatised by the material. Ross felt he could not return to his scene after the work-in-progress because the process of enactment had been too difficult. I remember one day he said something to me like, 'I don't want to go back there; I've found a way to cope and if I have to go back there, I'll get sick again.' Maxine was another who, on the advice of her private therapist, chose not to re-enact her trauma scenes in the final performance of *Memoirs*.

Despite the potential pitfalls described above, many aspects of Moving On held the potential for participants to experience a level of empowerment and mastery. From the legacy of Paulo Friere (1993), leading to the work of Boal (1979), empowerment is now seen to be at the core of the 'transformative encounter' in applied forms of theatre (see also Taylor, 2003). By gaining mastery and self-determination, the individual is free to choose their own path in the world. Within the ritual and structure of drama we can find freedom (see Dennis 2004; Johnston 1998). 'We are liberated from the past, and established in the present' (Duggan & Grainger, 1997, p.94). Here we are at liberty to explore, express and articulate the dramatic paradox in any or all of its forms. Pendzik observes, 'Holding a paradox is always an empowering experience: it helps us tolerate our inner contradictions and cope with the paradoxical nature of life' (2006, p.274). Lynne's description of her peers as both heroes and victims seems to point to a paradox that it may be healthy for the Moving On participants to hold.

GLENDA & JOAN

The extent to which participants engaged with the aesthetic, or indeed experienced a kind of 'moving on' through the process varied dramatically across the three years of the project, and across the participant group. Movement certainly occurred for many, but not in a progressive and linear fashion, not conclusively and not permanently. The issues of ownership that I have already mentioned played a huge part for most participants, with the dramatic rendering process posing a constant threat to the subjective truth that we all cling to in order to make sense of our lives. For me, it seems that the most illuminating means through which to explore these and other aspects of the process is to look more closely at two individual participants who committed whole-heartedly from the beginning, and who certainly appeared to experience moments of challenge, tension and at least some movement towards healing.

Glenda

Bush Children's Home for a few months; then St. Joseph's Home (Neerkol), Rockhampton age 11-16. My four siblings were there as well, but we were kept apart. My sister remained with our grandparents. I was reunited with her at 16. (Glenda's words, Memoirs program notes)

Glenda bundles herself into a little ball, hiding from attention under a straw hat and a shock of frizzy black hair. When she speaks, it is important, clear and relevant. She is easy to miss in the flow of the sessions, but always present in her quiet way. (Author"screative reflection)

The hat goes off and on. Last week it was off (but her brother was present). Last week she challenged Bruce about what input the project would have world wide. (Excellent) (Unknown counsellor/facilitator)

Glenda to develop: Self confidence. Self esteem. To feel like you're contributing to something. To feel worthwhile. (Participant goals)

Glenda was released from St. Joseph's Home at the age of sixteen into the care of her grandmother, uncle and sister. Not long before she returned home, her beloved grandfather had died, leaving a palpable sense of loss and grief in the house. From then on, she endured beatings from her carers, until finally she decided to leave. This was the story that we had developed into a scene over a series of workshops and she had eventually decided to include in the work-in-progress. Having left the scene for a few months, we returned to it one session and a smaller group of us attempted to recall the details. I was offering my own recollections of how it had looked when Glenda became quite stressed: 'I mean I don't know what you people want from this. I mean, I don't want to keep changing it, I just want to tell it like it was!' I felt terrible at the time – completely misunderstood. I wonder now if in trying to recall the dramatic scene rather than the actual events, Glenda perceived that we were fictionalising her story and therefore taking it out of her hands. As we developed her scene, did Glenda see my attempts to 'aestheticise' her story as a direct challenge to its autobiographical authenticity?

After the work-in-progress, Glenda went away for a few months and when she returned, we worked again on her scene. I tried to help her develop a section of the story where we could feel the emotion of her returning to her grandmother's house. Her grandmother, uncle and sister were frozen in a tableau as Glenda moved from one to the other. As she approached each character, they said, 'Your grandfather is dead' and then turned away. Glenda accepted this scene, although in retrospect, this may have been somewhat reluctantly. In later collating all of the material for *Memoirs*, I then wrote a loose script for her scene which was primarily for my own recollection of casting and blocking. I had noted on the script some of the ideas that may be interesting to pursue – dressing Glenda in a baby-doll dress and creating a 'shattered' fairytale like atmosphere for her homecoming. When we returned again to her scene, Glenda read the script and then approached me assertively to say that she was not happy with it: 'It wasn't a bloody fairytale – it was real!' She also thought that the version we had worked on most recently was 'namby-pamby' and wanted to return to the version that she had performed in the work-in-progress. I wonder if she may have been remembering the sense of empowerment and elation that she had felt at the end of that performance.

Glenda, so afraid throughout rehearsals to make a public statement, stands firm and bold at the edge of the stage, the glitter shining in her shock of black frizzy hair. She dares the audience to defy her as she proclaims her independence at the end of her scene: 'I'm outta here!"

She approaches me later, her face beaming. "How was that?"I ask. "That was fantastic, I feel great! I did it!"(Author's creative reflection)

Her more recent recollection of this time suggests some confusion over what aspects of her scene I wanted her to change after the work-in-progress.

Glenda: I had to sort of say to you, you know, 'Hey, you're taking a bit away from me.' You know, you were trying to take that last bit away from me. That when I came down to

the what's-a-name, that you were trying to change into a different scene and I didn't want that – I wanted it the way back the way it was. And I got my way! (Laughs)

I agreed to drop the fairytale elements of my idea but I (stubbornly?) felt it was important to follow the more symbolic thread that we had begun to develop, and Glenda again agreed to revisit and build upon the previous scene. We explored the symbolism of the St. Joseph's gate that she would pass through as she left the home. I asked four participants to recreate the gate with their bodies, and she became immediately involved in positioning them and demonstrating her feelings about leaving. I asked the four group members who were representing the gate to each make a statement that reflected how she may have felt inside. At two stages of developing the scene, I invited Glenda to sit outside and watch whilst I took her place. I was determined for her to experience her scene from an audience perspective and develop a critical eye. I also wanted her to exercise more control over what was being created.

After we had created the gate, Glenda said she really liked it. I double checked, grinning at her – 'yes!' she assured me. We then moved on to the 'namby-pamby' scene of the homecoming that had been devised previously. I showed her how it had been done by standing in for her. Here she was able to critique it, and change the elements that she did not like. She later agreed that this step of allowing Glenda to watch the scenes was vital in developing her aesthetic eye.

Joan

Through unfortunate circumstances, I was placed in state care as an 18 month old child; then into foster care as a 9 year old child with a Catholic family (not good at all); then back to the orphanage when I was 15, until 18 years of age. (Joan's words, Memoirs program notes)

Joan is a woman in her late fifties – a slim and tightly wound ball of nerves, stress and obligations to others. She holds her jaw tense, and finds it difficult to locate a voice from any deeper inside than her constricted throat. She arrives late because she is busy doing for others. And in here, she sometimes holds out her altruism like a pass that might excuse her from herself. (Author"screative reflection)

After the work-in-progress, Joan began working with Ross, another participant, on developing a deeply personal written script about the sexual abuse that she had endured for years in foster care. At the end of one session, Ross and Joan approached me with their ideas. Ross appeared to be quite manic and he stood talking extremely close to me, dark circles around his shining eyes, rapidly describing the scene in which Joan's abuser would push her head into his lap and jerk it up and down. Joan stood by Ross in silence, as he punctuated his description by placing his hand on her small shoulder. I felt alarmed by this, and somewhat suffocated by Ross's relentless and explicit descriptions. I responded as tactfully as I could. I said that we would need to look at the script more closely and explore it with Joan before we made any decisions. Afterwards, I expressed concern in our staff debrief. Was Joan really empowered by this process, or was it Ross's artistic expression of her trauma that was taking precedence? Was it healthy for Joan to depict the abuse in such an uncompromisingly literal way?

In nightmares and waking visions, I still see his face. It closes in on mine with the hot breath of stale cigarettes and rising lust. His eyes seem strangely afraid of me. Or are they afraid of what he wants from me? Why did they force their oversized adult urges and fears into our fragile young places? (Author's creative reflection)

Ross continued to develop Joan's story, but was rarely present at sessions. From time to time, Joan would bring up her emerging scene. One of the counsellors, Susan and I had agreed privately that we should put off working on it until Ross had completed his scripted version. I would respond to Joan gently, reminding her of all the reasons why we needed to approach her scene with care. During one such discussion, she interpreted this as censorship and became quite concerned that I was trying to take control and water down the truth.

When Joan finally brought Ross's completed script, I saw that he had used his knowledge of theatre to translate her scene into a powerful piece of text. He had employed several symbolic devices to tell the story, but had retained the graphic depiction of oral penetration that had alarmed me earlier. Penny, another drama facilitator, began to workshop the scene with Joan but only to the point of the penetration, and then I took up the process. I again discussed my concerns with Susan about the content of the scene, and we both agreed that putting Joan in that position again would be extremely irresponsible. We decided to approach her with this concern. 'Joan,' I said, 'Quite honestly, I do not want you to get up on stage and put yourself in that position again. I think it could be very damaging to you.' She seemed to take our concern quite seriously. We discussed the options with her. We suggested that she allow someone else to take on the role of herself as a child, and she could then comment on the scene from an adult perspective. She agreed to do this, and we continued.

We then settled on a symbolic representation of the abuse, in which another participant Brian (playing Joan's abusive foster father) and the younger Joan moved from a family tableau of kneeling in church, to communion, to the act of sexual abuse itself - for me a simple device to show the hypocrisy of Joan's 'Christian' foster family that she wished to highlight. Joan commented on this from the side. But again, the matter of how to depict the oral penetration came up. We were all working together in a large group and trying to resolve how to show this in performance. I was determined that there could be no graphic representation, and attempted to clearly explain this to the group. What ensued was a surreal episode in which a gallery of observers called out their suggestions to Brian: 'Why don't you just put your hand on her head?' 'Now move it up and down!' 'Don't hold her head like that, you're being too gentle, be rougher!' I cut across this bizarre dialogue, laughing. 'No!' I said, 'We need to be subtle about this. We can't beat the audience over the head with it!' - Or words to that effect. In the end, the abuse event was shown in almost ritualistic style, where the young Joan knelt before her abuser, he placed a hand on her head, and she bowed slowly towards him. Many of us agreed that this held a great deal of power. I had tried to point out to the group during the devising process that the audience would 'fill in the blanks' themselves. If they were made to work their imaginations in a scene like this, they would be engaged in an act of meaning-making that may lead to a more dramatically authentic experience. I am not sure how eloquently I was able to put this across at the time, but this was a key moment for me in our collective move from the ugly truth of the facts, to a more symbolic, yet equally powerful language.

Later in the scene, the young Joan posed for a portrait with her foster family. During the devising of this section, I asked Joan to physically lead the younger version of herself out of the portrait tableau, and speak to her from the present, offering her the wisdom of her current adult self. Joan responded at first by making 'I' statements – 'I didn't know what to do . . . I was frightened . . . I couldn't tell anybody,' and so on. I urged her to address the young Joan directly as another person. Her improvised speech, halting at first, began to flow out – comforting,

forgiving and encouraging her younger self. This improvised flow seemed to be a powerful moment in the room for us all. Directly afterwards, Joan was quite emotional, appearing moved by this experience. She later developed the improvised speech into a poem for the final performance:

Joan, I beckon you to come out of your darkness, your shell, your hell, no more are you there, to cower or cry.

You are alive anew with a free spirit, let it soar; soar high above the depths of despair. Take hold, have faith in what you do and what you are. You are no longer that timid little girl to be used and abused.

You are strong now, you will speak up and out; you will be heard and justice ought prevail. Keep on being strong, keep growing child, to the beautiful person you are now, and keep on moving on. (Joan, closing poem, *Memoirs*)

Joan later shared with us that she felt 'really good' each time she removed her young self from the foster family portrait and spoke to her in this way.

In this scene, it seemed that the subjective truth of Joan's past abuse had been transformed through the drama into the present, more empowering story of her adult survival. Could this have been a movement towards healing – with Joan successfully 'holding' the paradox in order to facilitate transformation (Pendzik 2006)? Joan's scene presented an opportunity for her to experience the dramatic paradox of me/not me (Landy 1994, p.5) or me then/me now. Pendzik offers, 'There is always a paradoxical safety in knowing that what one does in dramatic reality is both real and not real' (2006, p.274). The safety that was created for Joan may have allowed her to view her past more objectively and achieve a sense of control over her experiences of trauma.

For this transformation to happen on stage may have invested her experience with even more significance – to have it witnessed, supported and applauded by the audience. Merrelyn and I later agreed that Joan's scene was possibly the most successful in bringing the therapeutic and aesthetic imperatives of the project together on stage.

Sarah:	What was it like to say those words to yourself as a child in front of an audience?
Joan:	I thought it was great I thought it was oh it was wonderful (laughs). It felt
	really good.
Sarah:	That's cool – in what way?
Joan:	It's like I got a new a new well, just like a new spirit – a spirit came into me, an
	enlightened spirit – that's what it is. An enlightened spirit just came into me and gave
	me that power.
Sarah:	Great. Do you think that that spirit is still with you now?
	Joan: Yes. I know that spirit is with me all the time.

CONCLUSIONS & QUESTIONS

In describing her self-revelatory performance with psychiatric patients, *Beyond Analysis*, Emunah stresses the importance of using aesthetic distance to emphasise the present rather than the past, and enacting mastery over

the pain and trauma (1994, p.273). Crossley describes narrative therapy as being committed to 'historical truth' but focuses on changing the significance that the facts hold in the narrative so that the narrative might be changed from one of 'tragedy' to one of 'opportunity' or 'growth' (2000, pp.61-2). Joan's scene may have accomplished this. But as I contemplate the possibility that other Moving On participants may not have achieved this to quite the same degree, I wonder if the achievement of simply putting on the show, or of making public testimony, was enough to create some sense of mastery.

Some participants seemed to see the potential for empowerment that existed in performing their stories. In one particular session leading up to the final performance, I asked the group to create images of how they might feel afterwards. Brian used the word 'freedom' – his hand gesturing first from his abdomen, then over his throat, out of his mouth and into the air around him. Lynne created an image with her arms held in a muscle-man pose. 'Strength!' she said. Emunah and Johnson suggest, 'On stage, the patients present themselves in a new way. They make the audience laugh, cry, reflect; they have power. They are actors, not spectators; activators, not victims' (1983, p.236). When talking several months after the performance of *Memoirs*, some participants described the sense of achievement that they felt in conquering their fears and achieving their goals.

Lynne (written reflection):

The sound of clapping hands rang like rain after a drought. We felt the audience really understood, were empathic and recognised and accepted our authenticity. We had moved out of an oppressive atmosphere of painful memoires into the bright lights and connections of the stage. In the children's homes they had tried to crush our spirits and yet here we were, standing up and speaking out, survivors, people who do not give up. Our stories now historically woven into a pattern and design for change and perhaps for a different better society.

This paper obviously only scratches the surface of the discoveries that were made and the questions raised through Moving On. Through the larger study, a number of questions were raised which certainly warrant deeper exploration: Whether the relationship between the director and the performers was in some ways recreating the negative power structures that participants had experienced in the children's homes; whether many of the positive benefits of the group arose, not necessarily from the drama, but from the group structure and the fact that it was a regular social event; whether the focus on autobiography and past experiences did in fact retraumatise some participants who were not ready to face their stories so directly or encouraged other participants to stay in their roles as victims, rather than survivors; and many more. What I have hopefully achieved here is a brief story of how Moving On worked with members of the community of former-residents to dramatically render their autobiographies in order to move them from the internal world of their subjective experience, to the world outside.

Lynne (written reflection):

Like a plant growing towards the sun we developed from the experience of the Moving On Project. We developed a sense of purpose, a sense of empowerment that translates into different degrees of selfesteem, confidence, trust, understanding and expression. We were made to feel safe enough to be able to speak out and tell our stories.

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