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Oceana Marie Dunsire
Western Washington University

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Oceana Marie Dunsire

Capstone Thesis

Evan Mueller

Fall 2019

Acting is Reacting; Acting is Coping?

The lip of the stage, carpeted concrete two feet below, and a long vom slanted upwards at an angle, dividing the audience not in half but into some awkward fraction that baffles directors and actors alike. A lofted bed, in shadow, with an absent-minded roommate puttering down below. A parking garage beneath the dorms, drafty and full of puddles, though not of people. The cushioned seat - one of many in a large vaulted room – that squeaks as it is rocked back and forth, facing toward the stage, blocked off by an orange plastic safety net lining its edge. These are some of many places I have experienced panic attacks during my years as an undergrad. I think it needs to be said that students experience intense emotions related to anxiety, panic, and depression much more commonly than anyone would like to admit. This is no different in the College of the Fine and Performing Arts, in which I have made my home in these past four years. My training as a student of theatre, particularly as an actor, has led me to reflect on where I've been, and more importantly where I *haven't* been, thanks to the vocabulary, physical technique, and emotional literacy I've learned from my education. These reflections have led me to explore how acting technique might help individuals craft a healthier relationship with their mental health.

First and foremost, I want to make it clear – acting is not therapy. Acting is a profession that requires one to be in touch with their emotions in a way that may be different than the average person, and I am interested in examining how this difference could possibly be useful in

relation to one's mental health. Before doing that, however, let's define the terms of this exploration more clearly. First, what constitutes mental health? I would argue that someone who is mentally healthy is a person who lives their life feeling and expressing emotions proportional to the degree of their experiences, without being continually immobilized by said emotions. Mental health itself is a measurement of how near or far any one person may be from that standard. The term "acting technique" can mean a lot of things, but for my purposes I am describing skills acquired primarily in Western Washington University's acting program, which can be boiled down to building a strong but relaxed connection between the voice, body, and mind, vocal safety, freedom, and strength, and cultivating inner emotional life in a truthful but safe way. A significant part of this program is dedicated to finding and releasing physical and mental blocks which are defense mechanisms and habits we've formed while growing up that get in the way of this work. As I progressed in the program, it became clear that these blocks were hindering my acting, but I also found that as I learned to release them, my mental health could find new avenues to improve in as well.

Personal trauma is a concept I began exploring in earnest during my last year as an undergrad. By examining the blocks I had as an actor, it became clear that something more troubling was hiding under the surface. To begin with, I didn't think I had trauma. It took a lot of work – more than three years of it - to be able to acknowledge my trauma to myself, let alone to begin breaking down the haphazard defensive walls I had built for myself as a result. When someone has gone through a traumatic experience, that experience can color their interpretation of the world for years and years to come. They don't even need to remember the inciting incident. While talking about trauma and taking a psychological angle on characterization for an actor, successful director and author Robert Cohen, explains that "generalized

characterizations... occur all the time” not by choice, “but as unconscious prejudices” as opposed to “rational thought” (Cohen 120). Cohen highlights the issue that people may express results of trauma without recognizing the source of it, which is frustrating particularly if said people want to change their own behavior, whether for personal reasons, or because they’re an actor.

Looking into how different psychiatric practitioners helped adult clients with their mental health, I found an emphasis on the power of storytelling, and how the way we tell our own stories *matters* for our coming to terms with them. In practice, this is called narrative psychiatry. Psychiatrist SuEllen Hamkins describes narrative psychiatry as a method that not only seeks to find “the source of the problem”, but also to find “sources of strength and meaning” to aid the patient in the healing process (Hamkins 30). The process involves looking at past events that happened “in the world” as well as “personally” and constructing a personal narrative from them (Hamkins 32). This gives the individual control over their own narrative and can also be used as a tool to better understand themselves in the context of their own story. This method stood out to me because theatre is story telling. It’s all about how we tell stories, and as an actor it’s important to find some personal connection to the story you are currently trying to tell.

In an account of a narrative psychiatrist’s in which she described her experience working with a client, she put forth the goal of forming a connection that not only respected the patient, but respected “where she was emotionally” (Macnab). To some it may seem obvious that a psychiatrist must acknowledge the feelings and emotions of the patient before moving forward, but all too often that is a step overlooked in daily life. As a civilian in the world, I never used to acknowledge where I was emotionally, only that I *wanted* to be happy and content. In testimonial from an anonymous acting student, they state that “having emotion was something I’ve

understood to be very negative, silly, or dumb my whole life”, and have only been able to push past that mindset in recent years while in class (Roznowski 73). Extreme emotion is inconvenient. It’s not easy to feel full of emotion – and it’s even more inconvenient to look at, which is why all too often we learn to bottle ourselves up rather than to let ourselves feel genuinely. Acting forces us to look at every single one of these emotions, and I think that by doing so we begin to compile our own set of tools to help our acting and our mental health.

Vocal technique is one such tool. There are many different techniques for vocal strength and safety when it comes to acting. Most that I’ve observed have to do with relaxation of the body. During my research I found one technique, the Fitzmaurice technique, that I had not been taught myself, but a study had been done on how it could possibly affect students’ anxiety levels, particularly performance anxiety. There are four stages to working in this technique, with the first being titled “Deconstructing”, which is about promoting “spontaneous and free breathing, and... vocal expressivity” by focusing on “anatomical and sensory awareness of the musculo-skeletal system” (Fitzmaurice, Hague). This is done using a physical activity called Tremoring which uses yoga-like positions to induce controlled physical tremors that deepen breathing and reduce tension, allowing for greater vocal resonance. The following steps titled, “Restructuring”, “Presence”, and “Play” are about rebuilding the means with which an actor can speak or sing with “a healthy economy of effort”, in a way that helps them to be present in the moment, open to surprises, and actively curious (Fitzmaurice). Many acting mentors have told me, projecting your voice is about doing as little *work* as possible while relearning how to play and speak with the unmarred freedom of a child. Of course, it takes a lot of work to get to that place of freedom where you’re not working *against* yourself, but the end result is a release of both tension and worries about what will happen next. That sounds a lot like a release of anxiety to me.

The actual study used a Fitzmaurice-trained group of students and a group that had not been Fitzmaurice trained as a control and measured their heart rates and respiratory rates at various audition situations throughout the year – times of high stress and performance anxiety for many students. The conductors of the study found that “the parameters” recorded “did not demonstrate differences between the experimental group and the control group” (Hague). In Hague’s evaluation however, she points out that even though the two groups may have had “the same physiological response” to the situation, they may not have had the same response to that stress – rather, she posits that “the performance will suffer less with a mindful orientation to the physiological stress response” (Hague). In other words, just learning the Fitzmaurice technique doesn’t prevent stress, but it gives actors different tools with which to move forward despite the stress. This interpretation supports my thoughts that these acting techniques have the potential to alter the *relationship* an individual has with their mental health as opposed to preventing poor mental health in the first place.

When it comes to managing mental health, my research keeps pointing back towards the significance of how we talk about it and changing those habits if need be. Another tool emphasized by my acting training is the vocabulary and specificity we use when talking about acting, regarding technique, choices made, and emotions that come up in the process. We want to be as specific as possible, and develop a common vocabulary allowing us to communicate our thoughts more clearly. Another through line I’m finding in the accounts of various therapists is the importance of making sure the patient feels heard. In the words of Hamkins, “the quality of listening... determines what emotions are safe to feel and what stories are safe to tell” in the therapists office, and I imagine that applies outside in the community as well (Hamkins 55). I think that this idea coupled with my acting program’s focus on the specificity of vocabulary is

also a boon when it comes to dealing with mental health. In the acting series we were working quite closely with one another, and though it wasn't without its bumps in the road, we had cultivated a relatively comfortable space for talking about the things that were weighing on us in our daily lives. I've often heard the phrase "leave your problems at the door" in the context of rehearsal, but over time I've come to realize that it doesn't work like that. When you enter the room, you are bringing your whole self with you, and the work that goes into rehearsal is partially about doing so in a constructive way. Being able to share where you're at is important, because individually, there is only so much one can do for their own mental health, and so much of acting *is* mental. Community matters. Acknowledging this helps to make better actors, as well as more well-adjusted people.

A key part of theatre is making spaces where people feel that they are heard. A particular kind of theatre, known as "verbatim theatre" has been noted to be particularly successful for this. This is theatre where the entire script is created and given shape using interviews conducted with different people. No line in a verbatim script is fictional. Clare Summerskill's play, "Hearing Voices" is a piece of verbatim theatre that was published back in 2010 and was formed from the interviews of different patients within a psychiatric ward, inspired by a time when Clare herself had been an inpatient in a psychiatric ward. It details the experiences of vulnerable patients that had faced abuse and neglect without any recourse. One of the women interviewed for the script states that this "play has opened my eyes because the treatment Clare perceived as wrong... I had been accepting as the norm because... I felt I deserved it" (McNab 282). She had not had this community until Summerskill made the space to talk about it, and that community helped reshape her idea of what she had gone through by herself.

This is of course a bit of a tangent from discussing specifically acting technique and successful psychiatric practices, but I felt it significant to include because it's the creation of theatre like this that aids in an actors work to discuss topics otherwise considered taboo by society, whether they were familiar with it before or not. In this respect I think that being an actor opens up opportunities to join these communities and start discussion, externalizing "hostile [inner] voices" in order to recontextualize them and create "new possibilities for individual, social, and cultural action" (McNab 119).

Another tool I found was discussed as a tool for actors but was developed from examining "world-renowned therapists who had brought healing and contentment to thousands of others" (Barton 1). Neuro Linguistic Programming (henceforth referred to as NLP) is a tool that, similarly to narrative psychiatry, "is about reframing experience and perception" as a means to "feel greater contentment and to function more effectively in the world" (Barton 69, 1). According to Hague, NLP among several other voice and movement techniques have been observed to help reduce anxiety in actors. A key facet of NLP is determining how a person learns best using the VAK system (or visual, audio, kinesthetic system). By figuring out a patient's learning style, therapists employing NLP could "recognize how the people they worked with processed information" and were able to present their observations and reframe patients' past experiences in specific and more readily acceptable ways (Barton 2). This technique is about changing the language an individual uses to talk about their experiences and their perception of those experiences. Hamkins remarked that because "trauma" alters the perception of a person's experience, it "corrodes a coherent narrative of self", which is what makes it so difficult to face. NLP can help by changing the language with which one tells the story, making it easier to talk about, process, and ultimately heal from (Hamkins).

Early in Barton's book, "Acting Reframes", he lists several skills that can be improved by studying NLP, and it strikes me as a list of qualities that lead to both strong actors and improved mental health. Among these skills were "sensory acuity" or "recognizing shifts of state in others and in yourself"; "rapport" which helps to create trust between two or more people; and "resourcefulness" or, "having other choices always available and knowing when to change" (Barton 4). It's been said before that acting is reacting, and it's important to be able to recognize such "shifts of state" in your scene partners in order to react in kind and to build a stronger connection with them. Additionally, being able to accurately measure one's own mental state in such a way can help an individual stay grounded, such as during a panic attack. The ability to build rapport helps in all social situations and is essential for creating safe acting spaces in which actors can be vulnerable with each other. Lastly, being able to make and try different choices, whether in real life or scene work, is important to keep from feeling stifled or helpless. It's an ability that helps one maintain their agency in anxiety producing situations.

Such lists continue to pop up throughout Barton's book, such as in the section talking about "the core states" which have to do with "feeling fully present from inside out", "accepting, welcoming, and even loving your limitations", and "being more aware of what connects us all than of what separates us" (Barton 77). This list was created by consulting councilors and psychiatrists about "what tends to be missing" in the patients that seek them out. Again, all of these are traits that would benefit an actor too (Barton 77). Throughout the acting series I've been taught various ways to be present in the moment – to be fully in the room while in rehearsals, scene work, and performances. It has also been emphasized that we as actors need to work from wherever we are in the moment – that that place is the perfect place for us to work from on any given day. We can't get caught up in our limitations, rather, we need to use them to

our own advantage. The last point really comes down to empathy, which some might say is what theatre is all about. Actors need to have empathy for other human beings, however different they might appear to be. It is our job to find the ways that we're similar, and to understand our character's point of view – whether we condone it or not.

Based on my research and personal experience, I would describe a healthy relationship with mental health to be one in which emotions are acknowledged, felt, and allowed to breathe, in which you work *with* your limitations rather than against them, and allow others to do the same. I am on my own journey towards forging that relationship with my own mental health, and I am grateful for the lessons I've learned in the acting series. When I started as a college sophomore, I held the view that I was not a happy person. Inside, I was all torn up, and knotted, and blocked, and letting out *any* emotions while acting felt extremely forced – if I felt anything at all. The first professor I had in the series, Jim Lortz, gave me a nudge in the right direction, but mentally, I couldn't figure out how to release my own anxiety and negative outlook. In the next class – a more physically based class in which we learned to let our bodies do the work (independently at first and eventually in *tandem* with the mind), I started to get an inkling, some idea that I was holding some emotion back and therefore holding myself back, but it didn't truly land with me until my third acting class, which focused on Linklater vocal technique.

Going into this class I had been told (wrongly) that it wasn't so much an acting class as it was a speaking class. And it is true that during the first half of the class, we were working strictly on vocal and breathing technique, and hadn't quite connected that part with our imaginative acting minds. But eventually, when sharing a poem with the class, my instructor Evan Mueller asked me how I felt about it. I didn't know. I hadn't thought about it. I said, I felt sad – and it *was* a sad poem, but soon enough it clicked that however sad the poem might have been, I wasn't

sad about it. I was mad. I was angry that the man had left her waiting for him all those years, that she waited for nothing, aching for the rest of her life, still holding onto hope that he might some day come back. I related to this poem quite a bit, and the realization that I was angry let loose a floodgate of emotions I hadn't been letting myself feel in my personal life. And when you don't let yourself feel your own emotions for yourself, there's no way you'll be able to find emotional life in a portrayal of a character. Confronting feelings you've done your best to clamp down on, or have even completely repressed, is a scary thing. As Barton says in the last chapter of his book, "you may have tried very hard to ignore it or reject it. Or you may have judged it, abused it, and cursed it for stopping you" but it's still *there*, and that would sour anyone's mental health (Barton 116). This is a problem that hinders acting, but it also hinders an individual's well-being in their everyday life – and in my circumstance, it was revealed to me because of my acting training, because it is also our job to ask *ourselves* where we are emotionally. If it weren't for the acting series, I'm not sure when I would have learned that.

Acting isn't therapy. It isn't the be-all-end-all for dealing with one's mental health either, but the reason why theatre is so important to me is because I see it as a means to build connections between people. Mental illness isolates you. It makes you feel alone and unique in the worst possible way. It can beat you down to the point that basic daily functions can seem almost unbearable. But acting technique is rife with coping mechanisms and I feel that in learning how to act through the program at Western, I've learned a little bit more about being a functioning person in society as well, moving with my mental illness, not against it. By training in acting I have intrinsically been working on attaining skills or states of being that are beneficial to my mental health. Having gone through the entire acting series at Western, from the 200's through the 400's, and with college graduation on the horizon, I'd like to keep the words of Saul

Katzubei in mind: “At a certain point it’s time to trust you have it, let go of thinking about, and deal with the circumstances you find yourself in” (Katzubei). As much as this is about acting technique, it also seems to be true to everyday life. It’s time to breathe deeply. It’s time to feel strongly. It’s time to let myself take risks. And I learned that from acting.

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