Voices of Pride: Drama Therapy with Incarcerated Women

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Abstract: This paper demonstrates how drama therapy assists incarcerated women in freeing themselves from internalized oppressive beliefs. In the context of a drug and alcohol treatment program for incarcerated women, the authors assist the women in building three distinct bridges to healing: a new relationship to one’s self, to other women, and to the community. Writing exercises, performance techniques, and group drama therapy empower women to express their diverse voices. As the women risk sharing their personal stories and journeys of recovery, they begin to actively envision a different future for themselves. The participants discover talents that offer them an opportunity to experience themselves in a different light, no longer bound by the stigma of being in prison.

Key Words: Addiction, domestic violence, drama therapy, family therapy, group therapy, incarcerated women, performance, poetry, psychodrama, recovery, role-play, substance abuse.
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Drama liberates us from confinement, be it socially or psychologically induced. The dramatic moment is one of emancipation. (Emunah, 1994, p. Xiii)

Introduction

In the context of a drug and alcohol treatment program for incarcerated women and their children, our intention as Drama Therapists is to assist women in freeing themselves from internalized oppressive beliefs about themselves and other women. Specifically, our goal is to help the women build three distinct bridges to healing: a new relationship to one’s self; a more compassionate understanding of other women facing similar struggles; and a new sense of being a valuable contributor to the greater community.

Writing exercises, performance techniques, and group drama therapy empower the women to express their diverse voices—the voices of women who are often not heard. This approach also encourages participants to experiment with new roles as successful, productive, and resourceful women. As they risk sharing their personal stories and journeys of recovery, they begin to actively envision a different future for themselves and their children. They discover new talents—as writers, artists, performers, MCs, and actors—and in doing so, they experience themselves in a different light, no longer bound by the stigma of their pasts or of being in prison. Furthermore, by taking performances into the larger community, the women are given the opportunity to bridge the gap between the ways incarcerated women are viewed by the public and the reality of their authentic struggles to overcome their addictions and traumatic pasts.
Project Pride

Project Pride is a residential drug and alcohol and co-occurring disorder treatment facility in the heart of West Oakland, California. It is a division of the East Bay Community Recovery Project. It houses approximately 40 mothers and 40 children, from infancy to 8 years old. The ages of the women range from 18 to 45.

Project Pride is organized to serve two different populations. It contracts with the State of California to provide a mother-infant program for prisoners of the California Department of Corrections (CDC). Approximately half of the population are prisoners serving the last portion of their sentences, from three months to several years. The other half of the population is comprised of what we call “Perinatal” clients, women who are referred from the community, through Child Protection Services (CPS), or are sentenced to residential treatment as an alternative to county jail.

The residents of Project Pride are extremely diverse in age, ethnicity, race, socio-economic backgrounds, culture, and addiction history. Approximately 17% of the clients are between the ages of 18-25, 48% between 26-35, and 35% between 36-48. Approximately 33% are African American, 26% white, 11% Hispanic, 5% Asian/Pacific Islander, 3% Native American, and 4-18% other or lack of data. In addition to differences in age and ethnicity there are also great variations in mental and emotional functioning and in education and literacy levels. This diversity is compounded even further by the fact that there is a wide spectrum of experience in relation to motherhood, domestic violence, past histories of sexual abuse and trauma, and involvement with husbands and boy friends with varying degrees of substance use and criminal behavior.
There are also various differences in cultural values, including what is tolerated in relationships and beliefs about child rearing.

Many of the women with whom we work suffer from co-occurring disorders. Some have been diagnosed with or have severe symptoms of depression, PTSD, eating disorders, occasional psychosis, and learning disabilities. Many of the “Perinatal” clients are on methadone treatment for heroin addiction or are being treated for mood or other mental disorders with medication. The women who come to us through the California Department of Corrections are not diagnosed with mental disorders. Prisoners who are diagnosed do not qualify for the Mother-Infant Program. Consequently, many of the women mask their mental health issues to be admitted to our program. While perhaps not severe, these clients also exhibit symptoms of PTSD, depression, anxiety, and other mental disorders.

Within the dynamics created by these variables, the women at Project Pride are in the process of grappling with themselves and each other as they work toward making sense of their past choices and choosing a new path for their future. As with any diverse group, their motivation for and commitment to making changes vary widely. Some of these women are learning, perhaps for the first time, how to be mothers and deeply desire a new and different life for themselves and their children, while others are facing more fear and resistance about making significant changes. All of them are preparing to reenter the community. Our intention as Primary Counselors and Drama Therapists is to support their growth at various levels and to assist them in expanding the roles they play in the world.
**Drama Therapy**

Drama therapy is a field of practice that has its roots in both psychotherapy and theater. Informed by psychoanalytic, behaviorist, and humanistic psychology, drama therapy utilizes theater processes to foster emotional and psychological growth (Emunah). Renee Emunah (1994), one of the pioneers in the field of drama therapy, describes an integrative, process-oriented framework for drama therapy with goals rooted in psychotherapy and conceptual bases in theater, dramatic play, role-play, psychodrama, and dramatic ritual. Pointing to the relationship of drama therapy to humanistic psychology, Emunah explains that a dramatic enactment can help the client to “create a bridge between human limitations and human aspirations, between who we are and whom we hope to become” (p. 27). And, like psychoanalysis, the exploration of personal history is a key component of long-term drama therapy, as is the cultivation of both personal insight and ego strength. Additionally, the action-oriented nature of drama therapy is similar to behaviorist approaches. According to Emunah, “the attention given in behavioral therapy to the breaking of maladaptive patterns and the acquisition of new coping skills is very akin to goals in drama therapy” (p. 31).

At Project Pride, drama therapy is used in a variety of different ways and we have adapted drama therapy processes to fit into much of the psychological work that is done with the women. We run a 12-week-long Domestic Violence Drama Therapy group, and we each facilitate a weekly “caseload” Drama Therapy group where we meet with the clients assigned to us to explore relevant issues they are facing in their lives. We also facilitate a Multi-family Education Group and incorporate drama therapy techniques into our curriculum. Apart from these weekly groups, we utilize drama therapy in one-on-one
counseling sessions with our clients and also produce “Voices of Pride”, an intensive week-long writing and performance workshop.

Through the use of various dramatic structures, improvisational games, sound and movement exercises, writing and performance, we encourage women to express their innate creativity, and to find new ways to play and new ways to build relationships with each other. Drama brings an element of playfulness and spontaneity that is sorely missing from these women’s lives in prison and in treatment. It also gives them a chance to experience an alternative way of having fun that is different from experiences with drugs or making fun at each other’s expense. In all of our groups, we play warm-up games that help the women to relax and interact with one another in new ways. The silly and creative nature of these games allow the women to let off steam and become more present and available to one another, leaving the stresses of daily life and enjoying authentic connections with one another.

According to Emunah, “Drama, by its very nature induces empathy and perspective” (1994 p. xv). Our experience has confirmed that drama therapy builds trust and teamwork among the women. In various groups, as the women open and share their stories with one another they begin to realize that their apparent differences are small in comparison to the similarity of their struggles. Through role-plays and role reversals, the women get the chance to step into each others’ shoes and the shoes of other people in their lives: “Role-playing someone else’s story gives you the opportunity to be a part of their life and for them to look at you as a part of their life as well,” said one participant, “I think that actually opens us up to one another a little more. There is a certain bond, a certain trust after that.” Building trust in an environment where trust is hard to come by
is a very important part of their healing process. It may also be one of the few opportunities that the women have had to experience trust; it is not unusual for a new arrival to Project Pride to comment that she trusts no one in her life.

Drama therapy can also enhance self-esteem, especially the performance-oriented work that we do. When the women create a skit or write a poem and it is received with respect and admiration, the women are reminded that they have something valuable to offer. Their creativity is acknowledged and their talent as a poet, writer, or performer is recognized. The clients begin to see themselves and one another in new ways.

This in turn encourages the women to take the risk to try on other roles. As described by Emunah, “The use of drama as therapy fosters liberation, expansion and perspective. Drama therapy invites us to uncover and integrate dormant aspects of ourselves, to stretch our conception of who we are” (p. xvii).

**Domestic Violence Drama Therapy Group**

“[The DV group] made me feel stronger about myself . . . to not be afraid of this man and to stand up for myself”. -DV Group participant

The Domestic Violence Drama Therapy group is a 12-week group held weekly for 1.5 hours. The group is largely voluntary, though a few of the women have been mandated by Child Protection Services to participate in a domestic violence group, or by their primary counselor at Project Pride as a part of their treatment plan. After the second meeting the group is “closed,” meaning we will take no more participants and the women commit to being there for the duration of the 12-weeks.

The group averages eight women per session. They are a mix of CDC (residents
from the California Department of Corrections) and “Perinatal” clients. In each group there is racial diversity, differences in class and education, as well as a range of experiences of domestic violence. Many of the women are married or have been married; some of them are still married to abusive partners.

The intention of the group is to educate the women about domestic violence as well as to build self-esteem, to give them the opportunity to practice new ways of being, and to face and resolve past events. Many, if not all of Irvin Yalom’s (1995) Therapeutic Factors in Group Psychotherapy are present and met throughout the sessions including, but not limited to: empathy for others, universality, imparting of information, imitative behavior, interpersonal learning, group cohesiveness, catharsis, and existential factors.

Drama therapy is a unique and helpful modality for the topic of domestic violence in group therapy for many reasons. As previously mentioned, it is very useful in building the necessary trust and teamwork among the women that will enable them to safely explore deeper issues. Equally important, dramatic enactments can provide the aesthetic distance needed to examine and deconstruct scenarios that are perhaps too emotionally loaded to discuss. Depending on the willingness and the ego strength of participants, the enactments can be more sociodramatic in nature, i.e., a role-play of a stereotypical controlling boy friend, or personal, i.e., a specific scene from a participant’s past. Drama therapy is very flexible and can be a container for both the deep pain of personal trauma as well as a way for the women to laugh and play together as they enact some of the absurdities of life in domestic relationships.

The intention at the beginning of the 12-week session is to build safety and trust among group members. To facilitate this, the initial session and the beginning of each
subsequent session consist of improvisational warm-up games drawn from various
improvisational theater or drama therapy sources. Warm-up games are an essential part of
the group process. They help the group to become present in the moment, get the blood
flowing, and shift the mood and energy of the group.

One example of a warm-up game is called "Greet, Argue and Make-up." In this
game each woman pairs up with three different members in the group. With their first
partner, the women act as if they are best friends who have just reunited. Next, they find
another partner and have an argument, and finally they find a new partner and make-up
with her as if she were the one with whom they had been fighting. While there are
alliances and struggles among the women when they are “on the floor” in their
residences, this warm-up gives them a structured opportunity to role-play other
possibilities, while fostering a certain level of connection.

Often at the beginning of the 12-week series we will explore the sociodramatic
make-up of the group, giving the women a chance to see who is in the group and to
recognize the universality of their experiences. In the first session we often do the
exercise: “Step Into The Center If.” The women stand in a circle and the facilitator starts
a sentence with: “Step into the center if …” and then completes a sentence with a
statement. Everyone for whom that statement is true steps into the center of the circle.
We start out quite general, yet geared toward family and personal information: “Step into
the center if you were raised by your mother . . . , if you graduated from high school . . .”
From there we often move into edgier questions: “… if you have ever hit someone . . .”
(this often brings everyone in to the middle) “. . . if you have ever been hit . . .” After a
little while, they are encouraged to call out their own statements. On occasion they will
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go very deep, very quickly: “Step into the center if you have ever been raped . . .” (often the majority of the women), “. . . if you have ever been molested . . ., if it was by someone you knew . . ., if you still love your abuser . . ., if you ever had your teeth knocked out,” etc. Guidelines for voluntary participation are laid out at the beginning of the session, and the women are reminded that they have a choice in how much they disclose. For many of them, it seems as though there is a palpable sense of relief as they realize through this activity that they are not the only woman with these experiences.

In an environment where the women are interacting daily with each other, there is often fear about disclosing too much and having it used against them. At the beginning of the 12-week series, confidentiality and disclosure is of particular concern. By the end of the series, the sharing of personal stories has built a level of deepened intimacy among the group’s participants, and the fears of disclosure seem small in comparison to the rewards of empathy and support.

After warming-up, most of our drama therapy groups begin with a “check-in,” giving the women a chance to process and share about their week and be more present with one another. Throughout the series, the women share about past experiences as well as their current circumstances. Many of the women are at choice points in their relationships: Separated from their relationships by circumstance, they now have the opportunity to assess their previous choices and explore new ones.

The bulk of each session includes some sort of dramatic enactment or role-play. This can, again, be a more “distanced” scene where we create composite characters in “typical” abusive situations, or more personal stories that the women have actually experienced. In past sessions we have both explored the Power and Control Wheel
developed by the Domestic Abuse Intervention Project. We have also enacted different scenes from the “Cycle of Violence” concept developed by Dr. Lenore Walker (1979). To illustrate the cycle of violence, participants gather in groups of two or three and find a way to play out the different phases of the cycle: The Honeymoon Phase, The Tension Building Phase, and the Violence Phase. The opportunity to see the cycle acted out as opposed to just being discussed brings a tangible understanding of the cycle to the participants - they relate to the stories because they have lived them.

Again, when the clients recognize the universality of their experiences, they feel a sense of relief and shared understanding. While the participants may have a hard time not blaming themselves for their past history of abusive relationships, they can empathize with another woman in a similar situation. They recognize in the enactments that the woman is not to blame for her victimization. With time they may be able to view their own situation in a similar way.

Another exercise that has a powerful impact on the women is the use of imaginary phone calls. A disconnected cell phone is placed on a chair in the center of the circle and, one at a time, the women make telephone calls to an imagined recipient. In past groups women have called their abuser, their children, a deceased relative, and even God. The opportunity to be witnessed in the expression of their anger or hurt gives the women a sense of support that they may never have had before. One of the participants summed up the impact of the exercise this way:

When I pretended to call my son’s father, who abused me for seven years, it felt good to say everything I wanted to say towards him, and that relieved a lot of my anger toward him. I think that once the anger came
out I could forgive myself for not being educated enough on domestic violence, not blame myself like: “Why did I let this man do this?” but to actually let it out and react it [sic] and say the things I knew I wasn’t going to get hit for.

As illustrated above, an exercise like this can assist a woman in reclaiming some personal power from a situation in her past in which she was powerless. Dramatic reenactments of a specific scene from a client’s life can also be a way to aid in healing past trauma. By replaying the scene in a safe environment with the support of the group, the client is given the opportunity to practice a new way of being in the situation, or to use the reenactment to gain valuable perspective they may not have had in the original experience. It is important when doing reenactments that the client is guided by a trained drama therapist to prevent re-traumatization. Participants are often reminded that they have choices about how far to take a scenario and when to stop the process.

In these enactments, we can utilize the group to play out different aspects of a participant. This gives the participant the opportunity to see and address her own conflicting emotions and parts of herself. The client is led through a process where she casts members of the group to play out these parts. She then either talks directly to these aspects of herself or she gives the actors lines that represent what each of these parts feel.

In one enactment in the Domestic Violence group, a woman cast someone to play her teenage self who was stuck in an abusive relationship. Jennifer, the client, was able to use the opportunity to address this younger part of her. She spoke directly to her 15 year-old-self, assuring her that she would ultimately be safe from this man, that she was not to blame for her situation, and that she forgave her for her choices. After Jennifer said what
she needed to the actor in the role of her younger self, they reversed roles so that the actor could repeat the words that Jennifer had spoken, giving Jennifer the chance to receive her own words of blessing and forgiveness.

Each session and series of the Domestic Violence group is different. The group make-up, the interpersonal dynamics, and the individual stories of the women are attended to within the context of a drama therapy group, yet without a specific formula. During each meeting our intention is to use our collective creativity to respond to the individual needs of participants and the needs of the group as a whole.

While drama therapy is well-suited for topic-oriented group work such as domestic violence, it is also a powerful modality for general group therapy. In addition to the DV group we utilize drama therapy in weekly groups comprised of women on our caseload. Using similar structures we explore life topics relevant to the women. The topics are as diverse as the women and range from facing their addiction to the realities of motherhood. Coming together weekly in a safe and contained environment, the drama therapy caseload groups serve as a place to process the week’s events and the struggles of life. In addition to the DV group, the caseload groups serve as another environment where powerful personal healing can take place for the women.

*Multi-family Education Group*

The Multi-family Education Group is a voluntary group held on Saturday mornings, lasting 90 minutes. We define “family” as any supportive family member or friend. The women are encouraged to come to the group even if their friends and family cannot attend. We emphasize that the group is an opportunity where the women can educate themselves about unhealthy behaviors within families and about how they can
chose new behaviors for themselves, as well as encourage them in their children, and in doing so break cycles of violence, abuse, and neglect.

One of the primary goals of the Multi-family Education Group is to educate the women, their family members, and close friends about family dynamics as they play out in the context of addiction. The first 30-40 minutes of the group is didactic, therefore cognitive in nature. This includes lectures, videos, interactive handouts, discussion, etc. The remaining 50-60 minutes is dedicated to exploring how this information can be “played out” and therefore understood and integrated in a “lived” sense. This is achieved through drama therapy warm-up exercises that lead into role-plays of typical family dynamics and occasionally into enactments that are highly personal. In some instances, the family members may be in the room, yet it is often the case that they are not physically present but rather evoked as a character in the enactment.

While the Multi-family Education Group shares many of the same approaches as the other drama therapy groups, especially in its use of warm-up exercises and role-plays of varying degrees of depth, it is in some ways an entirely different experience. One of the main differences is that—in keeping with the Project Pride philosophy that family secrets are destructive—the group encourages an open exploration among all family members, including children from the age of five or six and above. Another difference is that the group, while voluntary, is never closed. This means that at any given time a family member or an entire family, a friend, or even a resident may attend the group for the first time. These two factors alone dictate that each topic must be self-contained and accessible to a variety of ages.
It is often the case that many of the CDC residents have family members who live at quite a distance and may attend only a few of the Family groups. Since some of these family members may not have experienced any kind of therapy before, we are faced with an additional challenge: how to introduce them to therapy, and more specifically drama therapy, in a gentle and safe way that sparks their desire to seek out therapeutic resources in their local communities. It has been our experience that, over a period of time, a core group of women comes to the group on a regular basis. They not only provide continuity in the group, but they are often the most willing participants in the enactments, modeling to newcomers that “silly exercises” can be fun as well as meaningful. In this way, new family members are included in the group in the more comfortable role of “the audience.”

The flexibility inherent in drama therapy lends itself to the complexities of a group like this, and this is most evident with the children. While the children often seem busy drawing or coloring, paying very little attention to the discussion, when it comes time for the enactments they are eager participants. In one instance, we began to form a “Stage Picture” of each of the family roles in a family with addiction: the hero, the enabler, the mascot, the lost child, the dependent (the addict), and the scapegoat. A “Stage Picture” is simply a moment frozen in time where the participants in the exercise strike a pose depicting the body language of each role. When the exercise began, the children spontaneously rushed to join the stage picture. As they struck poses, heroic and sad, it became clear that they had been listening all the time (something that we know is often the case in daily life).  

The goal of the “Stage Picture” exercise is to authentically embody the role based on one’s own experience and interpretation, which has been stimulated by a previous
discussion of the roles. After the participants strike their poses, each one is asked to say
one line that comes spontaneously to mind. “I will save you and everyone else in this
family,” says the Hero, for example, while the Scapegoat may say something like: “Who
are you looking at? Get off my back!” If the facilitator senses that the participants have a
strong desire to explore the role further she then asks them to repeat their lines and
respond spontaneously to each other in character. This moves the “Stage Picture” into an
improvisational scene, where participants can further explore the behavior of any given
role.

In groups that have a high degree of trust and cohesiveness, the “Stage Picture”
can be intensified by asking a volunteer to “sculpt” (or position) her family members in
their typical “family roles.” Another possibility is to sculpt a family scene depicting a
moment frozen in time, from the past or the future. Enactments of a past experience can
be especially effective because the “family roles” can emerge spontaneously through the
action: a client may experience an “Aha!” moment when she realizes that a usual
behavior of a family member corresponds to a “family role” that we have discussed.

In addition to explorations of family roles, the Multi-family Group gives a client
various opportunities to play out scenes from the past in order to gain more insight into
her family dynamics or scenes from the future to practice making new decisions under
the constraints and pressures that exist in her family. Sometimes we use visual arts to
stimulate creativity to begin the drama therapy process. The material inherent in the
artwork can reflect mythological or archetypal themes that are often collectively shared
by the group. In these instances, the enactments themselves tend to become mythical,
blurring the lines between the past and the future, and thereby combining insight into the past and practice for the future within a very short time frame.

This was particularly the case for a client named Robyn when she drew a picture of a brick house. The house represented the wall that she needs to keep up to protect her family from the temptations and pain of the outside world and especially from her younger sister who still uses drugs. A member of the group referred to the wolf outside huffing and puffing, trying to blow the house down. Though no one in the room mentioned the vulnerable little pigs it seemed the group was aware that Robyn could play out any one of those roles. Among the women, Robyn had a reputation for behaving like a vulnerable little girl. The scene of meeting her sister at the door when she wanted drugs was very familiar to Robyn—it had happened many times before. But because Robyn would soon be on parole she chose to enact the scene as if it were in the future. The question that hung in the room was whether Robyn would remain in the role of the little girl and allow herself to be victimized by the needs of her sister or do something different. The mythological framework held all of these components together, and the stage was set for Robyn to confront her sister.

As the enactment began, Robyn chose someone to play her sister and then three people to play her internal resources: “survival, love, and strength.” Robyn reversed roles with the other “actor” to show the group how her sister might come to the house “tweaking” to ask for money and to tempt Robyn with drugs. (This also helped the “actor” cast in the role gain further insight into how to play the role of the sister more authentically.) Throughout her stay at Project Pride, Robyn has been learning how to communicate firm boundaries without going into a rage or, as she was prone to do before
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prison, resolving most disputes with a physical fight. Here, as the enactment unfolded, Robyn held her ground firmly; both affirming her worries and care for her sister, but respectfully refusing to let her sister in the door. At one point in the enactment, Robyn broke the action to explain to the group that she felt tempted to leave with her sister and that was why she was fighting so hard. This time however, she was fighting with strong, firm, and compassionate words, instead of with her fists.

Role-plays in the Multi-family Education Group can also bring awareness to the importance of how, in addition to our families, our friendships impact important decisions in our lives. In one instance, Katie began by asking a friend for forgiveness for not attending to her child who inadvertently completely destroyed her friend’s houseboat. Through the enactment Katie realized she felt obligated to her friend out of guilt for destroying his property. She ended the enactment by expressing this to him, confirming her love for him, but also telling him that she needed to let the friendship go for the time being because he was still using drugs. Within the space of 15 minutes, the client was able to move through a complex combination of feelings—obligation, guilt, love—to then come to the cognitive understanding that she could no longer be around her friend for the safety of her child and the sake of her own recovery. And finally, she was able to practice what she might say to her friend in real life.

Drama therapy can serve as a rehearsal for life, a chance to practice a conversation that needs to take place. As we know, in families with addiction, those conversations are crucial to the recovery of the entire family. Our hope is that the Multi-family Education Group will help clients, and their families and friends, to begin or deepen that process. But even in circumstances where the conversations are not possible
due to the death, absence, or reluctance of a family member, the dramatic enactments 
serve a purpose that is much like the exercise of writing a letter that is never sent. The 
practice of enacting the conversation gives the client perspective, insight, and often a 
cathartic release, and all of this allows her to move on in her recovery and to make better 
choices for the family she is creating.

Ultimately, this is our deepest hope for the women: that through the various 
games, exercises, role-plays, and fully developed enactments they will feel empowered to 
create healthier families. The dramatic structures implicitly encourage an understanding 
that family rules—spoken and unspoken—are not hard and fast “givens” but guidelines 
to explore, play with, and modify to meet the needs of every person in the family. At the 
same time, the warm-ups and the playful games often give their families new ways of 
having fun together, while an exploration of family rituals honors the healthy bonds that 
nurture them. The arena of multi-family group drama therapy is vast. But with the 
courage and commitment so often shown by the women, their families, and friends, it 
becomes a fertile ground for exploring the diverse needs and possibilities of a healthy 
family.

Voices of Pride

The “Voices of Pride” week-long writing and performance workshops take place 
approximately every 2-3 months. The workshops are sponsored by the local Bay Area 
public television station KQED as part of its Community Outreach program. Two 
writers and performers from the community and two drama therapists, as well as staff 
from Project Pride and KQED, collaborate to produce the workshops. The workshops
consist of two-hour sessions each day for four days, with a small public performance on the fifth day.

The first day involves screening a documentary film on a topic relevant to the lives of the women. Some of the films included: “What I Want My Words to Do to You,” playwright Eve Ensler’s writing workshop for women in a high security prison; “Girl Trouble,” adolescent girls’ struggles to build their lives in the context of an organization they developed and continue to run for girls in-risk; and “Prison Lullabies,” female prisoners adapting to the realities of motherhood while raising their babies in prison and then, upon their release, in their communities.

After the screening the women are given various writing exercises to assist them in responding to the film. The women are always encouraged to diverge from the exercises if they become inspired to write something else. The purpose of the workshop, as the name suggests, is to help the women find their individual voices. We encourage any expressive effort on the part of the women, including passionate voices of dissent and difficulty. The writing exercises are interspersed with dramatic exercises, improvisational games, and performance techniques. Aside from preparing the women for the performance, these dramatic techniques give the women access to metaphorical material that is often held deep within their psyches.

Though the workshop is mandatory for all of the women, each woman can choose to engage in the process of writing, reading, enacting, and performing at any given point. We have found that this voluntary aspect of the workshop has been essential for the women to build trust in the facilitators and their peers, and to create a sense of safety that allows for their otherwise dormant creativity to step forth. In an atmosphere of
unconditional support, each of the women finds her own way of entering into her experience, working with it, and transforming it into a work of art. Through this process the women gain some mastery over experiences that have, to a large extent, held power over them.

One woman, for example, refused to write for the first few days of the workshop. On the third day she participated in a writing exercise, but then would not read it. This continued into the second workshop months later when she then let a facilitator read her piece anonymously for her in the performance. Finally, again months later, the same woman participated in the writing exercises, was able to read her own piece, and then even performed a poem she had written while in prison about her childhood abuse and its impact on her. Obviously the trust built over time and the gentle encouragement, yet lack of force, allowed for this client’s unfolding. There have been many surprising occasions where a woman does not outwardly engage the process during the week, but arrives on the morning of the performance with a piece in hand ready to perform.

Drama therapy techniques are especially adept at providing a wide range of possibilities while fostering group cohesion. Even the most resistant women can be enrolled as “audience,” while another tentative woman may be willing to venture forth as a “director” to suggest ways a skit can be modified or enhanced. Likewise, some women are reluctant to “perform” in a skit, but they are eager to play the role of expert on a panel discussing prostitution, for example, or to engage in a mock news interview that also involves questions from the audience. The possibilities are as rich and as varied as the lives and imaginations of this diverse group of women.
The purpose of these performance workshops is to assist the women in finding their voices, in whatever form their voices may come—harsh, quiet, ecstatic, tired, etc.—and most important to honor whatever it is that they may have to say. Finally, we hope to encourage them to speak their voices proudly with a new found sense of self. We would like to share a few performance pieces, to let the women speak for themselves:

When I think back on my life, in times of old
I remember a child too frightened to hold.
She is afraid to love, afraid to give,
and sometimes at night she is afraid to live.
Her body has been beaten, her heart badly broken,
the tears of a child, not loud enough spoken.
She remembers awaking to the touch of a man,
touching a touch she didn’t quite understand.
So she turns to her mother, but her mother is gone.
So she looks for a reason to carry on.
She remembers the pain, the sorrow, the guilt.
She prays the father and child both heal.
She remembers praying for justice to come
to the man who killed her without the use of a gun.

-B

A life like no other

tough, rough and all that stuff,
raised in the projects, what a life,
you better think twice
before going out at night.

What are girls supposed
to be made of?
Sugar and spice?
That would have been nice,
but yeah right, not my life.

All I ever wanted
was to be loved
not a dope fiend,
pushed around and shoved. No life, nothing to look ahead to that seems to be my life. Right?

But then there goes that big bright light I see even in the darkness of night telling me that doesn’t have to be my life.

Changes I have made, it’s a miracle I am saved. Dope fiend, meth monster, that’s my past. I am free, free at last.

-J

Conclusion

Our main goal in our work with drama therapy at Project Pride is to engage the imaginations and creativity of women who usually view themselves in confined ways, in and out of prison. We encourage them to see themselves as more than convicted felons, drug addicts, or overwhelmed single mothers. Many of the women are able to engage the process of actively claiming new roles: “competent and loving mother,” “healthy woman,” “student,” and “professional.” Through dramatic enactments and participation in the performance workshops the women are recognized, both by their peers, and by themselves, as more than just women with traumatic histories who have landed in a treatment program. They transcend their past and are able to, at least for a time, free themselves to uncover new possibilities. These possibilities are often far beyond those provided by the daily structure of their lives in prison and the past chaos of their lives in
the streets. Their stories become their healing and through play and enactment they are able to give voice to their own innate creativity. One client summed it up this way:

It is really about this energy that is there. And you get the opportunity for no one to say “calm down,” “that’s too violent,” “that’s too that,” “that’s too this.” And you get to express it, however, whatever, you want to say. No judging. That’s what was really amazing for me, that your drama is your therapy.
References


Resources


As described later, approximately half of the women in our facility are referred to us from the community, some of whom are in a “drug diversion” program, which means they enter treatment instead of serving jail time. But most, if not all, of these women have served some jail time in the past. For this reason, though technically they are not currently incarcerated, they still suffer from oppressive beliefs about themselves related to their past involvement in drugs, crime, and imprisonment.

Role-plays and enactments in a drama therapeutic process are similar to Psychodramatic processes. Psychodrama, a field of psychotherapy where personal issues are enacted, was founded by J.L. Moreno (1889-1974). Psychodrama is one of the sources of drama therapy and psychodramatic structures can be a component of many drama therapy groups. Psychodramatic methods can be highly useful for healing personal trauma in a group context.

For a more detailed explanation of these roles see Sharon Wegscheider-Cruse, “Another Chance: Hope and help for the Alcoholic Family.” While a five-year-old cannot know the full implications of playing the “hero” in a family with addiction, the exercise provides the family with a common language and experience that is the beginning for understanding how addiction impacts the dynamics in the family. Our hope is that over time the older members of the family will gain a more sophisticated understanding, as well as the tools to help the younger children.

All names of clients have been changed to protect confidentiality.

This KQED Community Outreach is part of the Making Connections Media Outreach initiative. KQED Community Outreach is currently compiling curriculum produced through this workshop to create a curriculum guide that can be distributed with the films to other organizations and providers that work with offenders and ex-offenders. See resources for contact information.