The Ethics of Being a Teaching Artist and Drama Therapist
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ABSTRACT

There is a spectrum in the purposes of drama from theatre education (teaching about the art) on one end to drama therapy (using the art to bring about socio-emotional change) on the other. In the middle where recreational drama and drama for social change happen there is an overlap where boundaries can be blurred. Teaching artists and drama therapists both go into classroom and recreation situations to conduct drama activities; however, the contract is different in each situation, and ethical boundaries limit what can be done, especially in that middle zone. Even drama therapists must identify and follow boundaries in the middle zone. This presentation outlines those boundaries and the training that drama therapists get in order to be able to identify them.

Keywords: Ethics, Teaching, Teaching Artist, Drama Therapist, Drama Therapy, Ethical Boundaries, Emotional Intelligence, Interpersonal Intelligence, Intra-personal Intelligence, Applied Theatre, Theatre Education.

Teaching artists go into classrooms to bring training in the arts to students in public schools.

Drama therapists often go into classrooms to work with students in public or private schools to develop socio-emotional skills, particularly communication skills, self-esteem, and bullying issues. I am going to talk about the difference between the teaching artist and the drama therapist and some of the issues that go into training each, as well as the ethical boundaries that exist for both when they enter a classroom.
I am the director and main instructor of the Drama Therapy Program at Kansas State University. I teach drama therapy courses, and I supervise graduate students in their 800 hours of required internship.

But before I go any further, we need to pause and explain what drama therapy is. It is not therapy for actors – although actors could get involved in drama therapy if they wanted to. Drama therapy is the use of theatre processes like improvisation or role-play and theatre products like performances to help clients develop their interpersonal or social intelligence and intra-personal or self intelligence. Drama therapists work in many different places from mental hospitals and drug rehabilitation centers on the clinical mental health side – to retirement communities, recreation centers, and schools on the community wellness side. What differentiates a drama therapist from a teaching theatre artist or an applied theatre practitioner is first of all training and second of all intention or goal.

A drama therapist is trained in the application of theatre techniques with the goal of creating some kind of change in a client or group of clients. They are also trained in psychology and in ethics. By the end of their Masters degree, a graduate has a basic understanding of how to work with a variety of populations using drama to improve their personal and interpersonal functioning, and they have a firm knowledge of normal and abnormal psychology. They need to understand what healthy development is at every point in the life span and what constitutes the symptoms and dilemmas of abnormal development. In addition, when faced with abnormal development, drama therapists are trained to use their skills to help work through blocks,
problems, and misunderstandings so the client can repair aspects of personality that have been
damaged or break through blocks that have prevented typical development. Because of this
training, drama therapists are able to guide individuals who are not functioning well back to a
healthier place. They know how to develop group cohesion and trust, how to facilitate group
process, and how to help clients find their own voice and their own power.

When I was a full time drama therapist, I worked in Washington, DC with recovering substance
abusers. At the age people become addicted to drugs, their psychological development stops. So
many of the adults I worked with thought and behaved like adolescents. I had to expect that and
manage group issues accordingly. Most addicts become addicted in response to traumatic
experience and take drugs to numb their feelings. Coming back to sobriety means learning how
to deal with feelings again…which can be very scary without a lot of psycho-education, practice
of new skills, and social support. Drama therapy is a perfect medium to provide these skills and
develop this understanding.

A spectrum exists in the purposes to which drama are put that stretches from theatre as an
aesthetic creation on one side – through therapeutic theatre, social action theatre, and recreational
drama therapy in the middle – to clinical drama therapy on the other end. In the middle of the
spectrum where teaching artists, applied theatre artists, and drama therapists are all hired, there is
often overlap between education and therapy. This can be confusing territory in which to
navigate.
A drama therapist is not concerned with aesthetic training or theatre education – although that often happens during the course of a drama therapy group. Drama therapists are focused on using drama for achieving specific therapeutic goals. This means that the drama therapist undertakes her work after a contract is made between her and the client or the hiring organization. As student interns grow into drama therapists, they must learn where the boundaries of each individual contract is, respect those boundaries, and not cross them without specific permission. Even if you want to, YOU DON’T WORK ON ANY SOCIO-EMOTIONAL ISSUES THAT ARE NOT PART OF THE CONTRACT!

An example of this – I direct the Barrier-Free Theatre, a recreational therapeutic theatre troupe made up of adults with and without disabilities. Every year they pick a topic, and we create a one-act play through improvisation and perform it for the community. My therapeutic goals are to improve social skills, teamwork, communication abilities, self-confidence, and self-efficacy. If I discovered that one of the cast members had been raped, it would be outside my contract to turn a rehearsal into a group session to work on that trauma. My ethical responsibility would be to contact that actor’s social worker or parents and alert them, so that they could arrange for appropriate therapeutic intervention in the appropriate environment. If I had a separate private practice (I don’t so, this is not something that could happen), that intervention could be with me, but I would need to keep that work totally separate from the rehearsal process and would not even be able to bring up the subject there or allude to it in anyway.

How can students be trained to work effectively and ethically in that ethically muddy middle part of the spectrum? First, I try to be a role model in the way I teach and interact with my students.
Drama therapy is embodied and action-oriented. In a session, you do something with the group, and then you discuss it. Therefore, when I teach my classes, I do them in an embodied, action-oriented manner. However, I do not do therapy in my classes – that would be ethically inappropriate. I teach so that my students learn by doing, just as they will be healing their clients through doing. I follow that with discussion, which is followed by individual journaling. My instructions are to write about objective details (what happened in class), personal reactions (how you felt), and critical evaluations on what worked and what didn’t work and why. Needless to say, students hate journaling, but in the end they always say, “It was worth it – it taught me how to think.”

Developing critical thinking is crucial for anyone who will be working with people – whether through education, theatre, or therapy. A teacher or guide will not always be with you to help solve a problem, answer a question, or choose the next appropriate action. The student needs to learn how to analyze cognitively and emotionally what is going on in the group and be able to make a therapeutically sound intervention that will move the session forward in a positive, constructive way.

I think critical thinking in drama and drama therapy rests a lot on interpersonal intelligence and intra-personal intelligence – some of the very areas about which we are teaching our clients. Both of these emotional intelligences can be developed through experiencing and then stepping back to reflect on the experience and its outcome. Most of the students who take my classes have developed their interpersonal intelligence, but not all have developed their intrapersonal intelligence. Without that self-knowledge they are unable to modulate their reactions to what is
happening with their clients – unable to keep their own feelings and issues separate, unable to calm themselves when they become frustrated or anxious as they lead a session, unable to avoid getting into power struggles with the group. I try to put first year graduate students into internships either with me or with a second year student who has begun to develop those critical thinking skills. Again, this provides a role model to work with and bounce ideas off.

Students have supervision with me once a week. We go over what happened in the last session, process successes and struggles, brainstorm new ways to approach difficulties, and discuss what should happen next. Students need to feel safe enough to ask questions – any question – no matter how stupid it might seem. They have to let go of the need to be perfect, to always be right, to never make a mistake. They won’t become good drama therapists if they aren’t willing to acknowledge their mistakes and fears.

Students intern in many places – often in educational or recreational settings where the boundaries are muddy. There is an internship in the Therapeutic Classroom in Lawrence, Kansas. We have an ongoing relationship with Manhattan Public Schools’ Autism Support Program. Student interns run three different after-school programs: one for elementary, one for middle school, and one for high school students on the autism spectrum. They intern twice a week during the school day in one of the autism resource rooms. They do the drama program at the Flint Hills Summer Fun Camp, which is set up to integrate one camper on the autism spectrum to every two typically developing campers. They also intern at retirement communities in the area with cognitively normal adults and with adults who have dementia.
In each case interns have a contract to follow. The contract is not always written down, but it is always clearly discussed with me by the institution we are working with and passed on to the interns. Some situations – like camp, Barrier-Free Theatre, or at residential centers – are clearly recreational in nature. Interns are there to create situations in which people can get back in touch with their creativity, feel better about themselves, and break through isolation to connect with each other in meaningful, healing ways. In educational situations in the schools or after-school programs, our contract focuses on teaching social and emotional skills, conflict resolution, and how not to be a bully, but an ally. Interns do not go into individual clinical issues. They are often tempted by students to go there, but they learn where those boundaries are and how to facilitate change and wellness without crossing them. Clinical issues are addressed only when interns are in situations where they are working as clinicians.

Before I was a drama therapist, I was a teaching artist, so I have worn both hats. I know that on certain days if you look at the work going on in the room, you might not know if it is theatre education or drama therapy. That is due to that spectrum that exists from pure theatre education to clinical drama therapy, and the fact that you are in an active, embodied domain. However, whether you are a teaching artist or a drama therapist, you need to know that there are boundaries, and you need to know clearly where those boundaries begin and end, where you can go and where you shouldn’t go. You will know those boundaries if you are aware of your contract and if you have the ability to think critically and ethically. This kind of training would be enormously helpful for students of theatre education and applied theatre. My hope is that one day it will be required.