

20. FINDING YOUR VOICE: COMMUNAL RHYTHMS AND THEATER

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M CHAPTER 20 FINDING YOUR VOICE: COMMUNAL RHYTHMS AND THEATER

Acting is not about putting on a character but discovering the character within you: you are the character, you just have to find it within yourself—albeit a very expanded version of yourself.

—Tina Packer

any scientists I know were inspired by their children's health problems to find new ways of understanding mind, brain, and therapy. My own son's recovery from a mysterious illness that, for lack of a better name, we call chronic fatigue syndrome, convinced me of the therapeutic possibilities of theater.

Nick spent most of seventh and eighth grade in bed, bloated by allergies and medications that left him too exhausted to go to school. His mother and I saw him becoming entrenched in his identity as a self-hating and isolated kid, and we were desperate to help him. When his mother realized that he picked up a little energy round 5:00 p.m., we signed him up for an evening class in improvisational theater where he would at least have a chance to interact with other boys and girls his age. He took to the group and to the acting exercises and soon landed his first role, as Action in West Side Story, a tough kid who's always ready to fight and has the lead in singing "Gee, Officer Krupke." One day at home I caught him walking with a swagger, practicing what it was like to be somebody with clout. Was he developing a physical sense of pleasure, imagining himself as a strong guy who commands respect?

Then he was cast as the Fonz in Happy Days. Being adored by girls and keeping an audience spellbound became the real tipping point in his recovery. Unlike his experience with the numerous therapists who had talked with him about how bad he felt, theater gave him a chance to deeply and physically experience what it was like to be someone other than the learning-disabled, oversensitive boy that he had gradually become. Being a valued contributor to a group gave him a visceral experience of power and competence. I believe that this new embodied version of himself set him on the road to becoming the creative, loving adult he is today.

Our sense of agency, how much we feel in control, is defined by our relationship with our bodies and its rhythms: Our waking and sleeping and how we eat, sit, and walk define the contours of our days. In order to find our voice, we have to be in our bodies—able to breathe fully and able to

access our inner sensations. This is the opposite of dissociation, of being “out of body” and making yourself disappear. It’s also the opposite of depression, lying slumped in front of a screen that provides passive entertainment. Acting is an experience of using your body to take your place in life.

THE THEATER OF WAR

Nick’s transformation was not the first time I’d witnessed the benefits of theater. In 1988 I was still treating three veterans with PTSD whom I’d met at the VA, and when they showed a sudden improvement in their vitality, optimism, and family relationships, I attributed it to my growing therapeutic skills. Then I discovered that all three were involved in a theatrical production.

Wanting to dramatize the plight of homeless veterans, they had persuaded playwright David Mamet, who was living nearby, to meet weekly with their group to develop a script around their experiences. Mamet then recruited Al Pacino, Donald Sutherland, and Michael J. Fox to come to Boston for an evening called *Sketches of War*, which raised money to convert the VA clinic where I’d met my patients into a shelter for homeless veterans.¹ Standing on a stage with professional actors, speaking about their memories of the war, and reading their poetry was clearly a more transformative experience than any therapy could have offered them. Since time immemorial human beings have used communal rituals to cope with their most powerful and terrifying feelings. Ancient Greek theater, the oldest of which we have written records, seems to have grown out of religious rites that involved dancing, singing, and reenacting mythical stories. By the fifth century BCE, theater played a central role in civic life, with the audience seated in a horseshoe around the stage, which enabled them to see one another’s emotions and reactions.

Greek drama may have served as a ritual reintegration for combat veterans. At the time Aeschylus wrote the *Oresteia* trilogy, Athens was at war on six fronts; the cycle of tragedy is set in motion when the returning warrior king Agamemnon is murdered by his wife, Clytemnestra, for having sacrificed their daughter before sailing to the Trojan War. Military service was required of every adult citizen of Athens, so audiences were undoubtedly composed of combat veterans and active-duty soldiers on leave. The performers themselves must have been citizen-soldiers. Sophocles was a general officer in Athens’s wars against the Persians, and his play *Ajax*, which ends with the suicide of one of the Trojan War’s greatest heroes, reads like a textbook description of traumatic stress. In 2008 writer and director Bryan Doerries arranged a reading of *Ajax* for five hundred marines in San Diego and was stunned by the reception it received. (Like many of us who work with trauma, Doerries’s inspiration was personal; he had studied classics in college and turned to the Greek texts for comfort when he lost a girlfriend to cystic fibrosis.) His project “The Theater of War” evolved from that first event, and with funding from the U.S. Department of Defense, this 2,500-year-old play has since been performed more than two hundred times here and abroad to give voice to the plight of combat veterans and foster dialogue and understanding in their families and friends.²

Theater of War performances are followed by a town hall–style discussion. I attended a reading of *Ajax* in Cambridge, Massachusetts, shortly after the news media had publicized a 27 percent increase in suicides among combat veterans over the previous three years. Some forty

people—Vietnam veterans, military wives, recently discharged men and women who had served in Iraq and Afghanistan—lined up behind the microphone. Many of them quoted lines from the play as they spoke about their sleepless nights, drug addiction, and alienation from their families. The atmosphere was electric, and afterward the audience huddled in the foyer, some holding each other and crying, others in deep conversation. As Doerries later said: “Anyone who has come into contact with extreme pain, suffering or death has no trouble understanding Greek drama. It’s all about bearing witness to the stories of veterans.”³

KEEPING TOGETHER IN TIME

Collective movement and music create a larger context for our lives, a meaning beyond our individual fate. Religious rituals universally involve rhythmic movements, from davening at the Wailing Wall in Jerusalem to the sung liturgy and gestures of the Catholic Mass to moving meditation in Buddhist ceremonies and the rhythmic prayer rituals performed five times a day by devout Muslims.

Music was a backbone of the civil rights movement in the United States. Anyone alive at that time will not forget the lines of marchers, arms linked, singing “We Shall Overcome” as they walked steadily toward the police who were massed to stop them. Music binds together people who might individually be terrified but who collectively become powerful advocates for themselves and others. Along with language, dancing, marching, and singing are uniquely human ways to install a sense of hope and courage.

I observed the force of communal rhythms in action when I watched Archbishop Desmond Tutu conduct public hearings for the Truth and Reconciliation Commission in South Africa in 1996. These events were framed by collective singing and dancing. Witnesses recounted the unspeakable atrocities that had been inflicted on them and their families. When they became overwhelmed, Tutu would interrupt their testimony and lead the entire audience in prayer, song, and dance until the witnesses could contain their sobbing and halt their physical collapse. This enabled participants to pendulate in and out of reliving their horror and eventually to find words to describe what had happened to them. I fully credit Tutu and the other member of the commission with averting what might have been an orgy of revenge, as is so common when victims are finally set free.

A few years ago I discovered *Keeping Together in Time*,⁴ written by the great historian William H. McNeill near the end of his career. This short book examines the historical role of dance and military drill in creating what McNeill calls “muscular bonding” and sheds a new light on the importance of theater, communal dance, and movement. It also solved a long-standing puzzle in my own mind. Having been raised in the Netherlands, I had always wondered how a group of simple Dutch peasants and fishermen had won their liberation from the mighty Spanish empire. The Eighty Years’ War, which lasted from the late sixteenth to the midseventeenth century, began as a series of guerrilla actions, and it seemed destined to remain that way, since the ill-disciplined, ill-paid soldiers regularly fled under volleys of musket fire.

This changed when Prince Maurice of Orange became the leader of the Dutch rebels. Still in his early twenties, he had recently completed his schooling in Latin, which enabled him to read 1,500-year-old Roman manuals on military tactics. He learned that the Roman general Lycurgus had introduced marching in step to the Roman legions and that the historian

Plutarch had attributed their invincibility to this practice: “It was at once a magnificent and terrible sight, to see them march on to the tune of their flutes, without any disorder in their ranks, any discomposure in their minds or change in their countenances, calmly and cheerfully moving with music to the deadly fight.”⁵

Prince Maurice instituted close-order drill, accompanied by drums, flutes, and trumpets, in his ragtag army. This collective ritual not only provided his men with a sense of purpose and solidarity, but also made it possible for them to execute complicated maneuvers. Close-order drill subsequently spread across Europe, and to this day the major services of the U.S. military spend liberally on their marching bands, even though fifes and drums no longer accompany troops into battle.

Neuroscientist Jaak Panksepp, who was born in the tiny Baltic country of Estonia, told me the remarkable story of Estonia’s “Singing Revolution.” In June 1987, on one of those endless sub-Arctic summer evenings, more than ten thousand concertgoers at the Tallinn Song Festival Grounds linked hands and began to sing patriotic songs that had been forbidden during half a century of Soviet occupation. These songfests and protests continued, and on September 11, 1988, three hundred thousand people, about a quarter of the population of Estonia, gathered to sing and make a public demand for independence. By August 1991 the Congress of Estonia had proclaimed the restoration of the Estonian state, and when Soviet tanks attempted to intervene, people acted as human shields to protect Tallinn’s radio and TV stations. As a columnist noted in the *New York Times*: “Imagine the scene in Casablanca in which the French patrons sing “La Marseillaise” in defiance of the Germans, then multiply its power by a factor of thousands, and you’ve only begun to imagine the force of the Singing Revolution.”⁶

TREATING TRAUMA THROUGH THEATER

It is surprising how little research exists on how collective ceremonies affect the mind and brain and how they might prevent or alleviate trauma. Over the past decade, however, I have had a chance to observe and study three different programs for treating trauma through theater: Urban Improv in Boston⁷ and the Trauma Drama program it inspired in the Boston public schools and in our residential centers;⁸ the Possibility Project, directed by Paul Griffin in New York City;⁹ and Shakespeare & Company, in Lenox, Massachusetts, which runs a program for juvenile offenders called Shakespeare in the Courts.¹⁰ In this chapter, I’ll focus on these three groups, but there are many excellent therapeutic drama programs in the United States and abroad, making theater a widely available resource for recovery. Despite their differences, all of these programs share a common foundation: confrontation of the painful realities of life and symbolic transformation through communal action. Love and hate, aggression and surrender, loyalty and betrayal are the stuff of theater and the stuff of trauma. As a culture we are trained to cut ourselves off from the truth of what we’re feeling. In the words of Tina Packer, the charismatic founder of Shakespeare & Company: “Training actors involves training people to go against that tendency—not only to feel deeply, but to convey that feeling at every moment to the audience, so the audience will get it—and not close off against it.”

Traumatized people are terrified to feel deeply. They are afraid to experience their emotions, because emotions lead to loss of control. In contrast, theater is about embodying emotions, giving voice to them, becoming rhythmically engaged, taking on and embodying different roles.

As we've seen, the essence of trauma is feeling godforsaken, cut off from the human race. Theater involves a collective confrontation with the realities of the human condition. As Paul Griffin, discussing his theater program for foster-care children, told me: "The stuff of tragedy in theater revolves around coping with betrayal, assault, and destruction. These kids have no trouble understanding what Lear, Othello, Macbeth, or Hamlet are all about." In Tina Packer's words: "Everything is about using the whole body and having other bodies resonate with your feelings, emotions and thoughts." Theater gives trauma survivors a chance to connect with one another by deeply experiencing their common humanity.

Traumatized people are afraid of conflict. They fear losing control and ending up on the losing side once again. Conflict is central to theater—inner conflicts, interpersonal conflicts, family conflicts, social conflicts, and their consequences. Trauma is about trying to forget, hiding how scared, enraged, or helpless you are. Theater is about finding ways of telling the truth and conveying deep truths to your audience. This requires pushing through blockages to discover your own truth, exploring and examining your own internal experience so that it can emerge in your voice and body on stage.

MAKING IT SAFE TO ENGAGE

These theater programs are not for aspiring actors but for angry, frightened, and obstreperous teenagers or withdrawn, alcoholic, burned-out veterans. When they come to rehearsal, they slump into their chairs, fearful that others will immediately see what failures they are. Traumatized adolescents are a jumble: inhibited, out of tune, inarticulate, uncoordinated, and purposeless. They are too hyperaroused to notice what is going on around them. They are easily triggered and rely on action rather than words to discharge their feelings.

All the directors I've worked with agree that the secret is to go slow and engage them bit by bit. The initial challenge is simply to get participants to be more present in the room. Here's Kevin Coleman, director of Shakespeare in the Courts, describing his work with teens when I interviewed him: "First we get them up and walking around the room. Then we start to create a balance in the space, so they're not walking aimlessly, but become aware of other people. Gradually, with little prompts, it becomes more complex: Just walk on your toes, or on your heels, or walk backwards. Then, when you bump into someone, scream and fall down. After maybe thirty prompts, they're out there waving their arms in the air, and we get to a full-body warm up, but it's incremental. If you take too big a jump, you'll see them hit the wall.

"You have to make it safe for them to notice each other. Once their bodies are a little more free, I might use the prompt: 'Don't make eye contact with anyone—just look at the floor.' Most of them are thinking: 'Great, I'm doing that already,' but then I say 'Now begin to notice people as you go by, but don't let them see you looking.' And next: 'Just make eye contact for a second.' Then: 'Now, no eye contact . . . now, contact . . . now, no contact. Now, make eye contact and hold it . . . too long. You'll know when it's too long because you'll either want to start dating that person or to have a fight with them. That's when it's too long.'

"They don't make that kind of extended eye contact in their normal lives, not even with a person they're talking to. They don't know if that person is safe or not. So what you're doing is making it safe for them not to disappear when they make eye contact, or when someone looks at them. Bit by bit, by bit, by bit . . ."

Traumatized adolescents are noticeably out of sync. In the Trauma Center's Trauma Drama program, we use mirroring exercises to help them to get in tune with one another. They move their right arm up, and their partner mirrors it; they twirl, and their partner twirls in response. They begin to observe how body movements and facial expressions change, how their own natural movements differ from those of others, and how unaccustomed movements and expressions make them feel. Mirroring loosens their preoccupation with what other people think of them and helps them attune viscerally, not cognitively, to someone else's experience. When mirroring ends in giggles, it's a sure indication that our participants feel safe.

In order to become real partners, they also need to learn to trust one another. An exercise in which one person is blindfolded while his partner leads him by the hand is especially tough for our kids. It's often as terrifying for them to be the leader, to be trusted by someone vulnerable, as it is to be blindfolded and led. At first they may last for only ten or twenty seconds, but we gradually work them up to five minutes. Afterward some of them have to go off by themselves for a while, because it is so emotionally overwhelming to feel these connections.

The traumatized kids and veterans we work with are embarrassed to be seen, afraid to be in touch with what they are feeling, and they keep one another at arm's length. The job of any director, like that of any therapist, is to slow things down so the actors can establish a relationship with themselves, with their bodies. Theater offers a unique way to access a full range of emotions and physical sensations that not only put them in touch with the habitual "set" of their bodies, but also let them explore alternative ways of engaging with life.

URBAN IMPROV

My son loved his theater group, which was run by Urban Improv (UI), a long-standing Boston arts institution. He stayed with them through high school and then volunteered to work with them the summer after his freshman year in college. It was then that he learned that UI's violence prevention program, which has run hundreds of workshops in local schools since 1992, had received a research grant to assess its efficacy—and that they were looking for someone to head the study. Nick suggested to the directors, Kippy Dewey and Cissa Champion, that his dad would be the ideal person for the job. Luckily for me, they agreed.

I began to visit schools with UI's multicultural ensemble, which included a director, four professional actor-educators, and a musician. Urban Improv creates scripted skits depicting the kinds of problems that students face every day: exclusion from peer groups, jealousy, rivalry and anger, and family strife. Skits for older students also address issues like dating, STDs, homophobia, and peer violence. In a typical presentation the professional actors might portray a group of kids excluding a newcomer from a lunch table in the cafeteria. As the scene approaches a choice point—for example, the new student responds to their put-downs—the director freezes the action. A member of the class is then invited to replace one of the actors and show how he or she would feel and behave in this situation. These scenarios enable the students to observe day-to-day problems with some emotional distance while experimenting with various solutions: Will they confront the tormenters, talk to a friend, call the homeroom teacher, tell their parents what happened?

Another volunteer is then asked to try a different approach, so that

students can see how other choices might play out. Props and costumes help the participants take risks in new roles, as do the playful atmosphere and the support from the actors. In the discussion groups afterward students respond to questions like “How was this scene similar or different from what happens in your school?” “How do you get the respect that you need?” and “How do you settle your differences?” These discussions become lively exchanges as many students volunteer their thoughts and ideas.

Our Trauma Center team evaluated this program at two grade levels in seventeen participating schools. Classrooms that participated in the UI program were compared with similar nonparticipating classrooms. At the fourth-grade level, we found a significant positive response. On standardized rating scales for aggression, cooperation, and self-control, students in the UI group showed substantially fewer fights and angry outbursts, more cooperation and self-assertion with peers, and more attentiveness and engagement in the classroom.¹¹

Much to our surprise, these results were not matched by the eighth graders. What had happened in the interim that affected their responses? At first we had only our personal impressions to go on. When I’d visited the fourth-grade classes, I’d been struck by their wide-eyed innocence and their eagerness to participate. The eighth graders, in contrast, were often sullen and defensive and as a group seemed to have lost their spontaneity and enthusiasm. Onset of puberty was one obvious factor for the change, but might there be others?

When we delved further, we found that the older children had experienced more than twice as much trauma as the younger ones: Every single eighth grader in these typical American inner-city schools had witnessed serious violence. Two-thirds had observed five or more incidents, including stabbings, gunfights, killings, and domestic assaults. Our data showed that eighth graders with such high levels of exposure to violence were significantly more aggressive than students without these histories and that the program made no significant difference in their behavior.

The Trauma Center team decided to see if we could turn this situation around with a longer and more intensive program that focused on team building and emotion-regulation exercises, using scripts that dealt directly with the kinds of violence these kids experienced. For several months members of our staff, led by Joseph Spinazzola, met weekly with the UI actors to work on script development. The actors taught our psychologists improvisation, mirroring, and precise physical attunement so they could credibly portray melting down, confronting, cowering, or collapsing. We taught the actors about trauma triggers and how to recognize and deal with trauma reenactments.¹²

During the winter and spring of 2005, we tested the resulting program at a specialized day school run jointly by the Boston Public Schools and the Massachusetts Department of Correction. This was a chaotic environment in which students often shuttled back and forth between school and jail. All of them came from high-crime neighborhoods and had been exposed to horrendous violence; I had never seen such an aggressive and sullen group of kids. We got a glimpse into the lives of the innumerable middle school and high school teachers who deal daily with students whose first response to new challenges is to lash out or go into defiant withdrawal.

We were shocked to discover that, in scenes where someone was in physical danger, the students always sided with the aggressors. Because they could not tolerate any sign of weakness in themselves, they could not

accept it in others. They showed nothing but contempt for potential victims, yelling things like, “Kill the bitch, she deserves it,” during a skit about dating violence.

At first some of the professional actors wanted to give up—it was simply too painful to see how mean these kids were—but they stuck it out, and I was amazed to see how they gradually got the students to experiment, however reluctantly, with new roles. Toward the end of the program, a few students were even volunteering for parts that involved showing vulnerability or fear. When they received their certificate of completion, several shyly gave the actors drawings to express their appreciation. I detected a few tears, possibly even in myself.

Our attempt to make Trauma Drama a regular part of the eighth-grade curriculum in the Boston public schools unfortunately ran into a wall of bureaucratic resistance. Nonetheless, it lives on as an integral part of the residential treatment programs at the Justice Resource Institute, while music, theater, art, and sports—timeless ways of fostering competence and collective bonding—continue to disappear from our schools.

THE POSSIBILITY PROJECT

In Paul Griffin’s New York City Possibility Project the actors are not presented with prepared scripts. Instead, over a nine-month period they meet for three hours a week, write their own full-length musical, and perform it for several hundred people. During its twenty-year history the Possibility Project has accrued a stable staff and strong traditions. Each production team is made up of recent graduates who, with the help of professional actors, dancers, and musicians, organize scriptwriting, scenic design, choreography, and rehearsals for the incoming class. These recent grads are powerful role models. As Paul told me: “When they come into the program, students believe they cannot make a difference; putting a program like this together is a transforming experience for their future.”

In 2010 Paul started a new program specifically for foster-care youth. This is a troubled population: Five years after maturing out of care, some 60 percent will have been convicted of a crime, 75 percent will be on public assistance, and only 6 percent will have completed even a community college degree.

The Trauma Center treats many foster care kids, but Griffin gave me a new way to see their lives: “Understanding foster care is like learning about a foreign country. If you’re not from there, you don’t speak the language. Life is upside down for foster-care youth.” The security and love that other children take for granted they have to create for themselves. When Griffin says, “Life is upside down,” he means that if you treat kids in foster care with love or generosity, they often don’t know what to make of it or how to respond. Rudeness feels more familiar; cynicism they understand.

As Griffin points out, “Abandonment makes it impossible to trust, and kids who have gone through foster care understand abandonment. You can have no impact until they trust you.” Foster-care children often answer to multiple people in charge. If they want to switch schools, for example, they have to deal with foster parents, school officials, the foster-care agency, and sometimes a judge. This tends to make them politically savvy, and they learn all too well how to play people.

In the foster-care world, “permanency” is a big buzzword. The motto is “One caring adult—that’s all you need.” However, it is natural for teenagers to pull away from adults, and Griffin remarks that the best form of permanency for teens is a steady group of friends—which the program is

designed to provide. Another foster-care buzzword is “independence,” which Paul counters with “interdependence.” “We’re all interdependent,” he points out. “The idea that we’re asking our young people to go out in the world completely alone and call themselves independent is crazy. We need to teach them how to be interdependent, which means teaching them how to have relationships.”

Paul found that foster-care youth are natural actors. Playing tragic characters, you have to express emotions and create a reality that comes from a place of depth and sorrow and hurt. Young people in foster care? That’s all they know. It’s life and death every day for them. Over time, collaboration helps the kids become important people in one another’s lives. Phase one of the program is group building. The first rehearsal establishes basic agreements: responsibility, accountability, respect; yes to expressions of affection, no to sexual contact in the group. They then begin singing and moving together, which gets them in sync.

Now comes phase two: sharing life stories. They are now listening to one another, discovering shared experiences, breaking through the loneliness and isolation of trauma. Paul gave me a film that shows how this happened in one group. When the kids are first asked to say or do something to introduce themselves, they freeze, their faces expressionless, their eyes cast down, doing anything they can to become invisible.

As they begin to talk, as they discover a voice in which they themselves are central, they also begin to create their own show. Paul makes it clear the production depends on their input: “If you could write a musical or play, what would you put in it? Punishment? Revenge? Betrayal? Loss? This is your show to write.” Everything they say is written down, and some of them start to put their own words on paper. As a script emerges, the production team incorporates the students’ precise words into the songs and dialogue. The group will learn that if they can embody their experiences well enough, other people will listen. They will learn to feel what they feel and know what they know.

The focus changes naturally as rehearsals begin. The foster kids’ history of pain, alienation, and fear is no longer central, and the emphasis shifts to “How can I become the best actor, singer, dancer, choreographer, or lighting and set designer I can possibly be?” Being able to perform becomes the critical issue: Competence is the best defense against the helplessness of trauma.

This is, of course, true for all of us. When the job goes bad, when a cherished project fails, when someone you count on leaves you or dies, there are few things as helpful as moving your muscles and doing something that demands focused attention. Inner-city schools and psychiatric programs often lose sight of this. They want the kids to behave “normally”—without building the competencies that will make them feel normal.

Theater programs also teach cause and effect. A foster kid’s life is completely unpredictable. Anything can happen without notice: being triggered and having a meltdown; seeing a parent arrested or killed; being moved from one home to another; getting yelled at for things that got you approval in your last placement. In a theatrical production they see the consequences of their decisions and actions laid out directly before their eyes. “If you want to give them a sense of control, you have to give them power over their destiny rather than intervene on their behalf,” Paul explains. “You cannot help, fix, or save the young people you are working

with. What you can do is work side by side with them, help them to understand their vision, and realize it with them. By doing that you give them back control. We're healing trauma without anyone ever mentioning the word."

SENTENCED TO SHAKESPEARE

For the teenagers attending sessions of Shakespeare in the Courts, there is no improvisation, no building scripts around their own lives. They are all "adjudicated offenders" found guilty of fighting, drinking, stealing, and property crimes, and a Berkshire County Juvenile Court judge has sentenced them to six weeks, four afternoons a week, of intensive acting study. Shakespeare is a foreign country for these actors. As Kevin Coleman told me, when they first turn up—angry, suspicious, and in shock—they're convinced that they'd rather go to jail. Instead they're going to learn the lines of Hamlet, or Mark Antony, or Henry V and then go onstage in a condensed performance of an entire Shakespeare play before an audience of family, friends, and representatives of the juvenile justice system.

With no words to express the effects of their capricious upbringing, these adolescents act out their emotions with violence. Shakespeare calls for sword fighting, which, like other martial arts, gives them an opportunity to practice contained aggression and expressions of physical power. The emphasis is on keeping everyone safe. The kids love swordplay, but to keep one another safe they have to negotiate and use language.

Shakespeare was writing at a time of transition, when the world was moving from primarily oral to written communication—when most people were still signing their name with an X. These kids are facing their own period of transition; many are barely articulate, and some struggle to read at all. If they rely on four-letter words, it's not only to show they're tough but because they have no other language to communicate who they are or what they feel. When they discover the richness and the potential of language, they often have a visceral experience of joy.

The actors first investigate what, exactly, Shakespeare is saying, line by line. The director feeds the words one by one into the actors' ears, and they are instructed to say the line on the outgoing breath. At the beginning of the process, many of these kids can barely get a line out. Progress is slow, as each actor slowly internalizes the words. The words gain depth and resonance as the voice changes in response to their associations. The idea is to inspire the actors to sense their reactions to the words—and so to discover the character. Rather than "I have to remember my lines," the emphasis is on "What do these words mean to me? What effect do I have on my fellow actors? And what happens to me when I hear their lines?"¹³

This can be a life-changing process, as I witnessed in a workshop run by actors trained by Shakespeare & Company at the VA Medical Center in Bath, New York. Larry, a fifty-nine-year-old Vietnam veteran with twenty-seven detox hospitalizations during the previous year, had volunteered to play the role of Brutus in a scene from Julius Caesar. As the rehearsal began, he mumbled and hurried through his lines; he seemed to be terrified of what people were thinking of him.

Remember March, the ides of March remember:

Did not great Julius bleed for justice' sake?

What villain touch'd his body, that did stab,

And not for justice?

It seemed to take hours to rehearse the speech that begins with these lines. At first he was just standing there, shoulders slumped, repeating the

words that the director whispered in his ear: “Remember—what do you remember? Do you remember too much? Or not enough? Remember. What don’t you want to remember? What is it like to remember?” Larry’s voice cracked, eyes to the floor, sweat beading on his forehead.

After a short break and a sip of water, back to work. “Justice—did you receive justice? Did you ever bleed for justice’s sake? What does justice mean to you? Struck. Have you ever struck someone? Have you ever been struck? What was it like? What do you wish you had done? Stab. Have you ever stabbed someone? Have you ever felt stabbed in the back? Have you stabbed someone in the back?” At this point Larry bolted from the room. The next day he returned and we began again—Larry standing there, perspiring, heart racing, having a million associations going through his mind, gradually allowing himself to feel every word and learning to own the lines that he uttered.

At the end of the program Larry started his first job in seven years, and he was still working the last I heard, six months later. Learning to experience and tolerate deep emotions is essential for recovery from trauma.

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In *Shakespeare in the Courts*, the specificity of the language that is used in rehearsal extends to the students’ offstage speech. Kevin Coleman notes that their talk is riddled with the expression “I feel like . . .” He goes on: “If you are confusing your emotional experiences with your judgments, your work becomes vague. If you ask them, ‘How did that feel?’ they’ll immediately say: ‘It felt good’ or ‘That felt bad.’ Both of those are judgments. So we never say, ‘How did that feel?’ at the end of a scene, because it invites them to go to the judgment part of their brain.” Instead Coleman asks, “Did you notice any specific feelings that came up for you doing that scene?” That way they learn to name emotional experiences: “I felt angry when he said that.” “I felt scared when he looked at me.” Becoming embodied and, for lack of a better word, “en-languaged,” helps the actors realize that they have many different emotions. The more they notice, the more curious they get.

When rehearsals begin, the kids have to learn to stand up straight and walk across a stage unselfconsciously. They have to learn to speak so that they can be heard in all parts of the theater, which in itself presents a huge challenge. The final performance means facing the community. The kids step out onto the stage, experiencing another level of vulnerability, danger, or safety, and they find out how much they can trust themselves. Gradually the eagerness to succeed, to show that they can do it, takes over. Kevin told me the story of a girl who played Ophelia in *Hamlet*. On the day of the performance he saw her waiting backstage, ready to go on, with a wastebasket clutched to her belly. (She explained that she was so nervous she was scared she’d throw up). She had been a chronic runaway from her foster homes and also from *Shakespeare in the Courts*. Because the program is committed to not throwing kids out if at all possible, the police and truant officers had repeatedly brought her back. There must have come a point when she began to realize that her role was essential to the group, or perhaps she sensed the intrinsic value of the experience for herself. At least for that day, she was choosing not to run.

THERAPY AND THEATER

I once heard Tina Packer declare to a roomful of trauma specialists: “Therapy and theater are intuition at work. They are the opposite of

research, where one strives to step outside of one's own personal experience, even outside your patients' experience, to test the objective validity of assumptions. What makes therapy effective is deep, subjective resonance and that deep sense of truth and veracity that lives in the body." I am still hoping that someday we will prove Tina wrong and combine the rigor of scientific methods with the power of embodied intuition.

Edward, one of the Shakespeare & Company teachers, told me about an experience he'd had as a young actor in Packer's advanced training workshop. The group had spent the morning doing exercises aimed at getting the muscles of the torso to release, so that the breath could drop in naturally and fully. Edward noticed that every time he rolled through one section of his ribs, he'd feel a wave of sadness. The coach asked if he'd ever been injured there, and he said no.

For Packer's afternoon class he'd prepared a speech from Richard II where the king is summoned to give up his crown to the lord who has usurped him. During the discussion afterward, he recalled that his mother had broken her ribs when she was pregnant with him and that he'd always associated this with his premature birth.

As he recalled:

When I told Tina this, she started asking me questions about my first few months. I said I didn't remember being in an incubator but that I remembered times later when I stopped breathing, and being in the hospital in an oxygen tent. I remembered being in my uncle's car and him driving through red lights to get me to the emergency room. It was like having sudden infant death syndrome at the age of three.

Tina kept asking me questions, and I started to get really frustrated and angry at her poking away at whatever shield I had around that pain. Then she said, "Was it painful when the doctors stuck all those needles in you?"

At that moment, I just started screaming. I tried to leave the room, but two of the other actors—really big guys—held me