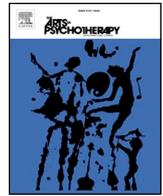




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Thawing out: Therapy through theatre with Canadian military veterans

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ABSTRACT

This article explores *Contact!Unload*, a theatre project in which military veterans, with the support of artists, community members, and counsellors, performed what it means to transition back to civilian life after serving their country. The play features therapeutic enactment, an approach to addressing psychological injuries veterans might face while serving. Various iterations of the play have been performed across Canada and the UK, each featuring a minimum of four veterans. Through extensive interviews with veterans who performed in the production, this article unpacks how creating, rehearsing, and performing in *Contact!Unload* contributed to personal change. Their goal of participating in the play was focused on helping other veterans who might be suffering from posttraumatic stress injuries, showing successful approaches to coping with service related trauma. However, an unexpected discovery during the theatre process was how their engagement with art-making and performing extended their own therapy, leading to significant personal changes for a number of the performing veterans.

Introduction

This article draws on extensive interviews and post-production group debriefing sessions with veterans who participated in a theatre project designed to foster increased awareness and understanding of the mental health needs of veterans facing difficult transitions to civilian life. The authors closely examine the veterans' experiences of co-creating and performing in the play *Contact!Unload* (Lea, Belliveau, & The Company, in press) to better understand how and why engaging in theatre-making might be therapeutically significant. All of the interviewed veterans experienced moments of change during the theatre project; however, one of the veterans, Tim,¹ seems to have benefited most from this arts-based experience in terms of releasing trauma and developing further coping mechanisms. His narrative is therefore centrally featured in this article, supported by the distinct experiences of the other five veterans.

Transitioning home

Over the last decade, thousands of military veterans from Australia, Canada, Europe, UK, and the US have returned from deployments in

places of conflict. According to Balfour and Stewart (2015), between “18% and 30% of those returning from war zones to civilian life can be expected to suffer from mental health issues” (p. 87). Specific to Canada, as of August 2018, 601,000² Canadian Forces veterans living today have served in foreign and domestic operations (Veterans Affairs Canada, 2018) including in Cyprus, the Democratic Republic of the Congo, Somalia, and the former Yugoslavia, as well as conflicts in Afghanistan, Iraq, Libya, and Mali (<http://www.veterans.gc.ca>). These numbers represent people whose lives were entwined with military service and therefore are at risk of suffering from mental health issues during training, active duty, and transition to civilian life.

Military-related trauma is linked to psychiatric disorders such as posttraumatic stress disorder (PTSD) and depression (Cox et al., 2014; Rundell & Ursano, 1996). While military-related PTSD has received a great deal of media attention, members of the Canadian Forces are three times more likely to experience depression than PTSD as they transition home post-deployment (Cox et al., 2014; Sareen et al., 2007). These statistics highlight the needs that veterans in transition require. A range of therapeutic services, including creative multi-modal treatments extending beyond traditional individual counselling settings, have emerged to address these needs. The Veteran's Transition Program

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¹ This research was approved by the University of British Columbia Behavioural Research Ethics Board # H15-00111. All veterans who were interviewed gave consent for video, still shots, and use of their names.

² This does not include veterans of World War II and the Korean War.

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(VTP) developed by Drs. Marv Westwood and David Kuhl is an example of such a service (see <https://vtncanada.org>).

The VTP uses a retreat-based approach that combines peer support, psychoeducation, emotion regulation skills training, and therapeutic enactment (Westwood & Wilensky, 2005) to combat depression and posttraumatic stress symptoms (PTSS), and better equip veterans for civilian life. The results of a quantitative evaluation of the VTP (Cox et al., 2014) demonstrate the effectiveness of this program, specifically for reducing depressive symptoms and PTSS. Cox et al. report a statistically significant change in depressive symptoms and secondary changes in the severity of some PTSS, such as numbing and isolation. As of August 2018, over 900 veterans participated in the VTP, with none of the participants dropping out of treatment, which is atypical for groups of clients coping with trauma (Sloan, Bovin, & Schnurr, 2012). Finally, as of this writing, no graduate of the VTP has died by suicide, a significant result considering veterans are up to four times more likely to die by suicide than civilians (Belik, Stein, Asmundson, & Sareen, 2010).

Critical to the VTP's success is its unique ability to facilitate the rapid formation of tight-knit groups of veterans. In 100 hours over the course of three weekends, the VTP fosters social support among group members and paraprofessionals (veteran graduates who return to help support new clients). This community building helps address the loss of the military community, re-forged soldier-soldier bonds, and mediate depressive symptoms. Graduates of the VTP, who might otherwise withdraw from socializing, engage with newly-honed helping and communication skills and renewed motivation to connect with others (Cox, Black, Westwood, & Chan, 2013). The action-based core of the VTP is therapeutic enactment (TE), a sophisticated fusion of Gestalt, drama, and sensorimotor therapies. In a TE, under the guidance of group therapists and peer support workers, traumatic memories of group members are physically re-enacted, allowing witnessing, processing, and a reclaiming of participants' power (Westwood & Wilensky, 2005).

Research on the VTP shows us that this structured group treatment works (Cox et al., 2014), and that this program helps veterans to improve with a variety of transitional issues; however, the program can only take returning soldiers so far with personal change. A gap exists between graduating from the VTP and the transition back to civilian life, in that some veterans, including some participants in this study, continue to wrestle with complex difficulties including military-related trauma, social avoidance, and other unique challenges.

Contact!Unload (Lea et al., in press), a fusion of theatre and group therapy with veterans, helped fill this gap. The development of the theatre initiative began in January 2015, when a group of military veterans, civilian actors, and psychotherapists met to create a play that shares stories of war, psychological wounds, and the difficulties of transitioning home (Belliveau, 2017). The play was devised, rehearsed, and performed by veterans. After an initial two-month period of group brainstorming and playbuilding, a script (led by Lea) was drafted, and the group began a month-long rehearsal process, exploring the text, blocking the onstage movement of the actors, and further distilling elements of the script. As of this writing, *Contact!Unload*, has been performed by a cast of veterans (with civilians in supporting roles) 25 times, reaching over 3,000 audience members between 2015 and 2017.

Participants and process

Analysis of the various impacts of this project (including on the audience) have been conducted through the initial devising and performance as well as subsequent iterations (e.g., Belliveau & Nichols, 2017). To examine specifically the impacts on the veteran members of the team, this article draws on interviews and focus groups. Six male veterans from *Contact!Unload* (ages 25–55 years) agreed to participate in individual interviews, with set questions, lasting between 30–45 minutes. These interviews were conducted by McLean. Four were Canadian Forces veterans and two served in militaries from other

countries. Four of the six reported dealing with some form of military-related trauma. All six veteran participants successfully completed the VTP prior to taking part in *Contact!Unload*. Four participated in the devising and creation of the project during the initial phase in the winter/spring of 2015, and all six performed in the play in one or more of its subsequent iterations. Only one of the participants performed in all 25 productions; the others have appeared in 3 to 20 performances.³

After the first two iterations of the play (April 2015 and November 2016), moderated post-production group debriefing sessions were held with performing veterans and other members of the cast and creative team. These sessions were over two hours in length and facilitated by Dr. Marv Westwood. All of the interviews and debriefing sessions were recorded.

The first step in analyzing the collected data was to transcribe approximately three hours of interviews and five hours of debriefing sessions. As the somatic and action-based core of the VTP is informed by Gestalt, drama, and sensorimotor therapies (Westwood & Wilensky, 2005), McLean and Belliveau drew on these approaches to engage in a narrative analysis (Arvey, 2003) of the transcribed data. As these modalities emphasize somatic exploration, emotional embodiment, and meaning-making, they searched the transcripts for markers of therapeutic significance in which participants:

- 1) noted their physical experience,
- 2) shared their inner world, including emotionality, their stories about relationships and social-connection, and
- 3) meaningful events over the course of the production.

McLean and Belliveau read the narratives for material falling under two umbrella themes:

meaning – descriptions of events that held meaning for each veteran; and

change – stories about personal changes, during or after the production, including those that were positive, neutral, or difficult for veterans.

In the analysis, all veteran self-reporting that referenced their personal experience of *Contact!Unload* was separated from other conversation and banter, leaving approximately two and a half hours of interviews forming the narrative data pool from which we distilled the insights below. From this data set, seven second-level themes were distilled, which are discussed in the following section.

Insights from the data

Motivations

Some veterans were motivated to take part in the play based on their interest in the theatre; however, most of them expressed the following motivations: educating the public, influencing government policy, informing fellow veterans about mental health, telling their war and transition stories to family and friends for the first time, and recruiting veterans in need of treatment to the VTP. All of the veterans who participated in the project were selected from a purposeful sample of graduates from the VTP and having gone through the drama therapy-influenced TE would have some familiarity and comfort with theatre and drama approaches. Many of the reasons veterans gave for participation were externally focused, viewing taking part as a form of “service,” with an emphasis on giving back to other veterans:

Chuck: *Hopefully we'd make a difference ... [to] one young soldier ... I*

³ The current study was not designed to determine if there were differences in the impact of the program on the veterans depending on the number of performances in which they took part. This is an area for future study.

wanted one vet [to seek help after seeing the play]. I would have been happy with that.

Civilians who participated in the theatre project expressed being drawn to this initiative for similarly altruistic reasons – to make a difference. It is clear that the majority of the participants were not there for therapy, per se; however, as discussed later, in unanticipated ways the theatre experience offered a strong therapeutic element fostering the personal change reported in the interviews and debriefs.

Unwelcome change

Not all changes veterans underwent during the theatre process were comfortable, at least in the short term.⁴ Two of the veterans report becoming more consciously aware of past traumas:

Chuck: *Other things in my life are coming back up that I haven't thought about, people dying in emergency rooms and motor vehicle accidents, which is the other part of my life, and it's like, fuck, that stuff I haven't thought about.*

Warren: *the other side of it um, is the awakening of all these old emotions. ... Memories and emotions you know and ... also my service. ... Stuff that I don't want to remember.*

Chuck and Tim speak further about an incursion of dreams and sleep disturbances:

Tim: *I'm going to say I am in a better place even though I don't feel like it now, just because I'm so tired. I haven't been sleeping ... my dreams just wake me up. There's nights where I don't have nightmares, I just have really vivid dreams ... in my experience what happens when you're okay is that more things that need to be dealt with um, just spring up. You can handle more so you get more.*

Chuck: *the fucking dreaming started for me again. I get, I don't remember my dreams. ... It drove me crazy, to the point where I thought I was going crazy. Now I'm just like ah fuck not again, okay.*

From a Gestalt perspective, change processes are non-linear and discomfort may or may not indicate a setback (Perls, 1951). Both Chuck and Tim speak to how, despite their discomfort, they noticed that they are moving forward, hinting at their increased capacity to tolerate and work with material from past trauma. Additionally, this risk was known to the veterans and seen as part of the sacrifice of participation. As one of the participating veterans wrote elsewhere:

Like *Contact!Unload*, three principles guided veterans: Mission first, Men second, Self last. Your Mission if you chose to accept it is to help others. One of our ways of helping was to share our stories with audiences, including other veterans. (Mackinnon, in press)

Embodied trauma

In sensorimotor psychotherapy (Ogden & Fisher, 2015), embodied trauma is attributed to unfinished business in the body and the brain because of thwarted action during a traumatic experience, during which a person's attempt to defend themselves in the face of annihilation (real or imagined) proves ineffective. This incomplete action becomes unfinished business because a part of the person is always trying to complete the action in an attempt to prevent the trauma. Tim, a former army signaler, describes his headset as a "cage" in

Contact!Unload: "it's like you're wearing this trap, this cage on your head all the time" (Lea et al., in press). Through the headset he was exposed to the voices of soldiers in distress that he could neither block out, nor do anything to help aside from relaying their position and status to his officers. In Tim's interview he tells how it felt to block his ears with his hands during the play:

Tim: *What my body wants to do when ... when the gunfire [sound effects on stage] happens is to throw ... my hands over my ears and curl up in a ball, and so I did that and it felt good to be able to do that, to just, to do it.*

In *Contact!Unload*, Tim throws his hands up to protect himself, rather than suppressing the urge as he must do when he is triggered in public. The action is significant, given the nature of his trauma. In this case, he shuts out the loud noises of screaming and gunfire in the play while simultaneously completing the incomplete action of shutting out the sounds from his signaler's headset in the past. Ogden and Fisher (2015) argue that addressing thwarted self-protective attempts using defensive actions can help integrate trauma and empower individuals by allowing them to rebuild implicit trust in their defensive responses. It is significant that Tim emphasizes this action in his interview because a focal point of therapeutic change is embodied emotional experiencing and release, and the relief felt afterward. Before his dramatic change experience on stage, Tim recalls reporting to Janice Valdez, a dramatherapist and assistant director of the play:

Tim: *I voiced to her how uncomfortable I was in my body, like I just, I just felt awkward, I didn't know what to do with my body, didn't know where to put my hands.*

Tim goes on to describe how Valdez validated his action impulses and encouraged him to give himself permission to notice what his body wanted to do and to experiment with various movements (see Fig. 1). Tim talks about how this permission allowed him to act authentically, blocking his ears with his hands, thereby completing a defensive action and releasing pent up actions and emotions. This fits with the concepts of embodiment and play in the dramatherapy literature (Jones, 2007). Using her training, Valdez helped Tim to explore the ways his body, trauma experience, and impulses for self-preservation were entwined, working towards congruence between his impulses and a concrete physical gesture. She facilitated permission to experiment and play with various movements, some of which strongly resonated with him. Through this, Tim reports that connection between the play's content and his inner experience emerged.

Tim is adamant that for him, change did not occur consciously while performing, instead he felt the change in his body and in the here-and-now:

Tim: *There's no cognition. I wasn't thinking it's just being ... there was no thinking at all. It was purely being present in the moment and living those experiences that are my, my story, living those exact moments as I do, as I did.*

Tim describes experiencing himself more fully in the moment, which is commensurate with Gestalt change theory. Like sensorimotor psychotherapy and dramatherapy, Gestalt therapy emphasizes the full experience of the self in the present as a vehicle for personal change (Perls, 1992). Past trauma experiences must be "unloaded" and processed, or they will remain like a thorn in the side, demanding attention, steadily gaining power until an individual's life becomes markedly impacted by preoccupation, compulsive behavior, wariness, oppressive energy, and self-defeating behavior (Corey, 2012). Tim's words suggest that performing in *Contact!Unload* furthered the work he began through TE, as he speaks of a visceral embodied awareness in the here-and-now:

Tim: *I felt like more of a conduit than anything. That just, the, the experience was kind of just flowing through me ... I'm just in, in the flow. And that's what I mean when I say I felt like a conduit.*

⁴Throughout rehearsal and performances, all veterans were constantly monitored by therapists who frequently provided individual or group debriefing when the need arose. In addition to providing counselling, they also helped shape each step of the project. As of this writing, this project is being used as a case study for a paper examining ethical concerns that arise when combining theatre and therapy.



Fig. 1. Validating. From right to left, Dr. Marv Westwood, Tim, and Janice Valdez. Photo by Blair McLean. Used with permission.

His description of being in the flow aligns with the Gestalt notion of tapping into the awareness continuum, an in-the-moment experiencing of whatever is most pertinent for an individual's growth and change (Perls, 1992). Allowing his experience to flow through him, Tim appears to create a new body memory that might help him better cope with embodied trauma:

Tim: *Having the experience of just letting it flow through me has allowed me to realize that it can flow through me and when things are overpowering, they're overpowering but I don't need to stay stuck in it.*

Along with the flow, Tim reports physical and energetic experiences in his body:

Tim: *Every cell in my body was vibrating, and not like I'm cold shaking but like, almost imperceptible but like, my clothes were, I was vibrating.*

Vibration may be an indicator of change for Tim. His heightened awareness of vibration loads this sensation with meaning. It is also clear that the vibration experience is non-cognitive and occurring within the body, which may help to pinpoint the location of change. This phenomenon does not appear in the literature that we reviewed for this study and warrants further investigation.

Thawing out

Although not the focus of this article, our field notes of the interviews and focus groups highlighted distinct body language, specifically how the veterans displayed considerable emotions in their facial expressions, body movements, and postures.⁵ These observations reveal examples that help us better understand how participating in an embodied modality such as theatre contributed to personal change, beginning with Tim's description of the personal cost of holding pent-up emotion:

Tim: *I've never been able to uh, authentically embody emotion, even with like the VTP, with all of that stuff, it's always talking ... and whatever I am not letting out gets repressed and becomes anxiety ... I just was reflecting what was going on but not releasing anything.*

Through the development and performances of the play, Tim gained new awareness and granted himself permission to let the emotion go:

Tim: *It was okay to embody the emotion. I didn't know I needed the permission. I didn't have awareness around the fact that I had never*

embodied it.

Then came a dramatic shift with the outpouring of emotion, like a dam bursting, during Tim's "rant" on stage (see Fig. 2). The rant was adapted by Lea into the script from Tim's own words:

People all around me. But it's not real. None of it's real. Going fucking shopping. Hundred dollar shoes, thousand dollar purses. They don't have a clue. Who cares if your fucking Starbucks coffee's not 180 fucking degrees. FUCK. It's not real. Afghanistan's real. It's something. When I'm there, I'm something. I'm alive. When I'm here I'm just dead inside. (Lea et al., in press)

Tim recalls that as he performed the rant:

Tim: *I didn't have to think about my lines, I didn't think, I wasn't thinking at all. It just kind of came out ... It was like I was a fuckin' emotion, an emotional beacon. I just had that emotional energy radiating out of every pore.*

And the result:

Tim: *I felt uh, lighter. And I attribute that to just not holding anything, any emotion ... it's easier to speak my truth and it's easier to live my truth because embodying the emotion is just as important as speaking the emotion.*

Tim experienced a profound change in himself related to emotional release. This might be partially explained by the psychodramatic concept of catharsis (Moreno & Fox, 1987): the expression or release of emotions resulting in a sudden shift in perception and the acquisition of insight. As Tim explains, his perceptual shift was one of embodying emotion, of connecting the outpouring of emotion to the physical experience of the body, as opposed to talking about emotions. Giving permission to the impulse to physically experience emotion facilitates access to implicit memories, and transformative knowledge is accrued by tapping into a felt sense of the wisdom of the body (Westwood & Wilensky, 2005). In Tim's case, the performance of long dormant actions, culminating in emotional and physical expression, seems to have fostered a profound change and allowed him to process and integrate implicit memories related to his trauma. He thawed out.

Nobody told me I was a monster

Tim described feeling anxiety before the first performance, and the public sharing of his trauma. But the witnessing of the audience during the presentations of *Contact!Unload* was transformational for him, deepening and solidifying a change Tim had begun to make during his time in the VTP. This change involved rewriting the core belief, "I am a monster," scrawled on his soul in the instant he learned he had inadvertently ordered the death of an allied informant in Afghanistan. Tim's lived experience of relaying the go ahead to eliminate what was perceived as an enemy during a fire-fight is a key scene in *Contact!Unload*. In the scene, audiences witness Tim trying to save injured Canadian soldiers lying on the ground. Through radio interaction, he was led to believe that an informant who was trying to help the soldiers was an enemy target that needed to be eliminated before the wounded could be rescued.

In the VTP, Tim accessed his trauma through his body and began to internalize empathy and forgiveness from other group members, fellow veterans, who acknowledged the extent of how terrible Tim's situation was, without labelling him a terrible person. This was the beginning of his healing process. The next step was perceiving additional acceptance, this time from civilians and family while he was physically activated during performances of *Contact!Unload*.

Tim: *Nobody told me I was monster. There was no negative anything. Everyone was thanking me ... along those lines of, of, that's brave, you're, thank you ... By doing all these things and puking my story all over a bunch of people.*

⁵ McLean (2017) explores some of the body language of the veterans during the interviews and focus groups. A documentary of the interviews by McLean is available for viewing: <https://youtu.be/eebJ8ery3v8>



Fig. 2. FUCK. Tim. Photo by Blair McLean. Used with permission.

In the case of Tim, a soldier experiencing alienation after serving his country, the audience witnesses and helps to bear responsibility for the actions he regrets. The witnessing, and to a certain degree, acceptance and forgiveness of the audience, allowed Tim to reframe a core belief and continue his healing process.

Never alone, social-connectedness

As researchers, we initially assumed that, given some of the participants' experiences of acute trauma, they would rather be anywhere but in a war zone. On a few occasions during the development of *Contact!Unload* several veterans indicated that they would elect in an instant to go back overseas to fight. We learned that this can be partially explained by the loss of adrenaline-charged experiences, as is depicted in the play. The veterans also characterized the friendships they developed in service with feelings of absolute trust. Losing those relationships is extremely difficult and seems to play a significant role in veterans' difficult transitions back to civilian life. Dale describes the importance to him of social-connectedness in the military:

Dale: *You work and train alongside the same guys day in and day out and then on your time off you end up hanging out with the same guys, because they're your friends. It's a bond that, next to family, I can't think of anything that comes close.*

An enormous challenge for those who come back is to replace this unique social-connectedness of the military community. Often veterans elect to spend time with other veterans but, despite the hard work of organizations like the Canadian Legion, opportunities for veteran community building remain few and far between. *Contact!Unload*, similar to the group approach of the VTP, filled this gap for its participants, at least over the course of the months of the play. Luke uses the metaphor of a "fire team" to describe his experience of bonding with the other veterans while performing *Contact!Unload*:

Luke: *It's like, a fire team really, we're a fire team right, which is a, which is your smallest, tightest group within the military ... You're digging the trench together. You're literally sleeping in a bivvy [sleeping bag] next to a guy, you know, back to back or whatever, you know, two guys on sentry, two guys sleeping ... it's the tightest bond you got.*

The bond is particularly tight in a fire team because at any moment they could be under fire. This metaphor speaks to the unique combination in the play of fostering friendships, working hard to prepare for performances, and the adrenaline rush associated with performing in front of an audience. Without all these pieces, including time together, hard work, and nerves around the performance, the level of social-connectedness and purpose would likely not be as high. Stephen speaks to what having purpose with fellow veterans meant to him:

Stephen: *I was unhappy when I came back to Canada. I never really*

renewed that purpose that I had. What I enjoyed was having a purpose with people who are like-minded ... Everyone here [veterans and civilians] is exceptionally important to me ... This is one of those things that will stand out no matter what, and it's because of the people in this [play].

Stephen speaks about like-mindedness as if its presence is a fact. His certainty may partially be due to the unspoken bond that veterans share through a kind of club membership. The camaraderie between participants in this project was experienced rather than spoken. It was initiated through embodied empathy fostered by the group process and shared experience of play creation. Warren's experience is particularly congruent with this idea of new bond creation within the context of *Contact!Unload*. For him, acceptance was never a given:

Warren: *I'm not [a] Canadian veteran and I always felt like a bit of an intruder and I wasn't made to feel like that at all. It felt very, very awkward for me to be in at the beginning, very, very difficult. So I want to thank the veterans for accepting me ... They just accepted me with open arms and uh, and drew me in, it was fantastic, a great feeling, and I'll always be, I'll always have that feeling, I'll always cherish these guys.*

In this passage, Warren speaks explicitly about his experience of change. When he first met the group he saw himself as an outsider and by naming this in the group, he alerted the other veterans to his inner experience. In turn, they empathized with and supported him in such a way that his feeling changed to one of inclusion.

The interview and debriefing data highlight how participation in *Contact!Unload* helped to meet veterans' needs for social-connectedness. This echoes the larger unmet need for veterans in transition for social connection. It also begs the question: how might new venues to help veterans connect in meaningful ways be established? Theatre, for example, creates a space to foster social connection between veterans and civilians in the community, particularly if it includes post-show discussions and social gatherings, as *Contact!Unload* attempted to do. The project included a relatively long-term (4 month) development, rehearsal, and production format, in which veterans and civilians worked toward a shared goal, performing in a group in front of an audience (see Fig. 3). This too facilitates veteran transition and integration by bringing together population groups, veteran and civilian, that might not otherwise interact. Such communion between civilians and veterans may help veterans unlearn mistrust and learn they do not have to restrict themselves to veterans' groups only.

Personal mastery and reconstruction of identity

Theatre has the potential to develop a variety of important skills including leadership, personal mastery, competence, and the expansion of identity through the development of trust in one's ability to create, collaborate, and perform (Beare & Belliveau, 2007). Veterans who



Fig. 3. Curtain Call. Photo by Foster Eastman. Used with permission.

suffer from trauma often experience significant barriers to such skill development. Chuck, who lives with PTSD offers an example of theatre unlocking a door:

Chuck: *I had lost creativity. I had lost the, the want, the desire to be on stage. [VTP] brought it back and this [play] fostered it beyond my dreams. I just, years ago dreamed that maybe one day I would be on stage and, shit, there we were.*

From his experience with the play, it seems that Chuck will take with him a renewed internal understanding for his capacity for creativity as well as his ability to perform on stage. Warren speaks to how performing increased his confidence in himself:

Warren: *It's given me that, a lot more confidence. You know you're up in front of people and speaking to people ... the performance anxiety died down ... and the confidence went way up.*

Warren's newfound confidence is an indicator of personal and interpersonal mastery reinforced by his experience of standing in front of the audience and skillfully communicating. Theatre performance, in this case, may be seen as a form of behavioral rehearsal whereby participants practice communicating their authentic inner experiences to others in ways that might have been difficult in the past. The more Warren practiced and was exposed to discomfort in the situation, the more his mind and body knew that he could do it again in the future. This led to an increase in confidence.

Dale suggests that sharing autobiographical stories of military-related trauma not only provided relief but increased his sense of self-efficacy in his abilities to process these experiences:

Dale: *Having these stories ... inside and not talking about them is, is poisonous I think, it, it um, it makes everything so much worse ... Writing about it – taking that experience and putting it onto paper, I find it's almost a dropping of baggage. It's an unburdening of that story. And then reading it to a group of strangers, um it's possibly the best thing I've done ... for my own self.*

In sharing his personal stories of trauma through writing and performance, Dale mastered a new resource for “dropping baggage.” Rather than a veteran “poisoned” by holding trauma in, Dale's words suggest the construction of a new identity: a veteran capable of combating trauma with expression and storytelling.

The confidence to express themselves continued beyond the production into the post-show discussion, where each of the veterans was able to share positive turning points in their therapeutic journey. The post-show discussion was carefully guided by psychologist Dr. Marv Westwood, where he would invite each veteran to share thoughts about using the arts within their therapeutic healing. This transition from the fictional world of the play to the veterans sharing their personal responses led to questions and comments from the audience.⁶

Discussion and conclusion

The role-play and embodied storytelling the veterans engaged in during their initial VTP experience provided experience with theatre-based approaches, setting the stage for the collective creation process that led to *Contact!Unload*. The veterans may also have been motivated to take part due to the relationships established during the group therapy process, as many of the counselling team members from the

VTP took part in rehearsals and performances. We are aware that this study explores the change narratives of a limited number of participants, as such we make no claims that our findings and insights are generalizable. However, two recent theatre-based projects with veterans found similar insights of release and change narratives. O'Connor (2015) describes the impact of a 3-month project with veterans in Wales who brought difficult narratives of trauma in *Abandoned Brothers*. The theatre initiative inspired the veterans, and some of their family members, to form “a support group, which meets every week. They run it themselves, have recruited more members ... [and have created] a place for healing and peace where a lot more stories will be told” (p. 159). Hassall and Balfour (2016) document the positive growth of Australian veterans working on *The Difficult Return*, a research-based play on which some scenes in *Contact!Unload* are based. A number of the veterans who participated in the 6-month theatre initiative in Brisbane reported that they were able to release some of their combat-related trauma and move forward in their lives in positive ways due to personal insights gained from participating in the theatre-based project (Hassall, 2014).

Our next step is to take the therapeutic and theatrical framework developed for *Contact!Unload* to different communities across Canada. In collaboration with counsellors and professional theatre artists in Edmonton, Toronto, Kingston, and Halifax, we are developing opportunities to expand the reach of the project so veterans in those cities can share their own stories of combat stress. As this current project featured only veterans who identify as male, future iterations developed from this framework might also consider mixed-gender casts or casts of veterans who identify as female. The objective is to help the participating veterans extend their healing and recovery from operational stress injuries incurred in the line of duty and, equally important, to raise public awareness on a national scale about the issues soldiers bring back when they return. The lessons learned and feedback received during *Contact!Unload* (Belliveau & Nichols, 2017; Lea, Belliveau, & Westwood, 2018) will enable a more informed implementation process in these other communities. As one example, we are developing a more systematic evaluation process that will be built into the production, to better measure audience impacts through use of various approaches including electronic clickers (e.g., iClicker, see <https://www.iclicker.com/>). These devices allow audience members to provide immediate responses to Likert-style questions raised during pre- and post-show discussions.

This study suggests that therapy through theatre facilitates a multi-modal change process making use of experiential, action-oriented, body-based, social, behavioral, developmental, narrative, and emotional mechanisms. But despite its therapeutic potential, the theatre remains underutilized by counsellors for reasons including confidentiality and ethical constraints, entrenchment in conventions such as talk-therapy, funding structures, and the unfamiliarity of many counsellors with play creation and the arts. *Contact!Unload* demonstrates a model as to how a careful exploration of progressive therapeutic paradigms, combined with a collective play-creation process, may yield positive outcomes for participants.

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⁶ In one particular post-show discussion, we did not allow enough time between the end of the play and the discussion. As a result, one of the performing veterans who had been activated during the performance did not have an opportunity to re-regulate prior to the post-show talk. This triggered a response to a question that was inappropriate. From this incident, we learned how important it is for the veterans to have literal and metaphoric breathing space between the play and the post-show discussion.

along with Dr. George Belliveau, have spearheaded this unique experience.

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