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Bullying Prevention and the Drama Therapist in Schools:
A Comparison of Four Drama Therapy Prevention Models

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ABSTRACT

Bullying Prevention and the Drama Therapist in Schools:

A Comparison of Four Drama Therapy Prevention Models

By Kalie Rae

This study provides a survey of bullying research throughout childhood and adolescence, and analyzes 4 bullying prevention models developed by drama therapists: ActingOut (M. Cossa, S. Ember, L. Glass & J. Hazelwood, 1996), Kathryn Boyd's *The Shape of a Girl* (J. MacLeod, 2002), ENACT (D. Feldman & F. S. Jones, 2001), and STOP-GAP (D. Laffoon & S. Diamond, 2001). Each model follows a common format utilizing core drama therapy processes (P. Jones, 1996) designed to expand social-emotional competencies (A. Bandura, 1997) through "rehearsals for living" (D. Diamond, 2007). This investigation also highlights interviews with 5 drama therapists who share successes and challenges when working in the school setting. Although drama therapy is perceived as an intervention service, this author advocates for broader applications that would promote drama therapy as prevention. Recommendations for future anti-bullying programs include greater focus on empowering the bystander, assessing underlying causes of maladapted behaviors (including PTSD), and developing whole school approaches that offer ongoing workshops. This research underscores the need for early intervention to help children at-risk (S. Goldbaum, W. M. Craig, D. J. Pepler & J. Connolly, 2003) develop language and communication skills, as deficits in these areas are linked to increased bullying behaviors (H. Ward, 2008) throughout the school-age years.

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INTRODUCTION

My interest in bullying prevention is borne from my own experience of growing up as a target of repeated bullying. Four boys who tormented me during childhood and adolescence committed suicide once out of high school, following a similar pattern of academic failure, delinquency and substance abuse. Research has shown that overt hostility can often mask serious mental health issues (Olweus, 1999; Wilde, 2002) and puts youth at risk for a multitude of problems, from drug addiction to poor scholastic performance (Marcotte, Lévesque & Fortin, 2006; Nansel et al., 2004). Both bullies and victims often suffer from social skills deficits (Dix, 2001), which can lead to isolation, depression (Carbonell et al., 2000), suicidal ideation and/or suicide in adolescence (Yale University, 2008) and young adulthood (Steele & Doey, 2007). The recent rise in teen suicide and extreme acts of aggression and violence in schools (Almond, 2008) has led to the development and evaluation of bullying interventions worldwide (Martin, d'Entremont & McInnes, 2002; Olweus, 1999; Pepler & Craig, 1995).

Drama therapists have designed and implemented anti-bullying and conflict management programs since the late 1980s (ActingOut, ENACT, STOP-GAP). However a comparison of models has not yet been undertaken. This investigation analyzes and evaluates four bullying prevention models in schools in the hopes of laying the foundation for the development of future drama therapy approaches to bullying. In addition, interviews with five drama therapists in the field illuminate underlying issues and challenges facing the drama therapist in the school environment. Through this exploration, it is my intention to help drama therapists better clarify and market their prevention services to schools.

LITERATURE REVIEW

Overview

The literature review is divided into two sections, *Bullying* and *Bullying Prevention in Schools*. The first section defines bullying and identifies *Types of Bullying* and *Bullying in Schools*, and provides a *Profile of the Bully and the Victim*. A brief look into the *Etiology of Aggression and Violence* further develops important background information to inform the drama therapist of assessment and prevention strategies. For the purpose of this Literature Review, I shall use the words intervention and prevention interchangeably. Specific meaning of this terminology will be explored in the Results and Discussion section, *Prevention versus Intervention*.

The second section of the literature review, *Bullying Prevention in Schools*, describes *Social-Emotional Learning*, and introduces current *Drama-based Bullying Preventions*. *Target Age Range* and *School Environment* discusses current research, ending with the *Research Questions* this investigation hopes to answer.

Bullying

What is Bullying?

In the United States and Canada it is agreed that bullying is a form of hostility that can be physical and violent, and other times insidious and difficult to observe (Harachi, Catalano & Hawkins, 1999; Smith & Morita, 1999). It is seen as a relationship problem in which there is an imbalance of power (Craig & Pepler, 2007; Olweus, 1999; Sharma, 2004). Bullying behaviors can be exerted by one person or by a group upon an individual or group of individuals perceived to be weak (emotionally or physically), unattractive, different, or lacking friendship (Smith & Morita, 1999). Whether for personal gains, such

as money or possessions, or as an expression of control and dominance (Bosworth, Espelage & Simon, 1999; Olweus, 1999), bullying affects both boys and girls throughout school age years. However, boys are more at-risk for being the perpetrator or recipient of physical violence than girls (DiGiulio, 2001).

Types of Bullying

There are two forms of bullying: overt and covert (Terranova, Morris & Boxer, 2008), also known as direct and indirect (Bosworth et al., 1999). Overt bullying includes hitting, punching, kicking, and other forms of physical violence. Covert or relational bullying (Terranova et al.) utilized more though not exclusively by girls, engages the social system to damage the victim. This type of bullying includes teasing (when not playful), exclusion, ignoring and manipulation. Some relational forms of aggression are also overt, such as verbal abuse, name-calling, spreading lies and scapegoating (Harachi et al., 1999; Rahey & Craig, 2002). Verbal bullying can be more damaging than physical bullying, as the emotional and psychological scars can last a lifetime (Beale & Scott, 2001; Fitzell, 1997). The newest form of covert bullying, cyberbullying, or the anonymous posting of hurtful images and words via the Internet, cell phones, and other forms of information technology (Meadows et al., 2005), is extremely destructive and has led to teen suicide (McKenna, 2007; Sawyer, 2006; Stomfay-Stitz & Wheeler, 2007). As children move from middle to high school, relational and social bullying increases (Terranova et al., 2008), which is difficult for teachers and staff to detect.

Bullying in Schools

There is debate over whether more bullying occurs in the classroom (Elsea & Smith, 1994) in elementary and middle school or on the playground, where there is less

supervision (Craig & Pepler, 1995; Olweus, 1999). To study playground bullying, Pepler & Craig (1995) observed and recorded youth aged 6-12 in Toronto urban schools using wireless microphones and videotaping from a distance. Contrary to the popular image of the bully cornering his victim when no one is looking, 85% of most playground altercations involved peers. Of all the episodes recorded, bystanders intervened only 13% of the time. Half of the bullying episodes (6.5%) stopped within 10 seconds, once a bystander got involved. However, in 81% of the altercations, peers actually sided with the bully. Many studies concur that students who are not prone to bullying often join in as a way to deflect attention and self-protect (Beale & Scott, 2001; Craig & Pepler, 2007; Salmivalli & Voeten, 2004). Countless incidents of bullying are never reported for fear of retribution (Bosworth et al., 1999; Harvey, 2005).

Among various studies, teachers consistently felt they mediated in bullying situations, whereas students claimed teachers rarely intervened (Craig & Pepler, 1995; Elsea & Smith, 1994). According to Craig & Pepler (1995), staff witnessed only 17% of the video-recorded bullying incidents and stepped in only one-quarter of the time. By lacking awareness or not intervening, they are inadvertently reinforcing bullying behaviors (Crothers, Kolbert & Barker, 2006).

The most difficult challenge for any school is ensuring that teachers and staff are not modeling bullying behavior toward one another or toward students. In a series of studies conducted by Eslea, Stepanova & Cameron-Young (2002), among 200 British university students surveyed, two-thirds had experienced some form of teacher aggression in school while growing up. The majority said they experienced public humiliation, unfair punishments and verbal abuse during class time. These incidents

peaked at ages 14-15. Most students told no one in the school. As will be discussed, the school environment can undermine even the best of bullying interventions.

Profile of the Bully and the Victim

Before I begin, I wish to make clear that it is not my intention to label any child. In my work as a drama therapist I view problem behaviors as separate from the identity of the individual. However, in the interest of simplicity of language, rather than writing, 'those children who exhibit bullying behaviors' and 'those children who are targets of bullying,' I shall refer to them as 'bully' and 'victim' respectively. The following is a description of some of the characteristics inherent in these roles.

Students who exhibit bullying behaviors tend to lack communication skills and use more proactive forms of hostility, i.e. physical and confrontational aggression (Poulin & Boivin, 2000; Salmivalli & Helteenvuori, 2007). They dislike school, have higher levels of anger, increased incidents of depression, and an overall feeling of not belonging (Bosworth et al., 1999; Tremblay, 2003). They hold the belief that violence is a viable means to attain their goals and are ill-equipped and unconfident to handle conflict situations in nonviolent ways. (Bosworth et al.; Terranova et al., 2008; Tremblay).

The victim, on the other hand, exhibits more reactive forms of aggression, i.e. emotional outbursts and an inability to control reactions (Feil & Severson, 1995; Olweus, 1999; Salmivalli & Helteenvuori, 2007). Some victims provoke the bully and then react in ways that escalate the situation (Beale & Scott, 2001; Goldbaum, Craig, Pepler & Connolly, 2003). Among male victims, a lack of social-emotional regulation and ineffective coping strategies make him an easy target for repeated abuse (Alvarez & Olson, 1999; Poulin & Boivin, 2000a; Price & Dodge, 1989; Prinstein & Cillessen,

2003). Over time, victims who are repeatedly targeted by bullies begin to believe that they are failures. This belief reinforces feelings of helplessness (Montgomery, 1995) that can lead to serious mental health problems, including social anxiety (Craig & Pepler, 2007). As these children withdraw from peers, the development of social capacities, vital for healthy relationship building, becomes impaired. This can have long-term effects, as the wounds from childhood manifest as dysfunctional relationships in adulthood (Craig & Pepler, 2007; Goldbaum, et al.).

According to Wheeler (2001), children who have never learned to delay gratification or to problem-solve have difficulty adapting to new situations. They frustrate easily, leading to aggressive, highly reactive behaviors. These children are prone to misreading social situations and assigning blame (Beale & Scott, 2001). This description could apply to both victim and bully. It also pertains to a third category known as the bully/victim, or those children who become aggressive and bully others after being bullied (Cunningham & Whitten, 2006). While bullies and victims both exhibit difficulties in impulse control, unlike victims, bullies have a lowered response to emotional stimuli, and show a decrease in levels of both anxiety and fear (Jolliffe, 2006). This is why punishing the bully is usually inconsequential. These individuals tend to justify their bullying behavior and lack empathy (Jolliffe; Maeda, 2004). In a 1997 study by Locraft and Teglasi of 120 elementary aged students, a positive correlation was found between empathy and social capabilities.

A study of 113,000 students ages 11-16 from 25 countries (Nansel et al., 2004), found that bullies had greater problems adjusting to school and used more alcohol, whereas victims experienced more peer relationship and emotional problems. Bullies and

victims were also more likely to carry a weapon than non-involved students. Although some bullies were very popular (Price & Dodge, 1989; Prinstein & Cillessen, 2003) and had mastered the art of manipulation (Bosworth et al., 1999), most bullies and victims suffered from social skills deficits and peer rejection (Montgomery, 1995). These underlying problems manifested either through externalizing (aggression) or internalizing (withdrawal) behaviors, and put these youth at-risk.

Etiology of Aggression & Violence: Youth-at-Risk

The term 'at-risk' implies certain environmental factors for developing mental health, psychosocial and delinquency issues (Beardslee, Gladstone, Wright & Cooper, 2003; National Center for Crime Prevention Council Canada, 1997) that can negatively impact future events (Camilleri, 2007). Children exposed to violence, either directly or indirectly, are at an increased risk of becoming violent (Davison, Neale, Blankstein & Flett, 2002; DiGiulio, 2001; Williams, Stiffman & O'Neal, 1998). Children identified as at-risk had greater exposure to a negative home environment, and exhibited lower functioning in language acquisition and an inability to regulate emotions (Park et al., 2005). A lack of healthy role modeling and mirroring of feelings and emotions, so necessary for normal brain development, are often missing from these disadvantaged families (Payne, 1995; Shore, 2004, as cited in Landy, 2007). Not only can this deficit impact the development of healthy relationships, it interferes with the child's facility to understand and articulate thoughts and feelings, leading to increased frustration and aggression. A recent study of primary school-aged children in England found that children exhibiting poor English language skills were more likely to engage in bullying behaviors (Ward, 2008).

Traumatic episodes, such as exposure to street violence, parental neglect, domestic violence or child abuse, impair the growth and development of the brain (Shore, 2004, as cited in Landy, 2007). In trauma survivors suffering from PTSD (Post Traumatic Stress Disorder), a neurological response shuts down the part of the brain responsible for verbal articulation, while over-stimulating the limbic system involved in the fight or flight response (Rauch et al., 1996, as cited in Landy, 2007). Some victims of chronic bullying also exhibit these symptoms, which explains why they are not able to express themselves verbally and appear to overreact to neutral factors (Montgomery, 1995). This must be considered when working in schools with bullies and victims, as many of their seemingly maladaptive coping skills could be attributed to trauma (van der Kolk, 2002).

Bullying Prevention in Schools

Overview

At the heart of every bullying episode lies conflict. No matter which role a student plays (bully, victim or bystander), the underlying skills needed to effectively manage conflict are part of social-emotional learning (ENACT, 2008b). This section begins with an explanation of *Social-Emotional Learning* and related competencies. *Drama-based Bullying Preventions* explains the importance of using action methods and reviews several approaches from different countries. *Target Age Range for Bullying Preventions* is followed by a discussion of the importance of the *School Environment*.

Social-Emotional Learning

Social cognitive learning theorist, Albert Bandura, believes that learning how to control emotions leads to social competence and self-efficacy (Bandura, 1997). As research illustrated (Peplar & Craig, 1995), bullies and victims lacked emotional self-

regulation, and bystanders were unable to communicate effectively when trying to intervene. Social and emotional competence is seen as the most important tool for healthy child development (Goleman, 1995). According to Shriver and Weissberg (as cited in ENACT, 2008b), "Social and emotional learning is the process through which children learn to recognize and manage emotions. It allows them to understand and interact with others, to make good decisions, and to behave ethically and responsibly."

O'Brien (Goleman, 2008) identified 5 core competencies of the most effective social-emotional learning curriculum: (1) Self-awareness – to understand one's strengths, feelings, values and beliefs; (2) Self-management – to manage feelings, set and pursue goals and delay gratification; (3) Social awareness – to read social cues, body language, facial expressions, and develop empathy; (4) Social management – to acquire relationship skills through effective problem-solving and communication; and (5) Responsible decision-making – to negotiate productive solutions to problems by utilizing the other four competencies. These competencies are also fundamental goals of drama therapy and drama-based bullying preventions.

Drama-based Bullying Preventions

Research on the efficacy of drama and arts-based bullying and violence prevention in schools is just starting to emerge (Hymel, 2003; Kisiel et al., 2006; Lofgren & Malm, 2005). According to Shirley Brice Heath, researcher at the National Center for Conflict Resolution (National Center for Conflict Resolution, 2002), programs that capitalize on a child's strengths and allow for the transformation of frustration into creative expression, rather than focus on issues of delinquency and negative behavior, yield more positive results.

Bullying interventions that incorporate drama therapy techniques and role-play provide an outlet for self-expression and creativity, improve self-esteem, and enhance learning (Jones, 1996). Many drama-based conflict management and bullying preventions have had a positive impact on school communities (Belliveau, 2007; ENACT, 2008b; Laffoon & Diamond, 2000; O'Toole et al., 2005). One study of a group drama therapy intervention reported that positive changes were maintained over one year following the program (McArdle et al., 2002). By rehearsing real-life situations, participants felt more prepared to deal effectively when faced with the actual dilemmas (Bates, 1980; Landy, 2000). Success of this action method is supported by research indicating that information and memories encoded through experiential learning are more readily recalled than knowledge gained through cognitive approaches (Ghiaci & Richardson, 1990; Rose, Parks, Androes & McMahon, 2000). What follows is a brief tour around the globe of research and current drama and arts-based bullying interventions.

Anti-bullying plays, England, United States and Canada.

In England, national anti-bullying week is celebrated each November, and many schools and organizations create events to help raise awareness (Anti-Bullying Week, 2008). Throughout the U.K., U.S. and Canada, bullies and bullied ages 13-17, develop and present plays about bullying to the larger school community (Beale & Scott, 2001; Jacobson, 2005; Strutzenberger, 2004; Thurrock Council; 2007). "Youth presenting to youth" is most effective (Strutzenberger, 2004) and the actors gain insight and perspective by creating the plays. Beale & Scott (2001) describe the talk-back session following 'Bullybusters' as the most important part of the presentation, in which students discuss "personal opinions about bullying in a non-personal context" (p. 303). This

process allows students to develop critical thinking skills, rather than being lectured on how to handle a bullying situation (Beale, 2000).

Soble and Long violence prevention project, California.

Soble and Long (2007) developed a 6-week violence prevention project for 5th and 6th grade youth at-risk to help them "identify and explore the effects of violence in their...lives" (p. 182). Students learned four steps in assessing and handling conflict through the Stoplight Model (Goleman, 1995). Red light: STOP. Yellow light: FEEL – identify your feelings and THINK about consequences of possible responses. Green light: GO. Drama and art therapy activities reinforced the strategies, and a health educator taught the psychoeducational component. Since 1996, the program has been implemented throughout California, the U.S. and Europe.

Urban Improv, Boston.

Urban Improv, a Boston-based interactive theatre troupe, has been conducting violence prevention workshops since 1992 for students who have been exposed to extreme violence (Urban Improv, 2008). Dr. van der Kolk (2008), a renowned psychologist specializing in trauma, explains, "When kids get traumatized, they don't learn; their test scores go down and they drop out of school." Van der Kolk (2002b) turned to drama in therapy after more traditional forms of talk therapy had failed. He believes that trauma is stored in the body and that action methods can mend harmful effects caused by "psychological trauma," (van der Kolk as cited in Landy, 2007, p. 2). Urban Improv's goal is to give kids tools for "self-regulation" (van der Kolk, 2008). Students improvise alternate solutions to scenes presented by the troupe as "a rehearsal for life" (Urban Improv, 2008). In a study among 140 students in 4th grade participating

in Urban Improv programs, teachers reported more prosocial behaviors and an arrest of aggressive acts, as compared with the control group (Kisiel et al., 2006).

Headlines Theatre, Vancouver.

Similarly, Headlines Theatre in Vancouver teaches students conflict management techniques through an interactive method rooted in Boal's Forum Theatre (Diamond, 2007). However, rather than focus on the oppressor and the oppressed (Boal, 1995), Diamond, Headlines founder and director, believes that the problems arise from the dysfunction of the system. He calls his method Theatre for Living (Diamond, 2007). Diamond has been encouraged by initial positive research outcomes on the efficacy of the method (Hymel, 2003).

Cooling conflict, Australia.

Cooling Conflict is a program from Australia developed after eight years of action research on bullying and conflict (O'Toole et al., 2005). Integrated into the school curriculum, it teaches students about different types of bullying and how to identify the three stages of conflict: Latent, Emerging, and Manifest (O'Toole et al.). Also modeled after Boal's Forum theatre (Boal, 2002), students create short scenes depicting the three stages of conflict. Once the play is performed, it is enacted a second time inviting spectators to become "spect-actors" who improvise alternate endings (Boal, 2002, p. 25). The striking feature of Cooling Conflict is the element of peer teaching. Research has documented "that teenagers learn more effectively from their peers than from traditional, teacher-centered instruction" (Goodlad, as cited in O'Toole et al., p. 16). This method helps build community among grade levels (Peterson & Rigby, 1999), especially between

upper and lower secondary students, "the very ages when bullying is statistically most likely to occur" (O'Toole et al., p. 38).

Target Age Range for Bullying Preventions

Many studies found that acts of bullying and aggression peaked in boys between the ages of 11 and 12 (DiGiulio, 2001; Harachi, Catalano, & Hawkins, 1999; Olweus, 1999). Fitzell (1997) believes that 5th grade is the perfect age to teach skills for resolving conflict. Although children at this age are still concrete thinkers, he finds they have the ability to see outside their own experiences, are quite cooperative and enjoy negotiating. Van der Kolk (2008) also targets that age, but has a very different perspective. "The pre-pubescent age group, 10 and 11, is when kids are more prone to violence, less cooperative and at-risk of becoming isolated" (van der Kolk, 2008). He goes on to say that 40% of the 4th grade students he works with in the metropolitan Boston area have witnessed violence in their neighborhoods, homes or schools. By 8th grade, 80% have been exposed to violence. A drama therapist, who worked extensively with incarcerated men in maximum-security prisons, discovered that "the broken link, if only it could have been found and repaired, usually occurred between the ages of 8 and 10" (Lucy, July, 2008).

However, a study of nearly 2,000 students from grades 6-12 (Pepler et al., 2006), reported fewer incidents of bullying in middle school when compared to high school. There was actually a surge of bullying reported in 9th grade, when students first entered high school. Given these varied research results, it would appear that bullying prevention is needed throughout childhood and adolescence.

In a longitudinal study (Eron, Huesmann et al., 1987, cited in Harachi, Catalano, & Hawkins, 1999), 870 third-graders were asked to identify peers who were bullies. When reassessed 22 years later, those 'bullies' had a one-in-four chance of being convicted of a crime as opposed to non-bullies who had a one-in-twenty chance. Unchecked aggression throughout childhood and adolescence can manifest in adulthood as sexual harassment, violence at home and in the workplace, child abuse, and abuse of the elderly (Pepler et al., 2006). This is why intervention in childhood is key. The longer a behavior persists, the more deeply ingrained it becomes (O'Toole et al., 2005). However, younger children do not possess multiple perspective-taking capabilities. This stage develops in late primary school or early adolescence (O'Toole et al.). Hence, bullying prevention programs must be age appropriate given the developmental levels of the participants (Michael, July, 2008).

School Environment

"The foundation for supporting healthy relationships among children is providing them with healthy relationships with adults. Therefore, the way in which a [bullying] program is implemented and the social climate are essential considerations..." (PREVNet, 2008). Respect and genuine care for the students were important ingredients in schools that reported successful bullying interventions (Cunningham & Whitten, 2006). Students felt an increased sense of safety when they knew the school would follow through on bullying violations (Craig & Pepler, 1995). The positive impact of any bullying prevention can only be sustained if the school administration, staff and teachers support and embody the concepts being taught. This means modeling appropriate, non-bullying

behavior toward colleagues as well as toward students (Ballard, Argus & Remley, 1999; Elsea et al., 2002; Smith, Schneider, Smith, & Ananiadou, 2004).

Research Questions

Through this research, I hope to uncover new and unpublished bullying programs developed by drama therapists around the world. In conducting this investigation, I set out to answer the following questions:

Main inquiry.

- How are drama therapists currently addressing issues of bullying in schools?

Subsidiary inquiries.

- What is revealed through analysis of the four models under investigation?

- How does the drama therapist perceive his/her role in the school?

- What are the implications for developing future drama therapy bullying preventions?

Methods

Study Design

This study used a historical-documentary method (Policies and Procedures

Handbook, 2007) in conjunction with personal interviews that provided additional

qualitative data. The aim of this research design is to gather material and examine the

data from various perspectives. Landy (1993) describes the historical-documentary

approach as "analyzing or systematically describing data according to criteria..." (p. 2).

He goes on to say how one might draw "conclusions from the research data that reveal

the efficacy of the creative arts in psychotherapy" (Landy, 1993, p. 2). In this

investigation, the efficacy was applied to drama therapy bullying prevention in the school

setting. The gathering of information from multiple sources allowed for triangulation of

data (Marshall & Rossman, 2006).

Criteria

A criterion for inclusion in this study required that a drama therapist had either

developed or implemented the prevention model. Accessibility to information about the

model, as well as consent to interview a drama therapist from each of the models was

also necessary. Once models were researched and consent obtained, four were

subsequently chosen based on unique elements, such as the use of professional actors

versus teen actors, or a theatrical play versus scene improvisation. The overall goal was

to present four different models applicable to diverse populations and grade levels.

Data Collection

Data was collected from books, journals, database and Internet searches

(PsychINFO and Academic Search Premier). Results yielded numerous journal and

newspaper articles, dissertations, and bullying prevention websites (keywords: bully, drama, schools). Field observations and telephone interviews also added to the wealth of information gathered.

Participants

Via email *(See Appendix A)*, I solicited drama therapy associations and drama therapists from around the globe – Scotland, England, South Africa, Scandinavia, Israel and Australia, in the hopes of finding interview participants. Although several practitioners from England responded, only drama therapists from North America were available. All interviewees were given pseudonyms as per the requirements of the Ethics Committee. The only exception was Kathryn Boyd, who asked to be named, as her work is yet unpublished. In all cases, any information that could have identified third parties was avoided.

Interviews

Consent forms were obtained prior to the interview process *(See Appendix B)*. One drama therapist from each of the four models was interviewed. A fifth drama therapist, who has been working as a drama teacher in inner city schools, was also interviewed. Although she does not specifically conduct bullying interventions, her life work has been devoted to developing social-emotional skills through curriculum-based sociodrama. Her voice contributes greatly to the study. Interviews were conducted by telephone and participants agreed to be recorded. The interview consisted of ten questions *(See Appendix C)*. Some participants asked to receive the interview questions in advance. Each 60-100 minute tape-recorded telephone interview was transcribed, and subsequent follow-up questions were communicated via email. After a description of

each model had been written, interview participants received a copy of the final version for approval.

Field Observations

In February 2008, I observed a cognitive-behavioral workshop series on anger management and self-awareness offered to 5th and 6th grade students in a metropolitan Canadian public school. In April 2008, I observed a drama-based conflict management program in inner-city middle schools and high schools in a major U.S. city. To maintain anonymity, information regarding field observations has been changed. Consent was obtained prior to conducting field observations *(See Appendix D)*.

Data Analysis

The gathering of information from multiple sources allowed for triangulation of data, and all data were analyzed using axial coding. These combined approaches created a rich tapestry interweaving different perspectives, and illuminating themes, categories, similarities and differences among the drama therapists and models under investigation.

Quotes from interviews were relevant to several sections, which led me to question if some themes could have been merged. Once I began to label them, I recognized them as separate, core processes in drama therapy (Jones, 1996), such as role-play, dramatic projection, and life-drama connection. I then reexamined the models through the lens of Jones' core drama therapy processes and discovered additional themes and commonalities. However, I did not want to impose Jones' processes on the data analysis, but rather use his theory to better illustrate the existing themes. Data findings are discussed in *Results and Discussion.*

MODELS

The four models under investigation were developed or co-created by a drama

therapist and are presented in alphabetical order. An *Overview* of each model is followed

by the *Context* in which it is applied, the *Philosophy* of the model, the specifics of the

Approach, and finally, the *Research* conducted or outsourced by the agency.

Model #1

ActingOut

Overview

ActingOut is a teen improvisational drama group created by an agency in 1989 in

response to the needs of a local high school in southwestern New Hampshire (Cossa,

Ember, Glass & Hazelwood, 1996). The group was formed as a vehicle for adolescents

at-risk to build self-esteem, develop self-awareness and express feelings through

improvisational drama (Cossa, 2006a). It then evolved into a Theatre in Education

performance troupe that presented in schools to raise awareness about relevant issues

(Cossa et al.).

Context

ActingOut performs in primary, elementary, middle and high schools throughout

New England (Cossa et al., 1996). They perform in classroom settings as well as school

auditoriums, and offer one-time performances on a variety of topics – from school

violence and bullying to substance abuse and HIV/Aids. The organization also provides

after school drama clubs and ongoing residencies, which culminates in the creation of a

play performed for the larger school community (ActingOut, 2008b).

Philosophy

The objectives of ActingOut are two-fold. The goal of the teen acting troupe is to "cultivate resiliency, social skills and healthy development in youth through theater training" (ActingOut, 2008a). Their second mission is to raise awareness in schools about topical issues through an entertaining, audience-interactive process in which students practice life-skills for conflict situations.

ActingOut uses improvisation and sociodrama, an active group drama process that allows members to look at group problems (i.e. bullying), and to discover new perspectives in creating positive solutions through fictionalized characters (Sternberg & Garcia, 2000). The goal of sociodrama is to increase role repertoire as a "rehearsal for future life situations" (Sternberg & Garcia, 2000, p. 207).

ActingOut does not require auditions to become troupe members. Interested teens are welcome to sign up after seeing a presentation. School counselors and local therapists also make referrals (Cossa, 2006b).

Approach

Four troupe members called Youth Auxiliaries (YAs), usually accompany one adult facilitator to each school performance (Cossa, 2006b). Cossa (2006b) believes that "YAs provide a crucial connection between the facilitator and the audience" (p. 183).

The performance begins with each YA introducing him/herself. Short scenes on the selected topic (i.e. bullying) are enacted to actively engage audience members in preparation for the presentation (Cossa, 2006b). After this warm-up, the troupe invites audience members to identify various forms of bullying (i.e. sexual harassment, name-

calling, shunning, etc.). YAs then improvise short scenes based on audience suggestions (Cossa, 2006b).

After each scene, the director facilitates a discussion with the audience to explore underlying feelings, themes and alternate solutions. Audience members are then invited to replay the scene on stage. At times, Youth Auxiliaries assume roles that carry negative associations or that may be "an overdeveloped role" for a student (i.e. a bully or a substance abuser) so as to avoid reinforcing negative roles (Cossa, 2006b, p. 184). However, audience members are also allowed to take on these roles. Depending on audience ideas, new roles and improvised scenes are added throughout to provide support or to help the protagonist. This process helps students to expand role repertoire, problem solve, and practice non-violent communication.

Research

Although ActingOut does not conduct formal, quantitative research, it does collect post-performance surveys that provide anecdotal confirmation of the program's success. Performances served to raise awareness on bullying issues (ActingOut, 2008c) and, in some cases, certain bullying behaviors stopped (Burden & Cossa, 2007). The longevity of ActingOut is certainly proof that the method is well received and highly solicited. Many of the troupe members continue throughout high school and subsequently work for the company after graduation (Cossa et al., 1996).

Model #2

Kathryn Boyd – The Shape of a Girl

Overview

Kathryn Boyd.

To raise awareness about bullying, Kathryn Boyd, a Canadian drama therapist and actor, performed the play, *The Shape of a Girl* (MacLeod, 2002), in northern Ontario for teenage audiences in grades 7-10. Kathryn also offered classroom workshops on bullying. During her second staging of the show in eastern Ontario, she added a talk-back session immediately following the play to allow students to process and discuss their perceptions and reactions.

The Shape of A Girl.

The Shape of A Girl is a one-woman play written by award-winning, Canadian playwright Joan MacCleod (2002). The play was inspired by real-life events surrounding the murder of 15-year old Rena Verk, beaten to death in 1997 by a group of girls and a boy in Victoria, British Columbia (Kathryn, July, 2008). The story is told through the eyes of Braidie, a 15-year-old girl. It incorporates a series of flashbacks spanning several years, in which Braidie portrays the people in her world: Adrienne, the bully; Sophie, the victim; and members of Braidie's family. As Braidie watches TV news coverage of a murder similar to the Rena Verk story, she becomes painfully aware of her role as bystander and witness to bullying within her own peer group. *The Shape of a Girl* highlights Braidie's struggle to do the right thing.

Context

Kathryn's vision of performing *The Shape of a Girl* for students from grades 7-12 took nearly five years to become reality, as she worked to acquire the rights and market herself to school boards in the area. Creating a team of professionals to produce and design the show, Kathryn successfully launched the performance in the fall of 2007 in an economically depressed, northern Ontario town. There were many reported incidents of bullying and school violence throughout the school district, serving a 100% Caucasian population. Kathryn performed two matinees in the high school theatre, one for grades 7-8 and one for grades 9-10, as well as a couple of evening performances open to the public. Kathryn also offered post-performance workshops in the classroom setting.

Following those performances, Kathryn felt compelled to bring the play to her hometown in eastern Ontario. She described the sprawling region as a rural, economically depressed farm area with a "fairly homogenous" Caucasian population (Kathryn, July, 2008). A local 14-year-old girl had recently committed suicide, and "there was a strong sense it had been connected to bullying" (Kathryn, July, 2008). Police had also been involved in one of the schools prior to Kathryn's theatrical run, and students had been charged with bullying. Kathryn rented an independent theatre space and produced the play herself. In addition to offering the post-performance classroom workshop, Kathryn also facilitated a talk-back session immediately following each performance.

Philosophy

Through insightful and candid feedback from students and adults affected by the play, Kathryn realized that the character of Braidie crosses age and gender barriers. "It just reminded me of theatre as therapy and how valuable that is" (Kathryn, July, 2008).

She hopes that by presenting the issues of bullying through this powerful piece, students might "be a little more aware the next time they pass someone in the hall or see someone in the schoolyard" (July, 2008). Kathryn believes that the role of the bystander was the most critical in terms of stopping a bullying situation.

In preparing for the various roles and in performing the play, Kathryn revisited her childhood and identified strongly with the role of Braidie (the bystander). "I didn't engage in the act of bullying," she reminisces, "but I witnessed all of it" (Kathryn, July, 2008). She became painfully aware of her complicit choices in maintaining the code of silence and in shunning less popular girls. Delving into her past was a necessary, but difficult process.

Approach

Performance and talk-back sessions.

The 70-minute play was presented to sold-out audiences of 200-250. For many students, this was their first theatre-going experience. After the play, Kathryn would quickly change out of her costume to facilitate the talk-back. She began the sessions by asking audience members to raise their hand if they had ever experienced bullying or had seen bullying happen. "Inevitably, everyone put up their hand," Kathryn said. "That seemed to be a useful way to break the ice" (July, 2008).

Through the story and characters, Kathryn would invite students to reflect on "the kinds of bullying they saw in the piece" and "talk about choices that Braidie made" (July, 2008). The safety of discussion through the fictionalized characters enabled students to participate more freely. Students identified strongly with the characters and situations in the play. Kathryn also fielded questions about the set or the lighting, but in every

audience, students especially wanted to know what role Kathryn had fulfilled in high school. Had she been the bully (Adrienne), the victim (Sophie) or the bystander (Braidie)? Talk-back sessions varied in length from ten minutes to a half hour depending on bus and class schedules. Kathryn was continuously impressed by the students' candor and willingness to explore the issues.

Post-performance workshops.

Classroom workshops were conducted the day following the performance. Each session was approximately one hour and the teacher stayed in the room, often becoming an integral part of the process. Kathryn typically started each session in a circle by talking about her work as an actor and drama therapist. A discussion about the play would follow in which she provided handouts about the different roles in bullying from the book, *The Bully, the Bullied and the Bystander* (Coloroso, 2003). This "psychoeducational component" (Kathryn, July 2008) also included strategies for handling bullying situations, as well as helpful website links. Kathryn would then do a warm-up, using drama activities "to get them physically interacting with each other and moving in space" (Kathryn, July, 2008). The main activity was the creation of tableaux, in which groups of students were asked to strike a pose representing a bullying situation as if it were a snapshot. Borrowing techniques from Boal's Forum Theatre and Moreno's psychodrama, Kathryn might tap one of the students in the frozen pose and ask them to say a word or phrase capturing their thoughts or feelings. She might ask an audience member to join a tableau as someone who could help, then bring the scene to life. Students would subsequently improvise solutions to the conflict. Closure of the session involved reflection upon the process and the feelings it evoked.

Students in one high school class shared "some very tragic events in their own families with major issues of alcohol abuse, suicide and domestic violence. The piece was the tool to be able to talk about some of those things and then raised the question of why Adrienne (the bully in the play) was doing some of the things that may have been causing her to bully" (Kathryn, July, 2008). This line of questioning helped to create empathy.

Research

Although Kathryn did not conduct any formal research or evaluations after her performances, several teachers created curriculum in response to the play. Through creative writing exercises, students wrote about their experience of the play either as an audience member or as one of the characters in the play. Kathryn received copies of the written assignments. Another teacher asked students to write Kathryn a letter about how the play impacted them or of any thoughts or feelings about bullying in their own lives. She was deeply moved by the students' responses and in return, wrote each of them a personal response. This is a narrative therapy technique, Kathryn explained, in which the therapist writes a letter to the client about how the client's work impacted the therapist (July, 2008).

A theme that emerged across grade levels was the feeling that if Sophie, the victim in the play, had stood up for herself, maybe others would have been more willing to step in. This was true among both boys and girls. This fascinated Kathryn. "What if you can't [stand up for yourself]? What if you feel so invisible or so alone...then what?" (Kathryn, July, 2008). Before one of the matinees, a physical fight had broken out in front of the theatre. An older boy was able to successfully intervene. For Kathryn, this

highlighted the importance of the role of the bystander, which is the role of Braidie, the protoganist in the play.

Fairly consistent among high school students was the feeling that staff and teachers could not be counted upon to help in bullying situations. Many boys shared that "they were bullied until they took a very firm stand" (Kathryn, July, 2008). For Kathryn, this raised additional cultural and gender questions. "Do we have to take care of ourselves?" (Kathryn, July, 2008).

Kathryn had been concerned that boys might not relate to the play as well because the story involved girls; however, this was not the case. In fact, many fathers in the audience shared memories from their own childhoods and how moved they were by the piece. Kathryn hoped to be in touch with the schools and was curious if the impact of the play had stayed with the students.

Model #3

ENACT

Overview

Conducting preliminary research, I attended an ENACT workshop at the 2007 National Association for Drama Therapy conference in Montreal, facilitated by drama therapist, Emilie Ward, ENACT Director of Research and Training. Although ENACT is not a bullying prevention program, I have included it in this research because it teaches social-emotional skills and conflict management - core ingredients in all drama-based bullying prevention programs.

Established in 1987 by drama therapist, Diana Feldman, and a team of experts in education, psychology and the arts (ENACT, 2008c), ENACT is a non-profit drama-in-education organization that teaches social-emotional skills through "creative drama and drama therapy techniques" (ENACT, 2008b). ENACT uses a whole-school approach and offers workshops throughout the school year to youth at-risk and low-to-middle income families throughout the five boroughs of Manhattan (ENACT, 2008c). Teaching teams of professional actors trained in the ENACT method reflect the ethnic diversity of the populations they serve. In addition, ENACT offers original Theatre-in-Education plays for larger school audiences that deal with a range of topical issues (ENACT, 2008e).

Context

ENACT extends services to a variety of schools (ENACT, 2008c), including special needs schools and those catering to students with learning disabilities and severe academic, emotional and behavioral problems. Many of the populations they serve live below the poverty line (Ward, 2007). Most schools have a high dropout rate and low

attendance records (Ward, 2007), and the majority of students are African-American or Latin-American. One suspension school (for students who have been expelled from various public schools) receives ENACT workshops throughout the school year as part of an attendance and dropout prevention program (ENACT, 2008c). ENACT works within the classroom setting and also offers after-school drama programs.

Philosophy

ENACT stems from a humanistic paradigm: a child-centered, strengths-based approach (ENACT 2008d) that applies emotion and cognition as tools for self-enhancement (Feldman & Jones, 2000). ENACT's teaching artists "join" with students by creating an atmosphere of respect and non-judgment, while clearly defining boundaries and expectations (Feldman & Jones). ENACT refers to this environment as 'the container,' a safe space for the drama process to unfold (ENACT, 2008g). By becoming part of a cohesive group, students develop a sense of value and belonging – experiences they may not be getting from their home, school or family environment. ENACT's goal is to give disadvantaged youth a new experience of feeling successful as they master carefully selected age- and skill-appropriate drama games, scene work and role-plays (Ward, 2007).

ENACT's teaching artists are composed of male/female dyads, whenever possible, who model problem-solving and healthy communication skills. This intentional gender pairing mirrors the father/mother relationship, often missing for many students who come from single parent families (Ward, 2007). Short, loosely scripted scenes enacted by the teaching team show students "renderings of their own behavior" in a

fictionalized context (Ward, 2007). This distance allows students to relate to the scenes without feeling "threatened" (Feldman, as cited from video, ENACT, 2008f).

It is ENACT's belief that once students can identify their underlying feelings and be given tools to manage them, pathways to learning will become unblocked (ENACT, 2008c). As students build self-confidence by acquiring and practicing communication and conflict resolution skills, they begin taking responsibility for their choices and become accountable for their actions. By developing group trust and safety, it is hoped that students will be able to create and sustain healthy and meaningful relationships throughout life (ENACT, 2008c).

Approach

Each 45-minute ENACT class is similar to that of a drama therapy session, including warm-up, main activity and closing ritual. The warm-up gauges how students are feeling, followed by a drama game related to the scene work. A short scene (2-5 minutes), created by ENACT, or one improvised by the teaching team in response to particular group needs, features an imbalance of power in relationships. Students are invited to name the two characters in the scene (not someone in the class or school) and then a volunteer student 'director' calls, "Actors are you ready? Quiet on the set." Then everyone shouts, "Action!" (Ward, 2007).

Scenes might depict a teacher and a disruptive student who comes in late for class (Ward, 2007) or a sister who discovers her brother has a black eye (ENACT, 2008f). Various relationships explore unhealthy power dynamics between parent and child, boyfriend and girlfriend, siblings or friends (Ward, 2007). During any given scene an actor can call "Freeze – inside." The acting partner immediately freezes, as the actor who

called freeze soliloquizes his innermost thoughts and feelings. The scene then continues where it left off. An expansion of this technique asks the class to write the 'inside' of the protagonist. Students are invited to read it or to have the actor perform it (Ward, 2007). Teaching empathy through identification and role-play, this exercise also allows creative expression for those students who might otherwise be too shy to participate.

After the enactment, students are asked to give the scene a title and to provide a brief synopsis (Ward, 2007). This lets facilitators know that the material was understood. Feelings and actions of the characters are explored as students are invited to share similar situations in their own lives. Alternate solutions promoting more positive outcomes are discussed and written on the blackboard. Students then volunteer to reenact the scene either with the actor or with another student (Ward, 2007). The teaching team coaches from the sidelines, providing direction and encouragement.

After the "replay" (Feldman & Jones, 2000, p. 341), students are applauded and offered positive feedback. As a way to de-role, student actors are asked to reflect on their experience when in role, and audience members are invited to share observations. As a closing ritual, students repeat phrases emphasizing the lesson of the day: "Thank you. Great work. When I find myself in difficult situations, I have choices. I can breathe. I can stay calm. I can find non-violent ways of communicating" (Ward, 2007). It is hoped that these positive affirmations will replace internal negative messages that keep students in destructive behavioral patterns.

Research

ENACT distributes informal student and teacher assessment evaluations throughout the course of a program to mark a student's growth in self-awareness and

social-emotional skills (Ward, 2007). Like most non-profit organizations that rely on outside sources, ENACT hopes to provide empirical data validating the drama therapy-based approach to social-emotional skills training and conflict resolution (Ward, 2007). To date, they have been able to document improvement in the area of dropout prevention through an outside research firm. "Metis Associates, A New York City-based consulting firm, found that 50% of students participating in ENACT's four full-time AIDP [Attendance in Dropout Prevention] programs – at schools in Queens, Manhattan, and the Bronx – showed improvement in attendance" (ENACT, 2008c).

Model #4

STOP-GAP

Overview

Founded in 1978 by theatre director and drama therapist, Don Laffoon, and co-creator, Victoria Bryan, STOP-GAP is a non-profit, professional theatre company. At its inception, STOP-GAP serviced the elderly, hence the acronym, **S**enior **T**heatre **O**utreach **P**rogram for **G**rowth and **A**ging **P**opulations (Laffoon & Diamond, 2000). STOP-GAP offers a collection of original, scripted plays addressing a wide range of topics, from bullying, violence, and sexual harassment to growing up in an alcoholic family (STOP GAP, 2008b). STOP-GAP is funded by private, charitable and government agencies and does not charge for its services. It has always been STOP-GAP's mission to bring the model to institutions that cannot afford therapeutic interventions (STOP GAP, 2008a). STOP-GAP also works with terminally ill children, battered women and the elderly (Laffoon & Diamond, 2000). However, the focus of this research is on their work in schools. No matter the setting or population, STOP-GAP uses theatre as the therapeutic and educational vehicle for change (STOP GAP, 2008h).

Context

Serving elementary and high school students throughout Los Angeles and Orange Counties in southern California, STOP-GAP produces new plays each year. Some scripts are commissioned in response to community needs (i.e. a teen suicide or murder), whereas other scripts are written to reflect real-life struggles of a diverse student demographic. Plays are written to target specific age groups and are presented simplistically in the classroom – no sets, no costumes, and only the occasional use of

props. Each 15-20 minute play is followed by interactive audience reflection and exploration of the material through role-play and improvisation (STOP GAP, 2008e). Although STOP-GAP's school prevention presentations are a one-time event, their presence can often be felt throughout an entire school. Many teachers build STOP-GAP into their curriculum and continue to use them year after year. A special emergency fund is devoted to providing immediate trauma-based school interventions (STOP GAP, 2008f). STOP-GAP has been recognized for many of its contributions, including drama therapy in education (STOP GAP, 2008c).

Philosophy

The work of STOP-GAP is a "person-centered approach" based on Carl Rogers' "genuine positive regard" (Laffoon & Diamond, 2000, p. 250), which treats the students as "experts" in their own lives (Laffoon & Diamond, p. 244). STOP-GAP is rooted in Goleman's concepts of emotional intelligence (Goleman, 1995) that speak to "an individual's ability to manage feelings effectively" (Laffoon & Diamond, p. 251). STOP-GAP believes that within each of us lies the wisdom to heal and successfully manage our daily struggles in positive, non-violent ways (STOP-GAP, 2008a). Through interactive dialogue and improvisation, the STOP-GAP method encourages students to find their own solutions in response to threatening situations presented in the plays. The safety of exploring feelings through fictionalized characters is a drama therapy distancing technique that allows students to experience emotions without feeling overwhelmed (Laffoon & Diamond).

Approach

Professional actors trained in the STOP-GAP method present plays within the intimacy of the classroom setting (STOP GAP, 2008e). A basic STOP-GAP team is comprised of two actors and one facilitator, although some of the plays require up to four actors (Laffoon & Diamond, 2000). Each one-time presentation is geared to fit within a 35-50 minute classroom period. The 20-minute "scripted performance...carefully builds to a critical turning point" (STOP-GAP, 2008b). After the play, the facilitator invites audience feedback by asking a series of questions to help students identify and explore the feelings of the characters. An audience member is then invited on 'stage' to take on the role of a helper or friend. The STOP-GAP actor stays in character and a scene is improvised. STOP-GAP never casts children in the role of victim or perpetrator in order to avoid any situation that could potentially retraumatize or reinforce a negative role (Laffoon & Diamond). The role of the helper is an empowering character that allows children to practice real life skills and to "internalize powerful, positive messages" (Laffoon & Diamond, p. 258).

Before the improvised scene, however, students need to "Make the Menu" (Laffoon & Diamond, 2000). In STOP-GAP lingo, that means that the audience must invent a cast of characters who could help the troubled protagonist – a friend, priest or school counselor, for example. A volunteer from the class is then selected to play a role of his choice from the Menu. The facilitator asks the volunteer which of the two characters should speak the first line of dialogue. The audience is then asked what that first line might be. This process gives students a sense of ownership and control. From that point on, the scene is improvised. Not only does the STOP-GAP method provide the

experience of asking for help, students realize that they have many options they may not have considered before (Laffoon & Diamond).

All improvised scenes include a professional STOP-GAP actor and never involve two students from the class. The actor maintains the authenticity and seriousness of the topic, as well as keeping focus and intention. If at any point a child gets stuck, the facilitator calls, "Pause" (Laffoon & Diamond, 2000, p. 249), and all action stops. He then asks the volunteer a series of questions or turns to the audience for help. "What can he say?" or "Is it his fault?" (Laffoon & Diamond, p. 249). This is a great opportunity for the student to make connections between emotion and behavior, or to step out of the role if emotions get too heated. "Pause" also offers everyone a chance to gain perspective and develop empathy, and provides "choices involving effective communication" (Laffoon & Diamond, p. 249). After the first improvisation, if time allows, additional scenes might be enacted depending on the Menu and the ideas generated by the class.

"Hitting the Bull's Eye" (Laffoon & Diamond, 2000, p. 248) is the foundation of the STOP-GAP method and refers to the target feelings of the play. Although the subject matter may be about bullying, many underlying feelings can be identified by students, such as sadness, fear, anger and frustration. Through class discussion, the facilitator is able to gauge how well the students grasp the subtext and message of the play.

Research

Based on questionnaires collected after each performance, STOP-GAP's work has been extremely well received (STOP-GAP, 2008c). Because funding agencies no longer rely on qualitative or anecdotal information to prove efficacy, outside research firms have been hired to produce quantitative findings. Results from these studies have not been

published. However, given the longevity of this organization, as well as the numerous awards it has received (STOP-GAP, 2008c), it is evident that STOP-GAP continues to enrich the community through its valuable therapeutic theatre process.

RESULTS AND DISCUSSION

Overview

This section presents themes and concepts that emerged through analysis of the four models as well as data gathered from interviews. Five drama therapists, Michael, Ann, Lucy, Kathryn, and Joe, several of whom have been in the field of bullying prevention and conflict management in schools for over twenty years, offer their insights and professional expertise.

The first section, *Implementation,* analyzes the "basic shape" (Jones, 1996, p. 16) of the models and identifies five common steps. This is followed by a description of the function and goals of each step. Shared drama therapy processes (Jones, 1996) and the ways each of the models utilize these processes highlight similarities and differences. *Presentations* discusses *Efficacy of One-time Performance Workshops* versus *Efficacy of Ongoing Workshops. Perceptions* reveals how drama therapists view their role in schools and some of the resistance they encounter. The next section, *Intentions,* examines *Prevention versus Intervention. Applications* looks at *Classroom Setting* and *School Culture*, and offers advice from experienced drama therapists on how to successfully integrate drama therapy prevention services into schools. This section leads to *Recommendations* for the development of future models.

This section addresses the subsidiary inquiries:

- What is revealed through analysis of the models?

- How does the drama therapist perceive his/her role in the school?

- What are the implications for developing future drama therapy bullying interventions?

Implementation

The structure of the models under investigation contains five steps similar to the "basic shape" of the drama therapy session (Jones, 1996). ENACT and ActingOut, as well as many of the bullying interventions mentioned in the Literature Review (Urban Improv, Cooling Conflict, Headlines Theatre) use this general format. It should be noted that Kathyrn Boyd's performance and talk-back session utilize Steps 2 and 3, and the remaining steps are incorporated in her post-performance workshops. STOP-GAP uses all of the steps except for Warm-Up.

Format of the Prevention Model - Five Basic Steps

1. Warm-Up

2. Dramatic Presentation

3. Discussion

4. Audience Enactment

5. Closure

Function & Goals of Each Step

1. Warm-Up

The Warm-Up introduces fun theatre games and dramatic exercises that encourage spontaneity, creativity and self-expression in order to develop a feeling of safety and playfulness (Feldman & Jones, 2000). It builds trust and group cohesion, and enhances interpersonal skills. It can be used as a way to introduce a theme or to assess a group as themes emerge (Cossa, 2006b; Jones, 1996).

2. *Dramatic presentation*

Performed by the acting troupe, individual actor or teaching artists, the Dramatic Presentation portrays a scripted play, scene, or improvisation about bullying. It reflects familiar, challenging situations students encounter in their lives. The intention is to connect the audience with the characters on-stage, build empathy, evoke emotions and create a shared group experience. The Dramatic Presentation serves as "a springboard for self-reflection and awareness" (Feldman & Jones, 2000, p. 339).

3. *Discussion*

The Discussion invites the audience to reflect and share insights about the fictional situation and characters depicted in the Dramatic Presentation, and to explore alternate solutions geared toward more positive outcomes. It enhances social awareness as students are asked to make observations about the actors' body language, social cues and communication styles. It expands emotional vocabulary as students identify feelings and underlying needs of the characters. The Discussion bonds group members, as they discover similar points of view and share parallel situations in their own lives. It engages critical thinking and group problem-solving skills, develops empathy and validates life experiences (Feldman & Jones, 2000).

4. *Audience enactment*

Audience Enactment is an alternate rendition or improvised extension of the Dramatic Presentation. Some models allow for the creation of new scenes and/or characters in order to help the protagonist. Others ask audience members to "replay" (Feldman & Jones, 2000, p. 341) the scene incorporating solutions suggested during the Discussion. Through the articulation of thoughts and feelings, students' self-image can

change (Emunah, 1994), as they embody different characters and express themselves in new ways. Social-emotional skills and self-awareness are developed along with an emotional vocabulary. Audience Enactment encourages spontaneity and expands role repertoire (Emunah, 1994). It invites playfulness and risk-taking, and is used as a rehearsal for life (Urban Improv, 2008; STOP-GAP, 2008g).

5. Closure

Closure requires students to step out of role and reflect on the experience of the Audience Enactment. It is a distancing technique that helps "create perspective on themselves or an issue" (Jones, 1996, p. 106). It serves to de-role both actors and audience as observations and personal connections to the scene or role-play are shared. This final step of Closure builds a sense of community and acknowledges students' coping, problem-solving and communication strategies. In some instances, it is used to make the life-drama connection (Jones).

Drama Therapy Processes

The main drama therapy processes (Jones, 1996) common to all of the models are *Role, Dramatic Projection* and *Life-Drama Connection*. A comparison of how each of the models incorporates these theatre-based processes follows.

Role.

Moreno believed that rigidity within roles was the root cause of emotional, physical and psychological problems (Sternberg & Garcia, 2000). He felt that the more roles we can play in our daily lives and the more flexible, spontaneous and creative we can be within each role, the healthier we will become. "An expanded role repertoire equips us to deal with a broader range of life situations, to cope with new tasks, and to

respond to old tasks in new and creative ways" (Emunah, 1994, p. 33).

Each of the models incorporates role-play differently during Audience Enactment. For example, ActingOut invites audience members on stage to act out alternate solutions to problems presented by the teen acting troupe, or to add new characters or scenes to help the protagonist. ENACT allows two students to "replay" (Feldman & Jones, 2000, p. 341) the original scene, or one student who improvises with the ENACT actor. STOP-GAP is different from the other bullying prevention models in that it does not reenact scenes from the Dramatic Presentation. Instead, students are cast as characters who were not in the original play, but who can offer advice to the protagonist in a supportive role. Also, unlike the other models, just one student is allowed on stage at a time with a STOP-GAP actor. The actor stays in character as either the perpetrator or victim (Laffoon & Diamond, 2000). A child is never allowed to play these roles.

To protect students from feeling identified or emotionally overwhelmed, all of the models invent fictionalized scenes and characters. Through the safety of the fictionalized roles, students explore the emotional lives of the characters and hopefully gain empathic understanding as they develop perspective. "It is through the creation of one's own fictional world that we are able to understand and change the real one" (O'Toole et al., 2005, p. 50).

Dramatic projection.

Projection in drama therapy is the externalization of internal conflicts through dramatic expression (Jones, 1996). As discussed above, all of the drama therapy models enable students to project beliefs and feelings onto fictionalized characters. "That distance gives them the freedom to feel," Lucy reflects. "It's bringing out a lot of that

emotional vocabulary that they never use or that they're afraid to use" (July, 2008). By exploring very real emotions in this non-threatening, distanced approach, students are liberated from the image others project onto them, as well as the image they hold of themselves (Emunah, 1994).

Projection is also a part of the audience experience, as students project aspects of themselves onto the characters and situations enacted on stage (Jones, 1996). Actors who reflect the cultural make up of the audience further enhance this process. For example, ActingOut uses teen actors who perform for teens. Kathryn Boyd is Caucasian and performed for Caucasian audiences. ENACT and STOP-GAP hire African American and Latino actors, who serve those specific school populations.

Life-drama connection.

"In drama therapy, there is an intimate connection between life and drama" (Jones, 1996, p. 117). The overarching goal of bullying prevention is for students to integrate what they learned through drama and role-play into their daily lives. The four models utilize the process of the life-drama connection in various ways.

Kathryn's talk-back sessions after *The Shape of a Girl* began with the question, "How many people...have either experienced bullying or seen bullying happen?" (July, 2008). By making that life-drama connection, Kathryn felt that students were better able to use the play to reflect upon their own lives. Once students learned that the play was based on a true story, it seemed to touch them in a more profound way, as they suddenly became actively engaged in the talk-back session (Kathryn, July, 2008).

After the Dramatic Presentation, ENACT makes the life-drama connection by asking students, "When else does this sort of thing happen?" (Ward, 2007). As students

share personal stories, they feel validated. In the hopes that students will internalize positive messages, the teaching artists leads a "call and response" (Ward, 2007) at the end of each session that affirms and clarifies the coping strategies and lessons learned.

STOP-GAP, on the other hand, does not believe in making the life-drama connection explicit. Reflection is confined to exploration of the fictionalized characters without delving into personal material (Laffoon & Diamond, 2000). The therapeutic work is inherent in the process, or as Jones (1996) states, "the drama is the therapy" (p. 4). All of these drama therapy approaches help students connect the dots to their own lives.

Presentations

Efficacy of One-Time Performance Workshops

Anecdotal questionnaires taken post-performance indicated that the one-time bullying presentations were well received and raised awareness about bullying (ActingOut, 2008c; STOP-GAP, 2008c). Three of the organizations have been in business since the late 1980s (ActingOut, ENACT & STOP-GAP). Clearly, their work is still in demand. Although, to my knowledge, no data on long-term impact or a decrease in bullying has been studied. If the goal of a one-time presentation is to raise awareness, then it has succeeded. Yet research on bullying preventions that merely raised awareness did not decrease incidents of bullying (Elsea & Smith, 1994; Grossman et al., 1997). In fact, many programs left students feeling more vulnerable (Hymel, 2003).

Lucy, a drama therapist who worked in schools for over 30 years, is concerned about the one-time presentation. "If you're in and out and you leave behind problems, who's there to clean up the mess? I've seen it happen more than once," (July 2008). All of the drama therapists I interviewed were highly ethical in this regard and made referrals

to the school counselor if a student appeared to be in need of support services. But Lucy's point is well taken; visiting artists do not provide follow-up services. Lucy also wonders if the presentation of "provocative pieces" is really going to change kids or change the school (July, 2008). Michael (July, 2008), who has been facilitating bullying awareness workshops and one-time presentations for over twenty years, offers this insight:

> If we really want to address the issues of bullying, then we have to do things that help create a different social climate. Performers coming in might be a good part of it, but that, in and of itself, isn't going to do it. Research shows that as powerful and inspiring as they may be, if they're not followed up [they] tend to have limited impact. It's teaching kids skills, but not really challenging the norms.

Although the one-time presentation opens a creative dialogue about bullying, raising awareness alone cannot change behavior if students lack the self-awareness and skills to alter that behavior. That being said, Ann has witnessed many positive changes even after one session – from a student's posture and affect to accountability and empathy toward the group (July, 2008). "Learning how to communicate more effectively in conjunction with the realization that violence is not the only option acts as a source of liberation" (O'Toole et al., 2005, p. 52). Ward (2007) reported that ENACT's original plays on bullying have had the most impact when ENACT has integrated into the school culture through weekly, social-emotional skills workshops.

Efficacy of Ongoing Workshops

During long-term residencies, ENACT hires support staff within each school in addition to the teaching artists (Ward, 2007). Recent research (Cunningham & Whitten, 2006) found that fostering trusting relationships between students and adults is the most

important factor in creating a safe school environment and aids in the success of prevention programs. "You see them trusting an adult for the first time," Ann says about many of her students who come from disadvantaged families (July, 2008). Although drama therapists cannot change a troubled home environment or other negative external factors, they can help a child feel valued. ENACT has documented an increase in attendance in schools that hire the agency for long-term residencies (ENACT, 2008b). "You know kids come to school when they're made to feel good about themselves in school" (Ann, July, 2008).

Perceptions

What's in a name?

The drama therapists I interviewed do not refer to themselves as drama therapists when working in schools, but rather as drama teacher, drama specialist, theatre educator, director or professional actor. Michael explains, "When I go into schools, they don't see me as a drama therapist, they see me as an educator or as a theatre educator. But my therapeutic background gives me the opportunity to work in a different way than many others who don't have that background" (July, 2008).

Lucy worked for several decades serving inner city, disadvantaged and incarcerated youth in the southern United States. Working in partnership with the classroom teachers, she helped students develop social-emotional skills through dramatic exploration of curriculum in history, social studies, poetry and literature. "My title when I go in [to schools] is drama teacher, not drama therapist. But in each situation, the reason I was hired was because I was a drama therapist" (Lucy, July, 2008).

Ann conducts both short and long-term conflict management workshops in inner-

city schools in a major U.S urban area. She also does not refer to herself as a drama

therapist when working in the classroom. She does not want students to become resistant

before they understand how the method works (Ann, July, 2008). She feels that the word

'therapist' can make students feel as if they are being dissected.

Leigh, a drama therapist from England, is troubled by the [British] schools'

current trend of hiring drama specialists rather than drama therapists. She believes that

"therapy is a scary word for many people" (L. Leigh, personal communication, August,

2008). Michael agrees, "Sometimes you mention therapy and the schools put up their

hands and say, 'Wait a minute, that's not what we're about' " (July, 2008).

Kathryn, on the other hand, does not feel that the word 'therapy' is a scary term,

because schools hire psychologists and other support personnel. "But [Canadian] school

boards aren't really hiring drama therapists," she says, "they're hiring social workers"

(Kathryn, July, 2008). The agency where Ann works hires both social workers and drama

therapists as on-site supervisors for long-term contracts in schools. When I asked why

they do not hire drama therapists exclusively, Ann explained that drama therapy is a

relatively new approach that is not well understood by the consumer. She went on to say,

"Once people understand what a drama therapist does, they're blown away by the

possibilities. We can cut to the chase and use an action method and I think that's an

advantage we have" (Ann, July, 2008).

What is Unique to the Drama Therapist?

The drama therapists I interviewed have all worked in theatre professionally

either as actors or directors. Most had undergraduate or graduate degrees in theatre. Some

had studied psychology, while others came from an education background. Although the

paths that led them to drama therapy varied, they all understood the healing impact of theatre.

When discussing how the drama therapist differs from the drama specialist, it became clear that the drama therapist was more interested in process and group dynamics, rather than content or end product (Lucy, July, 2008; Michael, July, 2008). Lucy assesses the appropriateness of a response or if a student is able to "go into relationship with others" and evaluates a range of behaviors that reflect the student's "social-emotional and developmental needs" (July, 2008). The drama therapist looks at the therapeutic casting of roles "from the perspective of how the roles will serve the actors," rather than how well the actors can serve the roles (Cossa, 2006a). Although a drama teacher might find an activity to be therapeutic, the drama therapist intentionally guides the therapeutic process of the drama activity (Johnson, 1981; Katz, 2000).

Intentions

Prevention versus Intervention

According to Soble & Long (2007) prevention in the arts therapies helps "at-risk children discover their own talents and creative energy, explore alternative options for their futures, and develop ways to channel their inner resources" (p. 181). It addresses three main areas: (1) improving emotional intelligence and analytical thinking; (2) decreasing the likelihood of risky behaviors; and (3) developing a sense of self and community (Soble & Long, 2007). In addition, prevention programs offer new coping strategies in order to change behavior (Wager, 1987). These are inherent in the goals of drama therapy for both prevention and intervention, which promote healing, transformation and change (Jones, 1996).

The four models under investigation, as well as the drama therapists I interviewed, refer to their work as prevention, not intervention. Joe insists his work is "not therapy" and feels strongly that the school is not a therapeutic environment (July, 2008). His agency only provides therapy interventions in schools to help students cope with a specific trauma. While his theatre-based method is exactly the same for both prevention and intervention, he explains, "It's the intention that changes" (Joe, July 2008). Michael describes prevention versus intervention as a difference in the contract "developed with the participant(s) and whether our intent is education or healing" (July, 2008). However, many therapists refer to prevention as a form of intervention (Caplan, 1964; Soble & Long, 2007; Wager, 1987). This highlights one of the major discrepancies that surfaced during this research: a lack of consistent definitions for shared terminology. An agreement of appropriate terms would help to clarify the field to consumers – in this case, schools.

The words 'intervention' and 'therapy' seem to imply the singling out of a particular individual to work on deeply personal issues, as in psychodrama. The four prevention models being analyzed are not "intense personal explorations," which would be inappropriate in an educational setting (Wager, 1987). Instead, these models adapt drama therapy techniques to look at bullying and conflict through a safe and playful approach. They highlight strengths, while teaching social and emotional competencies. Although all of the drama therapists I interviewed are quite adamant that they are not providing 'therapy,' they all agree that prevention work is inherently therapeutic.

Perhaps rather than perpetuating the stigma of 'therapy' by evading the term, drama therapists might educate the school community of the many applications of drama

therapy, and how it is executed in the classroom. By broadening the definition of drama therapy to include prevention, drama therapists could make their services more desirable and less threatening. This task could take decades to accomplish, but it is crucial if drama therapists wish to be accepted into the school culture. Otherwise, we will continue to hide behind the misnomer of drama specialist, and not be recognized for the expert training and skills that we possess.

Applications

Classroom Culture

Most of the drama therapists I interviewed concur that the classroom is the best place to do prevention work, always with the teacher present. Joe only conducts bullying workshops in the classroom because he finds that "the whole chemistry changes" when students are "herded" into an auditorium (July, 2008). Aside from wanting to be able to look in their eyes and "create a dialogue with them," the classroom is "where they live" (Joe, July, 2008). Wengrower (2001) disagrees. As a movement therapist and school counselor for more than 20 years, she believes that working within the set structure of the classroom "can have a detrimental effect on the child's ability to move beyond the fixed role he fills within the class and threaten his privacy and willingness to experiment with new roles and experiences" (p. 112).

Ann addresses this concern by forming smaller groups from different classes when necessary. Students can then reenter their normal classroom with better communication skills and more confidence, having experienced success within a smaller forum (Ann, July, 2008). However, small groups of students with serious conduct and behavioral problems could be counterproductive (Kazdin & Johnson, 1994), as these

children tend to encourage negative behaviors (Smith, Schneider, Smith & Ananiadou, 2004).

Unlike the four models under investigation, Urban Improv in Boston does not use the classroom to implement its workshops (*see Literature Review, Drama-Based Interventions*). Students travel to Urban Improv's professional theatre space for weekly sessions. Creating this neutral space alleviates the concern that the school is not a therapeutic environment. It might also provide certain students an opportunity to step out of the negative role they fill in school.

Regardless of the venue, preventions offered to the entire class have demonstrated positive results in reducing external behavioral problems and improving social skills, when compared to schools that did not receive these types of programs (Hundert et al., 1999; Kisiel et al., 2006). When an intervention is offered to an entire class, no child is labeled or stigmatized. Furthermore, students who may need support services, but who have slipped through the cracks, can also benefit from the classroom intervention. Given that parents rarely follow up on therapeutic treatment recommended by school counselors (Ann, July, 2008; Herbert et al., 2007), Ann thinks that the classroom approach is an excellent solution and adds, "We're bringing the mountain to Mohammed" (July, 2008).

School Culture

Gersch (2001), an educational psychologist and teacher in London, England, who has worked with drama therapists, believes that "drama therapy has so much to offer in educational settings *but* it is both [*sic*] under-sold, under-marketed and not fully understood by educational professions" (p. 4). All of the drama therapists I interviewed stress the need to educate school staff about the work of the drama therapist. Lucy gives

workshops periodically to faculty, even if she's not working with them at the time. "You've got to let people know what you do and why you're doing it," Lucy warns. "For a drama therapist to go in and work in a vacuum...and not educate people, then you become threatening" (Lucy, July 2008). Wengrower (2001) advises therapists to use language that has meaning for educators rather than "technical jargon" (p. 7). Informing teachers ahead of time might also eliminate potential situations in which teachers inadvertently undermine the therapeutic process (Ann, July, 2008).

Lucy and Ann concur that to be most effective, the drama therapist must become an essential member of the team addressing the social-emotional needs of the students (July, 2008). Lucy has found that drama therapists tend to isolate themselves. "Make sure you're part of the whole," she cautions, "not just someone who pops in and pops out," (July, 2008). It is also essential that therapists understand the school culture and can be flexible and accommodating (Ann, July, 2008; Leigh, 2001; Lucy, July, 2008).

Ann advises that drama therapists must be "politically savvy" to ensure that the "school partner...understands the value of the service and how to support it" (Ann, July, 2008). Teacher and parent trainings are an integral part of the method at the organization where Ann works. But she admits that parent workshops are poorly attended and with the current emphasis on test scores, teachers have time for little else (Ann, July, 2008). Ultimately, Ann feels that the success of any drama therapy prevention program hinges on a solid partnership among student, school and family (Ann, July, 2008).

Recommendations

Developing Future Models of Bullying Preventions

Many current approaches in drama-based bullying preventions focus on the role

of the victim, despite the fact that most bullying occurs in the presence of peers (Pepler & Craig). Therefore, it is my recommendation that future models place more emphasis on empowering the role of the bystander (Belliveau, 2007; Pepler & Craig, 1995; Nickerson, Mele & Princiotta, 2008; Reid, Monsen & Rivers, 2004). When given opportunities to practice moving from the passive role of bystander to that of "defender" (Nickerson et al.), students can respond more effectively when under duress (O'Toole et al., 2005). Another area worthy of further exploration is dispelling the myth that victims deserve to be bullied (Gini, Pozzoli, Borghi & Franzoni, 2008; Kathryn, July, 2008).

However, empowering the bystander alone does not address the underlying issues affecting the bully and the victim. As was discussed, some problems could be trauma-based due to exposure to violence, abuse or neglect in the home (Camilleri, 2007; van der Kolk, 2002). Aggressive or highly reactive behaviors could also be attributed to learning disabilities and lack of communication skills (Camilleri, 2007; Lucy, July, 2008). Distinguishing between proactive or reactive forms of behavior (Vitaro, Brengden &Tremblay, 2002; Zahn-Waxler, 2005) can inform the drama therapist of appropriate intervention strategies. The downside of offering a particular method to the entire class is that these individual considerations may not be taken into account. Identifying and addressing the source of the maladapted behavior for each individual is key. Obviously, this cannot be accomplished during a one-time performance workshop.

Therefore, I believe that ongoing "prevention interventions" (Soble & Long, 2007) such as ENACT have the greatest potential to affect change (Crothers, Kolbert & Barker, 2006). When offered on a regular basis as part of the curriculum, these types of programs reinforce positive communication and problem solving skills, and might reduce

bullying behaviors. Further research is needed to gauge the impact of such programs.

It is also my recommendation that prevention models take a systemic approach, such as ENACT and Theatre for Living (Diamond, 2007). Although to date the whole-school approach has not proven more effective than other types of anti-bullying programs (Smith, Schneider, Smith & Ananiadou, 2004), it makes sense that the entire school community takes ownership of the problem, rather than relying solely on students to alter their behavior. This effort would require that teachers, parents, students and staff receive equal education and training. As the research showed (Pepler & Craig, 1995), teachers were not only unaware of bullying, but lacked the intervention skills that would make students feel safe (Crothers, Kolbert & Barker, 2006). Enlisting parents' involvement is another critical element to maintaining consistency between home and school.

With regard to target age range, none of the four models under investigation offered workshops to pre-school children. While some have developed plays or programs starting at kindergarten or grade one (ENACT, STOP-GAP), most focused on middle and high school. For youth at-risk, "early life intervention may increase the resources of a child...to cope with future adversity" (Beardslee & Gladstone, 2001, p. 1108). It is never too early to model emotion identification, self-regulation and empathy (Michael, July, 2008), the competencies so vital to acquiring and maintaining healthy relationships throughout the lifespan. Given the tools at a young age, our children could learn to recognize and take responsibility for their feelings, and to express wants and needs through nonviolent communication (Rosenberg, 1999). Early intervention could result in less violence in our schools, our jobs, our homes, our world.

"Bullying is not only a problem that influences individuals: it transcends peer groups, communities, and countries and as such is a significant international public health issue that warrants attention" (Nansel et al., 2004, p. 730). Given that bullying has become a growing issue of global concern (Olweus, 1999), it is my hope that drama therapists will continue to make significant contributions to the field of bullying prevention in schools. Although it was beyond the scope of this paper to delve into modalities outside the field of drama therapy, I believe it is critical for drama therapists to look to experts in other professions. Great strides have been made in conflict resolution, peer mediation, drama in education, neuroscience and psychology that can inform the drama therapist. Through this valuable, cross-disciplinary exchange of information and research, drama therapists can develop empirically valid bullying prevention strategies that could help legitimize this fledgling profession.

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APPENDIX A

Research Participation

E-mail Recruitment

Hello,

My name is Kalie Rae and I am a graduate drama therapy student at Concordia University in Montreal conducting my Masters Research. I was referred to you by

_____ (or) I discovered your company through my research (or) I read some of your articles on _____. I am researching drama-based bullying, violence prevention and conflict resolution interventions in schools from around the globe. I was wondering if you would be willing to participate in my study via a 60-90 minute tape-recorded interview by phone (or skype). I would then do a 15-minute, follow-up telephone interview, if needed, to clarify any points.

I would greatly appreciate your expertise in reflecting on your work. I will be asking ten questions addressing issues of bullying and conflict resolution in schools using drama therapy. Should you agree to participate, I will e-mail you a consent form detailing the research and researcher-participant agreement.

Thank you,

Kalie Rae

Drama Therapy Graduate Student

Concordia University, Montreal

APPENDIX B

Research Participation

Consent Form - Interview

This is to state that I agree to participate in a program of research conducted by:

Drama Therapy Student: Kalie Rae
Department of Creative Arts Therapy
Concordia University
1455 de Maisonneuve Boulevard W., S-VA 264
Montreal, Quebec H3G 1M8
Canada
drama.therapy@yahoo.com

Supervisor: Christine Novy, MA, Dip. Dthy, Dip. Pthy

A. PURPOSE

I have been informed that the purpose of this research is to gather information and to observe drama therapists and experts in the field of drama-based bullying and conflict resolution interventions in schools toward developing a comparison of current methodologies for drama therapy professionals. I understand that upon publication, copies of the research paper will be kept in the Concordia University Library and in the Resource Room of the Creative Arts Therapies Department.

B. PROCEDURES - OBSERVATION

I agree to be observed or to give access to the researcher to observe other facilitators from my organization during drama sessions conducted in the schools.

Prior to publication, a copy of the first draft of the researcher's findings shall be offered to me via e-mail or post to check facts and verify information. It is understood that the researcher will not include any confidential or personal information about myself, the students, parents or teachers, but may refer to the population in generalized terms, i.e. social economic status, race, etc.

C. RISKS AND BENEFITS

No risks have been identified in participating in this research study outside of the normal discomfort in being observed by a stranger. Benefits include my contribution to the field of drama therapy.

D. CONDITIONS OF PARTICIPATION

- I understand that I am free to withdraw my consent and discontinue participation at anytime without negative consequences.

- I understand that my participation in this study is CONFIDENTIAL (i.e. my identity will not be revealed in the study results).

- I understand that the data from this study will be published.

I HAVE CAREFULLY STUDIED THE ABOVE AND UNDERSTAND THIS AGREEMENT. I FREELY CONSENT AND VOLUNTARILY AGREE TO PARTICIPATE IN THIS STUDY.

Name of participant (please print) _____

Title _____

Organization
(if applicable)_____

Signature of
participant_____Date_____

Signature of
Researcher_____ Date_____

If at any time I have questions regarding my rights as a research participant, I may contact Adela Reid, Compliance Officer, Office of Research, GM-1000, Concordia University, Montreal, Quebec H3G 1M8 at (514) 848-2424 ext. 7481 or by e-mail at areid@alcor.concordia.ca

APPENDIX C

Research Participation

Interview Questions

1. Could you please describe your intervention on bullying, violence prevention or conflict management? How long have you been doing it? *(i.e. Is it a short or long-term intervention; length of each session; number of times/week; number of participants – same or different from session to session; selection process of participants; populations served; school settings; space used; description of facilitators [education or professional training, gender, co-leading, etc.], assessment methods of participants; format of session and goals (overall, group, individual); phases of the creative process, etc...)*

2. Is there a particular theoretical, dramatic/theatrical or psychological frame in which you model the intervention and could you give an example of how this informs your work? *(i.e. Landy's role theory, Boal's Forum Theatre, Winnicott's Object-Relations Theory).*

3. Can you explain what drew you to this intervention work in schools, to your particular approach and perhaps describe a bit about yourself?

4. Can you describe any effects you may have noticed during or after the intervention? *(i.e. What type of feedback have you received from students, teachers, parents or administration? Have you witnessed any short or long-term changes in students' behavior, awareness, confidence or peer interactions in the context of your work?)*

5.   Can you describe how you've developed and used any tools to document or measure the results of the intervention? Do you feel it accurately reflected the impact of the process? Is there anything about the tool that you would change or modify?

6.   Have you tried to measure results quantitatively, and if so, could you please describe your methods and findings?

7.   Since creating the model, is there any aspect you'd like to change or have changed and could you explain what led you to want to make such (a) modification(s)?

8.   Can you describe the support or any resistance you've encountered in the school setting? (*i.e. from personnel, students, parents, facilitators, etc.*)

9.   How does the school see you as a drama therapist? *(Does the school accept some of the conditions you require as a drama therapist? Does your experience vary from school to school and if so, what factors do you think contribute to that?)*

10.   (Optional) What was it like for you to answer these questions? Where has it taken you in your thoughts about your intervention? Is there anything you'd like to add?

APPENDIX D

Research Participation

Consent Form - Observation

This is to state that I agree to participate in a program of research conducted by:

Drama Therapy Student: Kalie Rae
Department of Creative Arts Therapy
Concordia University
1455 de Maisonneuve Boulevard W., S-VA 264
Montreal, Quebec H3G 1M8
Canada
drama.therapy@yahoo.com

Supervisor: Christine Novy, MA, Dip. Dthy, Dip. Pthy

A. PURPOSE

I have been informed that the purpose of this research is to gather information and to observe drama therapists and experts in the field of drama-based bullying and conflict resolution interventions in schools toward developing a comparison of current methodologies for drama therapy professionals. I understand that upon publication, copies of the research paper will be kept in the Concordia University Library and in the Resource Room of the Creative Arts Therapies Department.

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D. CONDITIONS OF PARTICIPATION

- I understand that I am free to withdraw my consent and discontinue participation at anytime without negative consequences.

- I understand that my participation in this study is CONFIDENTIAL (i.e. my identity will not be revealed in the study results).

- I understand that the data from this study will be published.

I HAVE CAREFULLY STUDIED THE ABOVE AND UNDERSTAND THIS AGREEMENT. I FREELY CONSENT AND VOLUNTARILY AGREE TO PARTICIPATE IN THIS STUDY.

Name of participant (please print) _____

Title _____

Organization
(if applicable)_____

Signature of
participant_____Date_____

Signature of
Researcher_____ Date_____

If at any time I have questions regarding my rights as a research participant, I may contact Adela Reid, Compliance Officer, Office of Research, GM-1000, Concordia University, Montreal, Quebec H3G 1M8 at (514) 848-2424 ext. 7481 or by e-mail at areid@alcor.concordia.ca