



## **HEALING POST TRAUMATIC STRESS THROUGH IMAGINATIVE PLAY: Creativity, Vitality, and Connection**

### **Victoria Stevens PhD, FIPA**

---

*“I didn’t like people at all before this. I didn’t talk to people. Now I’m on the bus and I’m talking to people and people are talking to me. After 45 years I’m coming alive and it’s all because of this. I’ve got a new life.” A.R. (Veteran and Imagination Workshop participant, 2023)*

### **Introduction**

After a successful pilot program of 10 weeks with women in the New Directions for Veterans program at the West Los Angeles VA in 2016, the Imagination Workshop expanded to programs of 20 weeks with both male and female veterans in 2017 -18 and 2018-2019. They were able to continue offering weekly workshops to any veterans who wanted to participate through the shut down and quarantine in March of 2020. By May the workshops had started up again and continued through March of 2022. These offerings culminated in a film of an improvised short play with three veterans. In April, a new group of veterans joined in along with several “alumni” from previous plays to write and perform in a play for the public in June of 2022. Reports on previous plays and films can be found on the Imagination Workshop website. The process of creating the recent play, “The Black Diamond”, began in January 2023 and it was performed for the public on June 17, 2023.

I have been evaluating the work of the Imagination Workshop with the New Directions Program since 2016 with the goal of not only assessing the efficacy of the series of sessions with this group, but also with the goal of understanding the uniqueness of this specific form of theatre in the context of current research on post- traumatic stress. There has been a continuous and overwhelmingly positive response from the participants, as well as from the directors and staff of New Directions to the program..

Over the past seven years, each group has participated in weekly improvisational sessions which involved movement, music, character development, writing and improvising monologues and dialogue culminating in either a short film or a larger full one-act play. An evaluation consisting of 25 questions on a pre and post-test was conducted for each workshop.

The questionnaire itself is attached here as an appendix for reference. After the performance of each finished play I conducted group verbal discussions with the veterans and teaching artists about their individual experience that correlated to the questions, and asked them to write out some reflections about the entire process.

This report will offer an overview of the Imagination Workshop at New Directions and the creation of the recent play, a discussion regarding the therapeutic value of this program and why it can be seen as an important addition to the care, healing and treatment of individuals in groups suffering from the effects of trauma or mental illness, and an evaluation of the recent program the Imagination Workshop was able to offer from January through June 2023.

All video clips courtesy of John DiBono

Still photography courtesy of Colleen Dodson Baker

## **The Power of Theatrical Improvisation for Healing Trauma**

*“Imagination gives us the opportunity to envision new possibilities—it is an essential launchpad for making our hopes come true. It fires our creativity, relieves our boredom, alleviates our pain, enhances our pleasure, and enriches our most intimate relationships.*

*When people are compulsively and constantly pulled back to the past, to the last time they felt intense involvement and deep emotions, they suffer from a failure of imagination, a loss of mental flexibility.*

*Without imagination there is no hope, no chance to envision a better future, no place to go, and no goal to reach.”* Bessel Van der Kolk (2014, p. 17)

The Imagination Workshop offers an innovative and effective intervention for veterans who are survivors of traumatic events by providing a space for healing, connection to others through imaginative play, facilitating the development of important skills that will contribute to success in civilian life, and offering an opportunity to discover, write, and live a new story of who they are beyond that of their military identity, and being defined by their trauma.

The arts are powerful tools for healing trauma as is generally known. How they are utilized for the most part is to provide a way to reengage with emotions and the story of actual trauma that has occurred, leading to integration and freedom from the memories of the events that were devastating and overwhelming. This is the typical role of art and drama therapy in rehabilitation.

Improvisation in the way it is presented by the Imagination Workshop is not focused on healing the past by directly working through it, but by being able to creatively play in the realm of imagination – being able to imagine a life and identity that has meaning *beyond* the trauma and beyond being a victim of it.

Cathy Malchiodi, an expert on expressive arts and trauma treatment states:

*“Of all the concepts relevant to meaning making after traumatic events, imagination is possibly the most relevant to expressive arts therapy. The key ingredient of imagination is mental flexibility that allows one to fantasize and create novel perceptions and thoughts and to envision new visions and outcomes – all of which are processes at the core of arts-based approaches. It is particularly significant for the process of meaning making because the ability to image something better than what has transpired is a necessary component of reparation.”* (2020, p. 344).

The interrelationship between imagination, creativity and trauma is complex. Imagination and creative thinking are often enlisted as defenses and escape from the unbearable pain, overwhelming emotions, and cognitive dissonance of traumatic experiences. This preserves imagination, innocence, and aspects of the self while dissociated from the lived experiences and memories of trauma. However, this is different from imagination and creative thinking from a place of integration and creative cognitive playing with possibilities while connected to the body, self and the realities of the past and present.

It is this second form of imagination or what could be called embodied imaginative play that is facilitated, developed, and practiced in the Imagination Workshop. As Margaret Ladd, the co-founder and creator of Imagination Workshop says,

*“The ability of the human brain to create metaphors and actually inhabit them, which is the essence of the art of acting – of theatre in fact – contains within it what we feel is a secret antibody to mental illness and despair. It does not touch its causes or its cure. But it allows the brain to reconsider life from a different perspective...This redirection through the imagination, through metaphors, through characters then begins to lead one out of isolation to begin to socialize in positive ways.”*

Most people tend to think of improvisation as related to comedy, performance and being quick-witted, but the healing power of improvisation is because at its core, improvisation is about being obvious, and saying or doing the next logical thing; it's about being authentic. At its essence it is about exploring what it means to be human. Improvisation is an unconditional welcoming of the present moment, full of possibility and hope. This form of improvisation involves the act of seeing through the eyes of someone different than yourself and this is an integral part of working through conflict.

The skills I have identified that are developed and facilitated by this kind of group improvisation are, among others:

- **Attentive listening**
- **Being present in the moment**
- **Expanding awareness and observation**
- **Letting go of the need to control - or even know - what happens next**
- **Adaptability to change, flexibility**
- **Being open to noticing and receiving what the situation is offering**
- **Taking emotional risks and being vulnerable**
- **Responding in a way that is supportive and attuned to others, and promotes self-esteem**
- **Acknowledging interdependence**
- **Empathy and perspective-taking**
- **Opening up to previously unimagined possibilities**
- **Creative thinking and imaginative play**
- **Experiencing, embracing, and expressing joy**

These skills are closely linked to creativity and what is known as emotional intelligence, both of which involve imagination. All of these are considered to be crucial skills for mental health, wellness, and fulfillment personally and in any occupation. Awareness of the need for these skills is becoming discussed in areas beyond the arts and therapy. For example, in an article in the Harvard Business Review entitled “We Need Imagination Now More Than Ever”, Martin Reeves and Jack Fuller state:

*“The idea of “crisis management” requires no explanation right now. Something unexpected and significant happens, and our first instincts are to defend against — and later to understand and manage — the disturbance to the status quo. The crisis is an unpredictable enemy to be tamed for the purpose of restoring normality.*

*But we may not be able to return to our familiar pre-crisis reality. Pandemics, wars, and other social crises often create new attitudes, needs, and behaviors, which need to be managed. We believe imagination — the capacity to create, evolve, and exploit mental models of things or situations that don’t yet exist — is the crucial factor in seizing and creating new opportunities, and finding new paths to growth.*

*Imagination is also one of the hardest things to keep alive under pressure... Most of the time in business we operate with our instinctual “fight-or-flight” nervous system that evolved to help us in high-pressure situations, like running from a predator. This system narrows our focus. But less emphasized is the parasympathetic, or “rest-and-digest” system, which evolved to manage mental and bodily operations when we are relaxed....Imagination feeds off the aspirations and aggravations that propel us to seek a better reality. When we lose hope and adopt a passive mindset, we cease to believe that we can meet our ideals or fix our problems” (Reeves and Fuller, 2020).*

It is not difficult to see the correlation between this description of our general responses to stress and crisis to the more severe and debilitating symptoms of PTSD experienced by those who have undergone multiple forms of traumatic experiences such as is the case with military veterans. It is especially important to understand the importance of what these authors are saying about business in the context of the place the Imagination Workshop holds within the larger structure of the New Directions Program at the West Los Angeles Veterans Administration as this program is specifically about facilitating the transition of homeless veterans into stable housing and fulfilling careers.

Current research is validating what many practitioners in mental health, as well as artists and teachers who work with traumatized children and adults have known for decades, and that is that mainstream treatments for traumatic stress in general and for military veterans in particular, are largely inadequate for holistic healing and trauma recovery. Ali and Wolfert (2016) state, “There is thus a need for innovative treatment models for traumatic stress that acknowledge potential sources of resilience and healing in veterans’ existing communities. In particular, there is growing evidence that the arts can play an important role in supporting veterans’ recovery from trauma.” (p. 58)

In a review of the literature and research on the arts, healing, and public health, the authors state,

*“Use of the arts in healing does not contradict the medical view in bringing emotional, somatic, artistic, and spiritual dimensions to learning. Rather, it complements the biomedical view by focusing on not only sickness and symptoms themselves but the holistic nature of the person. When people are invited to work with creative and artistic processes that affect more than their identity with illness, they are more able to “create congruence between their affective states and their conceptual sense making.” Through creativity and imagination, we find our identity and our reservoir of healing. The more we understand the relationship between creative expression and healing, the more we will discover the healing power of the arts.”* (Stuckey, H & Nobel, J., 2010 p. 254)

In addition to inadequate treatment for traumatic stress, veterans observe that “the military does an extremely effective job in training them to operate within the military, and an extremely poor job of reversing that training or preparing them before sending them back to civilian life. The basic idea that veterans must embark on a “transition” as they move from military to civilian life has been central for researchers, doctors, policy-makers, and activists thinking about the physical, emotional, and social experiences of veterans.” (Zogas, 2017 p.1)

The Imagination Workshop offers an innovative and effective solution to both of these pressing issues by providing a space for healing traumatic stress, developing needed skills that will contribute to success in civilian life, and offering an opportunity to discover, write, and live a new story of who they are beyond that of their military identity, and being defined by their trauma.

While the Imagination Workshop is definitely not drama therapy, it is therapeutic and develops the core skills Nisha Sajani, Research Director of the As Performance: Theatre and Health Lab states as crucial outcomes of drama therapy in general in her discussion of about the power of drama therapy,

*“When we go through highly stressful experiences such as chronic poverty, domestic violence, neglect, racism, or singular events like sexual assault or an unexpected loss, we may experience a disruption in our sense of identity, safety, and connection to others. These ruptures can contribute to anxiety, depression, and emotional dysregulation which may, in turn, prompt helpful or harmful coping strategies such as avoidance and social isolation.*

*Drama therapy can offer survivors of trauma opportunities to use skills related to acting, such as breath and movement, enrolling and de-rolling, to practice regulating emotional experience and returning to present experience. Through theatre games and exercises, participants are able to take creative risks in a less threatening environment and rehearse challenging social situations. When conducted in a group, drama therapy can offer children, adolescents, and adults opportunities to experience joy, validation, and connection with others again while making meaning of difficult events.” (2018)*

In conclusion, the Imagination Workshop while not therapy, is therapeutic and joins other modalities that offer the relational reparative, and creative experiences that are now being identified as crucial for the integration and diminution of the effects of traumatic experiences on the lives of those who are suffering:

*“When addressing the problem of traumatized people who, in a myriad of ways, continue to react to current experience as a replay of the past, there is a need for therapeutic methods that do not depend exclusively on drugs, talk therapy, cognitive insight or cognitive understanding.*

*We have learned that most experience is automatically processed on a subcortical level of the brain, i.e., by the unconscious – in interpretations that take place outside of conscious awareness. Insight and good intentions have only a limited influence on the operation of subcortical processes, but synchrony, movement, and reparative relational experiences do ...*

*Imagination is our greatest asset as human beings, and as long as you can imagine other realities, you are okay. If you are in jail and you can imagine learning to do new things and skills – if you can imagine Shakespeare playing in your mind as you’re locked up – you have alternative realities, and you’re not really a victim of the present. What’s so hard about trauma is that it tends to kill the imagination.” Bessel Van der Kolk*

Here are some examples of what some of the veterans have had to say about their experience being a part of the Imagination Workshop:

*“This experience showed me that there are many different paths I can take in life, and I am not stuck; so I got some hope.”*

*“I learned to open myself up to my imagination taking over and the endless possibilities. When I imagine, it allowed me to remove myself from my present problems and obligations and freed me to be free.”*

*“After finally getting sober, this has brought out things that have been gone for 40 years. I experienced things I hadn’t experienced in a long time.”*

*“I had hit the bottom of my life and wanted to have a different life. I realized it was ok to drop my guard and open up.”*

*“ This is social living, every Wednesday being with these guys. Social living is not social media. This is not therapy. This is Therapeutic Transition for me. We celebrate life when we come here”*

*“All the therapists and programs give us is serious. Here I get to be free and I can be me. I have a new ability to communicate with people and let things go. This helps to keep my mind off the disease. Outside of here I am an addict and I always wanted to know what else is there. I have 150 degree change in my relationship with my sobriety.”*

## **New Directions for Veterans**

The New Directions for Veterans program states that Los Angeles has the largest population of homeless military veterans in the nation. The LA Homeless Services Authority estimates that more than 4,000 homeless veterans live on our streets. Many of these men and women suffer from Co-Occurring Disorders, including substance abuse, mental illness and post-traumatic stress disorder (PTSD), as well as chronic medical problems.

Since 1992, New Directions for Veterans (NDVets) has provided comprehensive services to thousands of veterans in Los Angeles County. Founded by two formerly homeless Vietnam veterans and a local advocate for homeless persons, NDVets initially operated out of a five- bedroom home serving eight homeless Vietnam War veterans. They now operate four Transitional Housing Programs, a rapid re-housing and homelessness prevention program called Supportive Services for Veteran Families (SSVF), and four Permanent Supportive Housing (PSH) facilities in Los Angeles County, with additional projects in the pipeline.

NDVets offers a wide array of services. These include substance abuse treatment, counseling, remedial education, job training and placement, as well as parenting and money management classes. Legal and tax assistance are available, as is an active aftercare program and resources for alumni. Veterans leave NDVets with a savings account, housing, a job or other income, computer skills, renewed self-confidence and the support of mentors and peers. Such a transformation takes hard work, motivation and accountability, but the results are life altering— and for many veterans, life-saving.

The Veteran Opportunity Center (VOC) houses up to 156 men at a time and is an assessment and transitional housing program for homeless veterans offering comprehensive services for men with Co-Occurring Disorders with fully equipped classrooms for computer training and Adult Basic Education. It is a one-stop vocational rehabilitation center providing employment services, vocational assessment and career counseling.

The New Directions Oasis for Veteran Women is part of this long-term transitional program and is for female veterans who have served in any branch of the armed forces and who are dealing with issues of homelessness, post-traumatic stress and addiction in addition to other Co- Occurring Disorders such as mental illness and chronic medical problems. It was the first program in the United States designed specifically for female veterans dealing with these issues. Los Angeles has the largest population of homeless military veterans in the nation.



The Los Angeles Homeless Services Authority estimates that more than 4,000 homeless veterans live on the streets of Los Angeles. While the women served in this program may have a wide range of issues, the only determining factors for participation are being a veteran and being homeless.

The program for the women is divided into two phases, the first is an emergency house where residents may stay for up to 90 days and receive therapy individually and in groups, as well as anger management, parenting, computer and other classes. The second is a residence designed for veterans who are employed or going to school.

The only criteria for being a part of the New Directions Program for Men and the Oasis for Veteran Women are being a veteran and having been homeless. There were no discussions about any individual's diagnosis or personal history before or during The Imagination Workshop, however it is important contextually to make note of the physical and psychological reality of the participants in the program. This is especially important when exploring the nature of the effectiveness of this program.

---

## **Post-Traumatic Stress and Veterans**

A recent U.S. Department of Veterans Affairs report states that fewer than 50% of returning veterans in need receive any mental health treatment. The 2021 National Veteran Suicide Prevention Annual Report shows that approximately 17 veterans died by suicide every day in 2019.

According to the NIH (2023): "As the United States faces two decades of continuous war, media and individuals with personal military connections have elevated public and professional concerns for the mental health of veterans and service members. The most publicized mental health challenges facing veterans service members are PTSD and depression. Some research has suggested that approximately 14% to 16% of U.S. service members deployed to Afghanistan and Iraq have PTSD or depression. Although these mental health concerns are highlighted, other issues like suicide, traumatic brain injury (TBI), substance abuse, and interpersonal violence can be equally harmful in this population."

Post-traumatic stress disorder (PTSD) was only formally recognized by the American Psychiatric Association in 1980 largely due to the efforts of those working with Vietnam veterans. Since then research on all aspects of PTSD has grown exponentially and as a general diagnostic category, it has been a way of understanding the range of responses to traumatic events including child abuse, rape, domestic violence, terror and war.

The ubiquity of trauma is all too well-known now,

*“Trauma happens to us, our friends, our families, and our neighbors. Research by the Centers for Disease Control and Prevention has shown that one in five Americans was sexually molested as a child; one in four was beaten by a parent to the point of a mark being left on their body; and one in three couples engages in physical violence. A quarter of us grew up with alcoholic relatives, and one out of eight witnessed their mother being beaten or hit.”* Bessel Van der Kolk (2014, p. 1)

According to the National Coalition for Homeless Veterans, the U.S. Department of Veterans Affairs (VA) states that the nation’s homeless veterans are predominantly male, with roughly 9% being female. The majority are single; live in urban areas; and suffer from mental illness, alcohol and/or substance abuse, or co-occurring disorders. About 11% of the adult homeless population are veterans. Roughly 45% of all homeless veterans are African American or Hispanic, despite only accounting for 10.4% and 3.4% of the U.S. veteran population, respectively.

Homeless veterans are younger on average than the total veteran population. Approximately 9% are between the ages of 18 and 30, and 41% are between the ages of 31 and 50. Conversely, only 5% of all veterans are between the ages of 18 and 30, and less than 23% are between 31 and 50.

America’s homeless veterans have served in World War II, the Korean War, Cold War, Vietnam War, Grenada, Panama, Lebanon, Persian Gulf War, Afghanistan and Iraq (OEF/OIF), and the military’s anti-drug cultivation efforts in South America. Nearly half of homeless veterans served during the Vietnam era. Two-thirds served our country for at least three years, and one-third were stationed in a war zone. About 1.4 million other veterans, meanwhile, are considered at risk of homelessness due to poverty, lack of support networks, and dismal living conditions in overcrowded or substandard housing. Due to veterans’ military service, this population is at higher risk of experiencing traumatic brain injuries (TBI) and Post-Traumatic Stress Disorder (PTSD), both of which have been found to be among the most substantial risk factors for homelessness

81-93 % of female veterans have been exposed to some type of trauma – a significantly higher number than within the nonveteran, civilian population. More than half of female veterans surveyed experienced some type of trauma or abuse before joining the military, indicating that the problem extends far beyond the veteran population. Twenty-seven to 49% experienced childhood sexual abuse and 35% experienced childhood physical abuse.

81-93 % of female veterans have been exposed to some type of trauma – a significantly higher number than within the nonveteran, civilian population. More than half of female veterans surveyed experienced some type of trauma or abuse before joining the military, indicating that the problem extends far beyond the veteran population. Twenty-seven to 49% experienced childhood sexual abuse and 35% experienced childhood physical abuse.

For many, these traumas extended into adulthood, with 29-40% of female veterans reporting sexual assault and about half experiencing physical assault. About 19% of female veterans have experienced some type of domestic violence. Military sexual trauma (MST) in the form of sexual harassment and assault remains a significant concern for female soldiers. According to the U.S. Department of Veterans Affairs, an alarming 20% of female veterans who served in Iraq and Afghanistan have been identified as experiencing MST. According to the U.S. Department of Defense, approximately one in three military women has been sexually assaulted compared to one in six civilians.

In addition, a new study (Burks, 2011) has found that military veterans who identify as lesbian, gay, or bisexual are twice as likely to experience incidents of sexual assault while on active duty compared to non-LGB service members. Specifically, current trends from those surveyed in the study indicate that while on active duty, 32.7 percent of the lesbian, gay, and bisexual population – male and female – experienced some form of sexual assault, compared to 16.4 percent of non-LGB personnel. Of the lesbian and bisexual female veterans who participated in the study, 57.5 percent reported experiencing sexual assault, compared to 37.4 percent of non-LGB female veterans. About 16 percent of gay and bisexual male veteran participants reported at least one incident of sexual assault while on active duty, compared to 3.5 percent of heterosexual male vets.

The experience of trauma prior to enlistment, coupled with trauma experienced while in uniform, make abuse a common denominator among homeless female veterans. The impact of MST is especially pronounced. Female veterans assaulted in the military are nine times more likely to exhibit post-traumatic stress disorder symptoms; are more likely to have problems with alcohol or drugs; have lower economic and educational outcomes; and experience difficulty maintaining relationships, housing, and employment. Even though the female homeless veteran population has tremendous service needs, many of these are going unmet.



## **Treatment**

According to Judith Herman (1992), trauma treatment and recovery unfolds in three stages:

1. The establishment of safety in terms of being safe in one's own body, in the world and in relationship with others which includes restoring a sense of personal power and control.
2. Remembrance and mourning involving reconstructing the trauma through telling the story until it loses its power.
3. Reconnection with others and the world, moving toward the future.

Treatment of PTSD and co-morbid symptoms is complex and multi-layered and most programs including New Directions address all three stages in a variety of ways: medication to balance the neurochemical responses to trauma; top-down methods using talking and sharing stories to experience support, relief, to gain insight, perspective and resolution through individual or group therapy; and bottom-up methods focusing on somatic memories and reconnecting with the body and emotions. These are often integrated with educational and vocational training and many other forms of training and support. Art therapies have been firmly established for years in integrated treatment programs. This includes drama therapy, which has and continues to be utilized effectively, usually focusing on dramatic role-playing and creating dramatizations based upon their experiences.

Given the recent advances in understanding the effects of trauma on the brain, mind, and body, there is a shift in emphasis from talking through and about the past predominantly to bodily-based here-and-now methodologies for fully integrated healing and repair. This gives increasingly important emphasis to treatment modalities that work in concert with other forms of evidence-based treatments and that focus on integrating the somatic techniques with arts-based group improvisational experiences that provide the safety and structure for imaginative, creative play and building the skills that will enable the survivors to live into their future.

In the words of the psychiatrist Bessel van der Kolk (2014), a leading researcher on the current state of trauma treatment:

*“Trauma results in a fundamental reorganization of the way mind and brain manage perceptions. It changes not only how we think and what we think about, but also our very capacity to think.*

*We have discovered the helping victims of trauma find word to describe what has happened to them is profoundly meaningful, but it is not enough. The act of telling the story doesn’t necessarily alter the automatic physical and hormonal responses of bodies that remain hypervigilant, prepared to be assaulted or violated at any time.*

*Trauma remains... the greatest threat to our public health... We seem too embarrassed to mount a massive effort to help children and adults learn to deal with the fear, rage and collapse, the predictable consequences of having been traumatized. Therefore, what are the best ways to treat this threat?...Alternative methods from pharmacological treatments, such as body awareness techniques and invoking the imagination for treatment.*

*For real change to take place, the body needs to learn that the danger has passed and to live in the reality of the present. Our search to understand trauma has led us to think differently not only about the structure of the mind but also the processes by which it heals.*

*Beneath the surface of the protective parts of trauma survivors there exists an undamaged essence, a Self that is confident, curious, and calm, a Self that has been sheltered from destruction by the various protectors that have emerged in their efforts to ensure survival. Once those protectors trust that it is safe to separate, the Self will spontaneously emerge, and the parts can be enlisted in the healing process.”*

Psychological trauma is characterized by helplessness, powerlessness, fear and loss of control in the face of events that are outside the range of usual human experience. The symptoms of post-traumatic stress that occur in reaction to traumatic events generally fall into three major categories:

**Hyperarousal** – the unshakable expectation of threat or danger;

**Intrusive sensory, bodily, emotional and narrative memories** of the trauma;

**Constriction** – the protective numbing and dissociation in the face of terror and isolation.

These responses vary with each person’s unique life experiences in total and the nature of their social support or lack thereof.

According to a review of art therapy with military service members and veterans and its efficacy for PTSD treatment, Ramirez, et al (2016) discusses the need for art therapy as an adjunct to other forms of therapy due to its effectiveness in treating the third symptom cluster:

*“The majority of these articles suggest that through the practice of art therapy, patients with PTSD experienced at least three significant outcomes: 1) the ability to express thoughts which could not previously be verbalised, 2) improved social relationships which led to reduced social detachment, and 3) a general reduction in re-experiencing, hyper-vigilance and avoidance/ emotional numbing symptom clusters with notable improvements in experiencing less anxiety, being able to control intrusive thoughts, and feeling less emotionally numb.*

*Challenges of military service should be met with a supportive culture that is open to implementing art therapy as a treatment modality in addition to current evidence-based practices. This review suggests that if current service members and veterans were placed into art therapy programs as early as possible after being diagnosed with PTSD, they would be at less risk for developing greater PTSD symptom severity.*

*The preferred method of treatment for patients with PTSD receiving care in the VA healthcare system is CBT, however, since CBT is effective in treating only two of the three symptom clusters, it is an incomplete care package. Given the effectiveness art therapy has in treating the third symptom cluster, it is not meant to replace CBT, but rather it is meant to be offered in addition to CBT in order to produce a more comprehensive care package for past and present service members with PTSD.”*

In a report on Creative Forces: Healing Arts for the Military from Johns Hopkins, Bill O’Brien, Director of Creative Forces and Senior Advisor for Innovation to the Chairman at the NEA explains, “When you deal with these psychological health issues and existential types of problems, spiritual wounds, and moral injury, the role that the arts can and should play to help unpack and confront these issues is almost obvious....

Artistic activities allow service members to utilize metaphors and symbolism for self-expression. This helps them access repressed memories and communicate feelings that are difficult to express verbally in cases where combat trauma has shut down the language pathways of the brain....

Important insights have been gained by Creative Forces on the neuroscience associated with the creative arts. We now know, for example, that creative arts therapy in those with physical or psychological injury can help shift one’s internal focus dramatically—from a part of the brain that focuses on survival to the learning brain, which is calmer and more likely to accept new information.

Results published in more than a dozen research papers associated with Creative Forces show that creative arts therapies enable service members to:

- Have fewer flashbacks and nightmares.
- Improve frustration tolerance.
- Cope with grief, loss, avoidance, survivor’s guilt and shame related to wartime.
- Feel a stronger connection with society after returning home.
- Improve self-regulation of anger and anxiety.

- Experience more hope, gratification and confidence.
- Reduce feelings of isolation and stigma.

Finally, an overview of creative arts therapies for the military in the International Journal of Art Therapy states: “The art therapy journey serves as an agent of change, during which [service members] establish a new sense of self as creator rather than destroyer, as productive and efficacious instead of broken, as connected to others as opposed to isolated, and in control of their future, not controlled by their past.”

These findings are consistent with the self-reports of the veterans who have participated in the Imagination Workshop program placing it as an important adjunctive part of holistic treatment for veterans and more generally those suffering from post-traumatic stress. While there are many forms of expressive arts therapies for veterans and several involving theatre, the Imagination Workshop is unique in its specific focus on imaginative play and living in the present.

To quote Van der Kolk (2014),

“Trauma is about the loss of imagination. One stops learning from experience, one stops imagining alternative futures for oneself and others. The world stops. The goal of trauma treatment is to free us from being trapped in our bodies so that we are free to be in our bodies, and from there imaginatively participate in the larger world.

Trauma is an inability to inhabit one’s body without being possessed by its defenses. Not just hyperreactivity, but even more so the emotional numbing that shuts down all experience, including pleasure and satisfaction. The cure for trauma is life. Living life is not the result of the cure; living life is the cure.”



## The Imagination Workshop

Imagination Workshop (IW) is a non-profit theater arts organization committed to using the unique power of the theater and the mentoring of theatre arts professionals (actors, writers, and directors) to provide life-changing artistic opportunities to those suffering from a broad spectrum of mental and emotional disorders co-founded by actress Margaret Ladd and her husband playwright Lyle Kessler and created by Ms. Ladd. IW programs give those suffering from mental illness, frequently alienated or overlooked by society, a safe way to express themselves and gain insights that increase the quality of their lives and often help make their lives more successful.

Founded in 1969, IW is the longest-running theater program of its kind. For more than fifty years, hundreds of actors and writers from Broadway, film and television, including such well-known names as Susan Sarandon, Ted Danson and Sam Waterston, have, through IW, worked on stage with more than forty-five thousand people suffering mental illness, most of whom have never before experienced theater's ability to transcend real life.

Ms. Ladd describes the inspiration for the Imagination Workshop coming from her experience of observing patients in the Austin Riggs Center which was adjacent to the theatre where she was working on the World Premiere of Eugène Ionesco's 'Hunger and Thirst' at Berkshire Theatre Festival. As she recounts that experience,

*"We were invited to see the patients perform Gertrude Stein's 'In Circles.' The production was simple. Their performance was magic, a revelation. All of us were taken aback, to say the least, at the total metamorphosis that we saw in these patients. They inhabited their characters. They were able to leave their own problems, their withdrawn personalities, at the stage door. Instead of their illnesses, the characters and poetic metaphors in which they involved themselves became the focus of their attention. Ionesco summed it up: 'They create from the place that dreams come from.'"*

On stage, those who have difficulty dealing with even the simplest aspects of life suddenly discover that, as a fictional character, they can do all that they ever imagined and more. Through imagination and play the participants develop the ability to imagine multiple versions of any particular story or situation, to be able to see alternate possibilities and to project into the future what possibilities might happen and what the consequences of those outcomes might be. This includes the ability to imagine things being different than they are and to be able to conceptualize what would happen "if" things were different.

The important difference between the characters and plays created through the Imagination Workshop and other forms of theatre is that the characters and the entire story are created by the participants themselves from their own imagination. The key insight Ms. Ladd and Mr. Kessler had was that the difference between playing characters, saying words and performing a story created by someone else and creating the characters, word and story themselves made all the difference in the power of the experience for the participants in terms of the expansion, realization, and integration of aspects of themselves through creative play and embodiment.

It is in this sense that the Imagination Workshop is highly therapeutic while not being a form of therapy in any traditional way. It is therapeutic in the sense of being healing, health-giving, and restorative. By imaginatively creating characters and embodying them there is, in the words of Margaret Ladd, “redirection through the imagination, through metaphors, through characters that begin to lead one out of isolation and to begin to socialize in positive ways.”

IW helps homeless veterans, psychiatric patients, at-risk youth and other disenfranchised individuals synthesize thoughts and feelings in the realm of metaphor through creating and portraying fictional characters far removed from themselves under the direction of specially trained professional theatre artists.

These artists all have extensive professional training and are all currently working as actors, musicians, directors, and playwrights. Often the term “teaching artist” is used specifically in educational settings, however, the actual definition is much broader as stated by the leading expert on teaching artists Eric Booth who defines a teaching artist as “an artist who chooses to include artfully educating others, beyond teaching the technique of the artform, as an active part of a career.”(2009)

In his discussion he includes a definition from Tina LaPadula of Arts Corps in Seattle, *“A Teaching Artist is a practicing artist whose teaching is part of that practice. Teaching Artists don’t necessarily have education degrees, but they might. Teaching Artists are role models for lifestyle, discipline, and skill. They pass on an oral and experiential tradition in ways of thinking, seeing, and being. They are educators; in the truest sense of the word (the root of the word educate is to draw out) they ‘draw out’ rather than ‘put in’. They are guides/facilitators/bridges to creativity. Teaching Artists are social activists.”*

These definitions aptly describe the role of the artists who facilitate the experiences offered by the Imagination Workshop by providing a safe place for adults to play imaginatively as they did when children and because it is only “make-believe”, participants feel free to do and say things in the guise of a character that they may be afraid or unable to express as themselves.

“This works because it is a choice.” Jim McGrath, the Executive Director of Imagination Workshop points out that everything in the Imagination Workshop process is a choice: the choice of character, what to say or not say, do or not do, and there is never a “bad” choice. He reiterated that Imagination Workshop is about exercising choice without fear.

In addition, I have identified specific skills that are developed. These include the following:

- Imaginative Play with Joy, Fun and Humor
- Emotional Self-Regulation and Body Awareness
- Personal Agency
- Thoughtful Risk-Taking
- Patience and Persistence
- Introspection and Self-Reflective Thinking
- Self-Expression
- Empathy and Perspective-Taking
- Interpersonal Communication Skills
- Free Self-Expression
- Leadership and Group Participation
- Creative Thinking

Educators, psychologists, philosophers, artists, and as I mentioned earlier, business experts, all agree about the importance of the imagination for everything our ability to live a meaningful and creative life, and yet few have directly addressed how specifically to develop it as the Imagination Workshop has, not as an implied outcome of artistic training or experience, but as a crucial skill in and of itself.

The failure of imagination has been cited as one of the causes for the worst disasters throughout human history. The training of the imagination takes on even more importance when we understand how the experience of trauma shuts it down, leaving the survivors stuck in a never-ending limbo.

As Bessel Van der Kolk says,

*“Imagination is our greatest asset as human beings, and as long as you can imagine other realities, you are okay. If you are in jail and you can imagine learning to do new things and skills – if you can imagine Shakespeare playing in your mind as you’re locked up – you have alternative realities, and you’re not really a victim of the present. What’s so hard about trauma is that it tends to kill the imagination.” (2014)*

## **Imagination Workshop Sequence and Methodology**

The program consists of weekly 1-hour workshops facilitated by two or three theatre professionals of the course of 10 or more weeks.

### **Overview of the Workshops:**

The facilitators take turns leading various exercises, and all facilitators participate in every exercise along with the workshop participants. I explained that I was there to observe whenever I was there, but when there I always participated in every exercise. This is an important point, in that while there are facilitators and structure, everyone who is there is equally participating fully creating both safety and a lack of hierarchy or the feeling of a teacher-student class dynamic. It is clearly a safe space for play without judgment.

Every session begins in a circle with physical warm-ups and movements, then moves into some form of sound and movement based on a theme where each person does something and then all do what the person created. One of the facilitators would start off with the sound and movement as an example every time.

After the warm-up there is a “passing exercise” where one person will take the hand of another, look them in the eyes, and share with them something based on a prompt from the facilitator like, “If I could go anywhere in the world, I would go to....” And then the person with whom they shared “does the same to the next person and in goes around until all have shared.

After that there is some form of creative exercise involving quickly and imaginatively creating characters, metaphors and descriptions and then interacting with the group in some form. These longer exercises always involve each person “performing” in front of the “audience” either alone or with another participant in an improvised dialogue.

These exercises are framed around a prompt of some kind. It could be a photograph, a postcard, an album cover, or a piece of music, or a specific setting. The participants choose a character connected to the setting to “become” from their imagination and then physicalize it either sitting or standing. They then write down features of their character such as their name, age, and

occupation, and then adding a secret wish, desire, or concern that character has.

After this, a stage space is set up with whatever chairs or tables are in the room and two characters meet and improvise a dialogue. The leaders break in to direct frequently with praise and then encouraging them to find a way to share their secret wish or concern with each other and respond to each other.

The exercises are sequenced and become more complex as the sessions go forward. Everything is totally improvised and fully supported by the whole group with applause after each “performance”. Each person has their moment when the group is paying full attention to them and enjoying their imagination without judgment. Writing was added into sessions as time went on, including the creation of a group poem, the writing of short scenes, creating characters, a group created story, and monologues.

Each session closes back in a circle with each person expressing their feelings about their experience that day and then stating their intention for how the rest of their day will go.

### **The Black Diamond**

The process of creating this play began with Jim McGrath, the director, offering a general prompt saying if they were all looking for something valuable what would it be. The group threw out ideas and finally voted on the black diamond.

Then he said they would be looking for it in four places anywhere in the world and asked what are they? Again the group came up with ideas and voted on Hawaii, Hong Kong, Paris, and Morocco.

Next they each created a character and gave themselves a name, occupation, age, and the reason they needed the black diamond – why it was meaningful to them. They then embodied their characters through improvisation individually and with other characters in dialogue.

After this there were four weeks of writing monologues and dialogue. This included a letter that each of them wrote to someone important to them asking for help in finding the black diamond. These letters became integrated into monologues and songs.

They then created two character scenes on the road in the different locations and in each scene there was some kind of challenge that they were having to deal with.

Finally, they all voted on how the play would end – who would find the black diamond, how would they find it, and what would they do with it when they found it. They voted that the group would find it and they would split the money.

One of the cast members was in the New Directions Women's group that started in the beginning of 2023. When that group folded, they brought her into the play group.

Here is her character's opening speech, which she wrote:

"Dear God, I want to first pray for forgiveness. Please forgive me for not reconciling with my father before he passed. I did not know until it was too late the depth of my father's love for me. He gave his whole life to developing this new technology which he left to me , but the one thing it needs to make it work is The Black Diamond. Lord, if you would only lead me to the Black Diamond, I could complete my father's work. And it will change the world, as we know it. Please hear my prayer, and grant me this divine treasure. I will keep my word that this won't turn into greed if you will only guide me to it. Amen"

When she started with the group, she said she wanted to sing, so as part of the process she wrote song lyrics which Jim McGrath put music to.

Here is her song:

I must keep searching  
For the Black Diamond jewel.  
No one can stop me  
Cuz. I'm not a fool.  
I'll search the world over  
And over again  
Nobody knows all  
The places I've been.

I'll use it for research  
For the greatest show on earth  
It's gonna help technology  
'Cause that's what it's worth.

I must keep searching  
For the Black Diamond jewel.  
No one can stop me  
Cuz. I'm not a fool.  
I'll search the world over  
And over again  
Nobody knows all  
The places I've been.

At the end, when everybody is about to find the diamond, She wrote this for her character:

"Come on now, all of you. Please understand. This is about my father. He died, and I can't get over it. It may have been my fault, I have to finish his work. I have to have the Black Diamond!"

Another example of song lyrics by a cast member who has returned to participate in the last few plays:

I have been here,  
I have been there,  
I have been just about  
Everywhere.  
I've been searching high  
And I've been searching low,  
I've been searching here  
And I've been searching there,  
Searching for the Black Diamond.

Ran into some trouble  
When I met a couple  
Who offered me assistance  
In my quest.  
It was all a scam  
And now here I am,  
Robbed of everything  
I loved best.  
Searching for the Black Diamond.

If you could see your way  
To helping me today  
By sending me some money,  
Darling it ain't funny,  
'Cause I can't give up now,  
It has to be somehow,  
I've gone to too much trouble,  
And I can pay you back double,  
Once I find the Black Diamond



One of the important aspects of the play creation in the Imagination Workshop is that every line of the play and the lyrics to the songs were written by the participants. It was observed that when the script was given to them that contained all the word that they had created, they didn't recognize them as their own!

An observation by one of the teaching artists:

We have one veteran who says he is diagnosed schizophrenic and his affect has always been very withdrawn and quiet. He said he chose to participate in IW because it was helping with his problems with expression. He has graduated from new Directions, but takes the bus 2 hours both ways to continue with rehearsals and the play. He has grown tremendously in the show, with expression, action and volume. He is one of the leads in the play and the first to have his lines entirely memorized.

A scene from the play in performance:



The veterans in the cast receiving applause:



The cast with teaching artists, musicians, and evaluator:





## **Evaluation – Pre and Post Questionnaires**

### **Participants**

The participants in this group were a total of 25 male and female veterans. This number changed over time as some participants transitioned out of the program or moved. Ultimately only 7 participated in the entire process from beginning to end and 3 participants who were “alumni” from previous plays came in for the last half. Nothing was ever discussed about their background historically, their war experience, any psychiatric diagnoses or their future plans. Occasionally there was a passing reference to combat experience, deaths, or using drugs or alcohol, but those were never taken up as a subject of discussion. The focus was always on the imaginative characters and situations created by the group. Over the course of the workshop, given the changes, we had only 7 pre and posttests for this evaluation.

### **Evaluation Methods**

#### **Outcome Measures**

- I met with the interested participants at the VA in West Los Angeles and explained the program with them as well and answered questions. I continued to do this as people joined the group process.
- I created a pre-test of 25 questions based on the perceived and desired outcomes of the program as discussed with Executive Director of IW Jim McGrath and based upon my knowledge of trauma treatment. This was given on the first day or when a new participant joined the group.
- I gave them the post-test of the same 25 questions after the 20 weeks and the performance of the play.
- I did a debriefing session alone with the group after they were done with the questionnaire and listened to their feedback.

**The pre and post-tests measured the following on a five-point scale from “all the time” to “not at all” (See Appendix B for the actual questionnaire)**

1. Focus and following directions
2. Listening , hearing and responding to others
3. Remembering many things, steps and ideas
4. Awareness and self-reflection on their thinking, feelings and body states
5. Positive view of self-worth and value as a person
6. Confidence in expressing ideas and feelings to others in a group
7. Thinking creatively and coming up with many ideas to solve a problem
8. Imagining what others feel like and how things could be different from how they are
9. Ease in taking a leadership role and directing others
10. Ease in working collaboratively with others in a group
11. Ease in resolving conflict in relationships with others
12. Confidence that they can do anything in the world and have something valuable to offer
13. Ease in controlling anxiety, fear or worry and deal with situations well

14. Ease in tolerating frustration and having patience
15. Freedom to play and take risks by themselves or with other people
16. Confidence in their ability to present themselves to others
17. Ease in empathizing with other people and understanding how they feel even when disagreeing with them
18. Ability to support others
19. Hope for their future and a strong sense of faith in their own abilities
20. Strength in their ability to put themselves in someone else's shoes and understand their perspective even when feeling that they are very different from themselves
21. Feeling they are more than anything that has happened in the past
22. A strong feeling of self as they move out into the world
23. Feeling that there are many possibilities open for them personally and in terms of work
24. Feeling that they have integrated past issues and traumas into who they are now
25. A feeling of freedom from having to keep their past pain and traumatic experiences out of their mind.

## Statistical Analysis of Pre and Post Tests

The overall score was created by summing the pretest and posttest scores on the twenty questions in the survey. We will refer to these scores as “total pretest” and “total posttest”. We have also created a third variable called “gain” which results from subtracting the total pretest score from the total posttest score.

**Table one:** Raw data

participant	Gender	Total pretest	Total posttest	Gain
1	F	71	98	27
2	M	62	73	11
3	M	46	51	5
4	M	82	106	24
5	M	56	78	22
6	M	93	106	13
7	M	89	97	8
Total		499	609	110

## Discussion of Findings from the Data Analysis

The findings from the data analysis on this measure show results that correlate with my observations over the course of the 20 weeks, as well as with the statements from the participants themselves and the facilitators. It should be noted that there are many variables that could contribute to these findings as the participants also are receiving ongoing support from various forms of group work such as AA meetings, and other forms of therapy offered by the VA. Below are the areas that showed the most improvement for both groups:

### **Significant Improvement on the following in order of strength:**

- 1. #23: Feeling that there are many possibilities open for them personally and in terms of work**
- 2. #19: Hope for their future and a strong sense of faith in their own abilities**
- 3. #20: Strength in their ability to put themselves in someone else's shoes and understand their perspective even when feeling that they are very different from themselves**
- 4. #8: Imagining what others feel like and how things could be different from how they are**
- 5. #12: Confidence that they can do anything in the world and have something valuable to offer**
- 6. #25: A feeling of freedom from having to keep their past pain and traumatic experiences out of their mind**

**Partially Significant Improvement on the following in order of strength:**

1. **#2: Listening , hearing and responding to others**
2. **#4: Being aware and reflecting on thinking, feeling and body states**
3. **#6: Confidence in expressing ideas and feelings to others in a group**
4. **#18: Ability to support others**
5. **#22: Strong sense of self as move out into the world**
6. **#1: Focus and following direction**
7. **#15: Freedom to play and take risks by themselves or with other people**
8. **#7: Thinking creatively and coming up with many ideas to solve a problem**

The questions that showed the most improvement has to do with involve imagination in terms of possibilities, hope for the future, confidence in themselves, and faith in their abilities. Areas that also showed marked improvement has to do with empathy and perspective-taking, especially for those different from oneself. This is perhaps due to the intense focus on character development and the interaction between all of the characters in a small space. As the relationships grew, the individual characters deepened themselves and in their connection with each other.

The other question that also showed the most improvement and growth related to trauma: freedom from having to keep past pain and trauma out of their mind, and integration of past issues and trauma into who they are now. One of the most powerful statements I heard from a participant was that he was forced to lose his individuality in the military as it was “beaten out of him” and when he came back home, he had no sense of who he was which led to drinking as self-medication for depression. He said that this experience allowed him to find his identity and voice as a human being again and to fully and authentically be himself not only to and with the group, but to an audience with confidence and joy. He cried when he spoke these words and said that the experience changed his life. This kind of transformation and deep experience cannot be quantified and is only hinted at through the data.

One of the teaching artists told me that another veteran said he was diagnosed as schizophrenic and has always been very withdrawn and quiet. He said he chose to participate in IW because it was helping with his fear of expression. He has graduated but takes the bus 2 hours both ways to continue with rehearsals and the play. She relayed how much he has grown tremendously in the show, with expression, action and volume. He was one of the leads in the play and the first to have his lines entirely memorized.



The above stories point to the next strong area of growth which had to do with presenting oneself to others. For several participants this also included job interviews and a sense of confidence presenting themselves to others both professionally and personally.

The importance of feeling the freedom to play, take risks and think creatively cannot be underestimated. The feedback from the group was very strong in their statements that they felt like they were able to “let go of crises, worries, and problems while in the group”. There was an experience that was shared unanimously by the group – they stated that they “had the freedom to feel silly and felt stress- free”. There were also statements having to do with having been “skeptical at first” and then gradually enjoying the process more and more. The other areas indicate improvement in emotional regulation, leadership skills, and supporting others.

### **Written Responses to Questions – Reflective Evaluation**

The week after the play we all got together and the cast all wrote down some answers to a few questions and then we all discussed their experiences.

#### **Some statements from participants**

##### **1. What have been the most important things you experienced and learned during the whole 20 week process?**

“I experienced there is support for veterans no matter what their need is.”

“I learned to be part of a team.”

“I experienced companionship and togetherness. I learned the planning and practice of a play must be lengthy and thorough.”

“That I can be funny and reach out to others without judgment. That I can be myself without trying.”

“Comaraderie [sic] between cast members was highlighted and learned to remain focused.”

“To be more vocal and how to present myself in the medium.”

“Challenging myself and my own boundaries.”

##### **2. How has this experience helped you as part of your process in moving forward in your life?**

“I have grown knowing how to deal with my mental illness.”

“The process of art is helpful because it fills your life with something purposeful.”

“That people is knowledge. (I can learn from others.)”

“It helped me to maintain focus on achieving goals.”

“It helped me practice expression and socializing while exercising my creativity. It’s given me practice to pursue my career goals.”

“This experience has helped me feel more confidence in myself.”

“Helps me feel less isolated.”

**3. How has this process been different from other kinds of therapy or group experiences through the VA or elsewhere?**

“I had more fun. This therapy made me feel more important.”

“Other than my time with my psychiatrist, this is the most effective type of therapy. I do not find 12-Steps or psychotherapy useful.”

“I’m learning to have an open mind.”

“The theatre is unlike any other experience.”

“It’s more social and expressive as opposed to structured and lectured.”

“Simple freedom and wanting to do well for myself and others.”

“More hands-on and interactional.”

**4. What stood out for you from the process of rehearsing and performing the play?**

“What stood out for me in rehearsal was that I learned how to speak out. What stood out performing the actual play was that I learned I could sing in front of an audience.”

“You must be committed to the process.”

“That people were there to help when I needed a push.”

“Trusting other actors on stage.”

“Hearing the audience react!”

**5. What would you say to other veterans that are considering participating in another series of session and what would you say to the administrators about how you feel about the program?**

“I would tell them that you are a great choice. You show concern for us among other things. I would say to the administrators that I am glad I went through this program. It helped me creatively most of all.”

“The process should be offered to all. For the veterans that can commit, they can find great rewards in the program.”

“It’s fun! It helped me to give myself to something I knew nothing about.”

“I’d tell them it is fun, but also requires work and dedication. It gives you freedom to express things you typically wouldn’t feel comfortable doing in a typical daily interaction with regular acquaintances. I’d tell the admins that the program is beneficial medically and socially. Also it provides opportunity for work related experiences.”

“The process helps pull myself and others out of their shell.”

**6. What feedback can you give Imagination Workshop about what we should continue to do or what we could do better?**

“I would say to continue having plays yearly, it opens people up in so many ways.”

“Rehearsal time was adequate. I felt we all had time to learn the lines and be ready for opening night.”

“I think the format is really good, just grateful for the workshop’s efforts and patience.”

“I love the idea of having a play or project to work on. It provides a purpose which is most important.”

“I wouldn’t change a thing!!

## Discussion

There are several critical aspects to the successful healing of the effects of trauma whether in individual or group work. Among them are those highlighted by the Imagination Workshop: safety and security; reconnection, connections and group support; being in the here-and-now, imagination, and playing with reality; possibility, action, and celebration.

### Safety – Security

As Herman says regarding the importance of safety,

*“Trauma affects the entire human organism—body, mind, and brain. In PTSD the body continues to defend against a threat that belongs to the past. Healing from PTSD means being able to terminate this continued stress mobilization and restoring the entire organism to safety. Being able to feel safe with other people is probably the single most important aspect of mental health; safe connections are fundamental to meaningful and satisfying lives.”* (1992, p. 157)

The structure of each session and the way of being of the facilitators create a safe environment for individual participants to explore, play and stretch their imagination, as well as the safety to do this with others. A protected space allows fantasy to be freed and the freedom to translate that fantasy into action without fear of mistakes or looking foolish to others.

Insecurity, unpredictability, and the ever-present possibility of harm is the lived experience that created ongoing hypervigilance and shuts down creativity, imagination, and play as they are simply not conducive to survival and if fact, can be harmful. The ability to experience security within one’s own body, with others, and in the external world is extremely difficult to embody as real when overwhelming experiences of fear and terror have entrained the need to stay on alert.

The creation of a security and safety then allows for the restoration of power and control and the development of a sense of agency. Agency here means the experience of having an effect on others and the world, of a personal sense of being seen and heard by others and of having something to do or say that makes a difference.

Through the physical actions of improvising as created characters and interacting in imaginary scenarios, the participants have a safe way to practice and exercise this sense of agency and personal power, which is precisely what is taken from those that have suffered trauma.

In addition, most trauma therapy now is focused on repeated experiences of moving from immediate responses of flight, fight or freeze to a grounded, mindful state of emotional regulation in the body. This decouples the experience of arousal or stress from fear and automatic defenses to the ability to feel arousal or stress from a place of mindful curiosity. In other words from disconnection to connection. This is precisely what the various exercises are all doing throughout the Imagination Workshop improvisational process.

### **Reconnection and Connections – Group Support**

When a survivor is in the early stages of recovery and memories of the trauma are powerfully dominating, the imagination is limited and narrowed by helplessness, futility and hopelessness, the hallmarks of depression. Through the safety of a supportive environment created by others who are attuned, resonant and empathic, there is a lessening of the power of the traumatic

memories and the ability to both reconnect with lost hopes and dreams and develop new ones. In addition there can be a reconnection with lost aspects of oneself and also the creation of a new sense of self.

The power of true group support cannot be underestimated. Groups provide a sense of belonging, being understood and mirrored by others empathically and is the opposite of the alienation, isolation and shame that accompanies trauma. One of the most telling signs of this kind of safety and reconnection is a decrease in rigidity and an increase in fluidity marked by increased humor, laughter, spontaneity and responsiveness.

The responses from this group clearly speak to the power of the group experience that is provided by the IW and the safety that is created by the facilitators, specifically the amount of laughter, humor and play.

*“Social support is not the same as merely being in the presence of others. The critical issue is reciprocity: being truly heard and seen by the people around us, feeling that we are held in someone else’s mind and heart. For our physiology to calm down, heal, and grow we need a visceral feeling of safety. No doctor can write a prescription for friendship and love: These are complex and hard-earned capacities.” (Herman, 1992, p.202)*

### **Being in the Here-and-Now and Imagination**

The findings from this study highlight the therapeutic importance of the right timing for a group that focuses on the here-and-now rather than the past or the future in any kind of directive way. Current research on trauma treatment is now focusing on methods that actively provide ways for the survivor in creatively and vitally express themselves, engage with others and explore in the present moment.

The IW games and exercises are continually and fully engaging all participants in the present moment. As one participant said, “there was never any dead air, it was always exciting, and you didn’t know what was going to happen next”. It is from fully being engaged in the present that the imagination can be utilized not for creating scenarios of what might happen in the future driven by fear, paranoia or anxiety, by for creative free playing with pure possibilities.

This kind of imaginative combinatory play includes metaphor-making, empathic perspective- taking and placing oneself in another’s shoes or oneself in another possible way of being. The exercise of this skill expands the capacity for holding multiple possible ways of being and of seeing anything. It is also the essential skill in the creation of meaning for one’s life. There are very few places where the imagination is actually **exercised** deliberately and sequentially, even in all forms of arts learning and performance. The specific kinds of exercises that make up the IW program are specifically designed for this through improvisatory play.

Rhythmic synchrony

Movement/dancing

Voice- sounds/singing/speaking

Attuned listening

Embodied empathic resonance/receptivity

## Possibility and Action

Imagination and playing with counterfactuals, possibilities, and things that we might deem impossible are the hallmarks of creative thinking and being-in-the-world. Dr. Carter said to me in conversation about Imagination Workshop and New Directions that the main change he sees in the veterans who have participated is a shift from feeling like everything is overwhelming and impossible to the feeling that anything is possible.

They didn't think they could act or be in a play and they did and were in the spotlight and applauded. What else is possible that they had thought was not? Dr. Carter said that most vets feel that in particular sobriety is impossible and not something that they can sustain or achieve over time. When the vets did they play they saw themselves as successful and that transfers over into their sobriety and in how they view themselves and their future beyond the VA. As Dr. Carter said, it is the action that makes the possibility real.

As Bessel van der Kolk (2014) says,

*“For a hundred years of more, every textbook of psychology and psychotherapy has advised that some method of talking about distressing feelings can resolve them. However, as we’ve seen, the experience of trauma itself gets in the way of doing that. No matter how much insight and understanding we develop, the rational brain is impotent to talk the emotional brain out of its own reality....Our scans have revealed how dread has persisted and could be triggered by multiple aspects of daily experience. They had not integrated their experiences into the ongoing stream of their life. The continued to be “there” and did not know how to be “here” – fully alive in the present.”*

And in the words of the philosopher and aesthetician Maxine Greene (1995),

*“If we can link imagination to our sense of possibility and our ability to respond to other human beings, can we link it to the making of community as well? G.B. Madison, writing about the centrality of imagination, says that “it is through imagination, the realm of pure possibility that we freely make ourselves to be who or what we are, that we creatively and imaginatively become who we are, while in the process preserving the freedom and possibility to be yet otherwise than what we have become and merely are” (1988, p. 191)....Those who are labeled as deficient, fixed in that category as firmly as flies in amber, have little chance to feel they can be yet otherwise than what they have become. Marginalized, they are left to the experience of powerlessness unless (usually with support) they are enabled to explain their “shocks” and reach beyond.”*

## **Celebration**

In the discussion after the play, one of the veterans said that what happened that night was the celebration, congratulations, and pride that he never got when he came back from Vietnam. In fact what he got was the opposite when he returned and he had never been able to get out of that state of mind and thought that any feelings of hope, or wonder, or play were long gone and irretrievable. He says he feels hopeful again for the first time in 40 years and said thank you to the Imagination Workshop for “helping me to rehabilitate myself”.

There is no way to possibly quantify or assess the true value of this kind of experience. How do you quantify joy, hope, pride, belief in oneself, wonder, trust, a sense of being valued and of life being a place of possibility?

There are certain skills and abilities that can be developed and honed through participation in this program and these can be identified and observed, however what is most important cannot be. There are limitations to research, but there is no question when you see the light in someone’s eyes when they speak of participating in a celebration of their individual and shared humanity. As Einstein famously said, “Not everything that can be counted counts, and not everything that counts can be counted.”

## **Conclusion**

The restoration of a person’s imaginative capacity may be one definition of healing when it comes to traumatic stress (Malchiodi 2020). One of the most important parts of healing the effects of traumatic experiences is not just reliving and confronting the past, but full engaging in our current lives and connecting with others with vitality, hope, a sense of self-efficacy, purpose, and joy.

Many current experts in trauma treatment believe that imagination sets the stage for engagement in the world after we have survived traumatic events. When we go through highly stressful experiences such as abuse, war, chronic poverty, domestic violence, neglect, racism, or a global pandemic, or singular events like sexual assault or an unexpected loss, we may experience a disruption in our sense of identity, safety, and connection to others. These ruptures can contribute to anxiety, depression, and emotional dysregulation which may, in turn, prompt helpful or harmful coping strategies such as avoidance and social isolation.

Nothing can take the place of live experiences, where two or more people improvise or role-play scenarios from their own imagination and another's point of view, engage the psychological processes that contribute to empathy such as mirroring and Mentalization with a base of respect, a capacity for listening, an acknowledgment of perspectives other than our own, and a willingness to take personal and creative risks together towards a common goal. As one of the veterans said, "Social living is the answer, not social media."

Being able to make-believe gives people a chance to try out different possibilities and to create new storylines about their lives in a less risky environment. We can, in fact, rehearse the change we wish to be, see, and create.

Exercising the creative imagination allows us to go places that would be impossible otherwise. The creation of a play and a new world becomes a portal to a reality where anything is possible, where we can create a new story about ourselves, the world, and our lives. It results in positive shifts in thoughts and feelings, ultimately the discovery of novel ways to overcome life's challenges. Art, and in this case improvisational theatre gives individuals a vital way to express and communicate their inner experience of suffering, joy, fear, hope, passion, and compassion which connects them to others through their shared humanity and results in feeling less alone. This is important given that social support is a critical factor in how we manage life's stressors, especially for those who have experienced trauma.

Art can also bring visibility to people and concerns that we have neglected as a society. With its ability to engage, connect, and sustain us, art and artistic programs such as the Imagination Workshop show great promise in reducing isolation and helping people to recover their creativity, imagine a better future, put ideas into action, and feel alive again.

It is clear from the combination of findings from the pre and post-tests over the years, the observations of facilitators, audience members, and the statements from the participants themselves in combination with my own observations, the IW provides an important therapeutic experience for those that are recovering from any form of trauma. It provides an opportunity for camaraderie, imaginative play, embodied self-awareness, empathy, mindfulness in a creative, expressive and healing environment.



Specifically, this program addresses the needs Judith Herman identified as phase one of recovery: The establishment of safety in terms of being safe in one's own body, in the world and in relationship with others which includes restoring a sense of personal power and control, and phase three: Reconnection with others and the world, moving toward the future.

Finally, through the art of theatrical improvisation the IW sessions provide repeated experiences of being seen and heard by others; listening and responding to others; empathy and perspective-taking; play, spontaneity, fun, laughter, humor, metaphor-making, being and living in the present, and the development and exercising the imagination - free cognitive play with possibilities, hopes, ways of being and dreams.

The Black Diamond in my view is the heart and soul of each of these veterans which even if wounded, can never be lost.

Here is a video created by one of the participants about the play and the Imagination Workshop.

<https://youtu.be/JRAvF20deDM>

## References

- Ali, A. & Wolfert, S. (2016). Theatre as a treatment for posttraumatic stress in military veterans: Exploring the psychotherapeutic potential of mimetic induction, *The Arts in Psychotherapy* 50 (pp.58-65)
- Booth, E. (2009). *The music teaching artist's bible*. Oxford University Press, Oxford, UK
- Booth, E. (2001). *The everyday work of art: Awakening the extraordinary in your daily life*. Iuniverse.com, Lincoln, NE
- Burks, D. (2011). Lesbian, gay, and bisexual victimization in the military, an unintended consequence of “Don’t Ask, Don’t Tell”? *American Psychologist* Vol. 66, No. 7, 604 – 613
- Frankl, V. (1959). *Man’s search for meaning*. Beacon Press, Boston: MA
- Greene, M. (1995). *Releasing the imagination: Essays on education, the arts and social change*. Josse-Bass Inc., San Francisco: CA.
- Herman, J. (1992) *Trauma and recovery: The aftermath of violence – from domestic violence to political terror*. Basic Books, NY: NY.
- Malchiodi, C. (2020). *Trauma and expressive arts therapy: Brain, body, & imagination in the healing process*. Guilford Press, NY:NY.
- NYU Steinhart News (2018). *Can Art Save Lives? Questions for Nisha Sajnani on How Drama Therapy Heals*
- Ramirez, J., Erlyana, E., Guillaum, M. (2016). A review of art therapy among military service members and veterans with post-traumatic stress disorder. *Journal of Military and Veterans Health*, Vol. 24, Issue 2, Pgs. 40-51.
- Reeves, M & Fuller, J. (2020) We Need Imagination Now More Than Ever, *Harvard Business Review*, April 10
- Stuckey, H & Nobel, J. (2010). The Connection Between Art, Healing, and Public Health: A Review of Current Literature. *American Journal of Public Health*. 2010 February; 100(2): 254–263.
- Van der Kolk, B. (2014). *The body keeps the score*. Penguin Books, NY: NY.
- Zogas, A. (2017). US military veterans’ difficult transitions back to civilian life and the VA’s response. *The Costs of War*, Watson Institute, Brown University.



## **Biography – Victoria Stevens**

Victoria Stevens, Ph.D., FIPA is a licensed clinical psychologist, psychoanalyst, speaker, researcher and educator. She holds a BA with honors in philosophy, cello and theatre from the University of Kansas, an MA and Ph.D. in clinical psychology from The Chicago School of Professional Psychology (CGI in Los Angeles) and specialized certifications in Hypnosis and the Treatment of Victims and Perpetrators of Violent Crimes. Her psychoanalytic certification is from the Psychoanalytic Center of California, mentored by James Grotstein, and she studied interpersonal affective neurobiology with Allan Schore for over 15 years. Her theatre training includes the Lee Strasberg Institute, University of London, and members of the Open Theatre.

Her research specialty is the study of the development and inhibition of creativity in children and adults, with an emphasis on the relationship between creative thinking, neurobiology, emotional development and affect regulation, trauma, the arts and cognitive processes. She has integrated her experience as a classically trained cellist, singer, actress and dancer with her expertise in psychology and pedagogical theory to develop innovative art education curricula and assessments, teacher training programs and trainings for mentors who work with foster children and “at-risk” youth. She is a consultant for A Sense of Home, a non-profit providing homes for emancipated foster youth, and the Imagination Workshop, a non-profit providing theatre improvisation as a form of healing trauma for veterans, psychiatric patients and “at-risk” youth.

She is a founding faculty member of the California Institute of the Arts Teaching Artist Training Program and on the faculty of University of California Santa Barbara in the PhD program in Clinical Psychology, Antioch University Santa Barbara for the master’s in clinical psychology Program where she was the co-creator of the Somatic Psychology and Trauma concentration and certification programs at Antioch University Santa Barbara which started in the fall of 2017, and Antioch University Los Angeles in the Trauma Specialization Program. She is on the faculty of the PsyD and PhD Programs in Clinical Psychology, as well as the PhD in Integrated Healing Program focusing on integrated approaches to trauma at Pacifica Graduate Institute and HMI College of Hypnosis. She has been a faculty member at a number of institutions: California Institute of the Arts School of Critical Studies, Mount St. Mary’s College, and the Santa Barbara Graduate Institute for Infant and Child Development. She provides professional development training for teachers in public and private schools across the country on the subjects of creativity, the arts, emotional regulation, imagination, empathy, and metacognition as they relate to life-long learning, academic achievement, and personal fulfillment for all children.





## **Appendix A**

### **Questionnaire Pre and Post**

#### **IMAGINATION WORKSHOP FOR NEW DIRECTIONS QUESTIONNAIRE**

Name \_\_\_\_\_ Date \_\_\_\_\_

This questionnaire is for our evaluation purposes only. All of your responses will remain confidential. Please circle the statement under the following questions that expresses your honest feelings about what is true for you right now in **most** situations in your life.

Thank you for your participation and help in our quest to make this the most extraordinary program possible!

**1. I find it easy to focus and follow directions**

All the time/Most of the time/Sometimes/Rarely/Not at all

**2. I find it easy to really listen, hear others and respond to them**

All the time/Most of the time/Sometimes/Rarely/Not at all

**3. I find it easy to remember many things, steps and ideas**

All the time/Most of the time/Sometimes/Rarely/Not at all

**4. I feel strong in my ability to be aware of and reflect on my own thinking, feelings and body states**

All the time/Most of the time/Sometimes/Rarely/Not at all

**5. I have a very positive view of my self-worth and value as a person**

All the time/Most of the time/Sometimes/Rarely/Not at all

**6. I feel confident in expressing my ideas and feelings to others in a group**

All the time/Most of the time/Sometimes/Rarely/Not at all

**7. I find it easy to think creatively and come up with many ideas to solve a problem**

All the time/Most of the time/Sometimes/Rarely/Not at all

**8. I find it easy to imagine what others feel like and how things could be different from how they are**

All the time/Most of the time/Sometimes/Rarely/Not at all

**9. I find it easy to take a leadership role and direct others**

All the time/Most of the time/Sometimes/Rarely/Not at all

**10. I find it easy to work collaboratively with others in a group**

All the time/Most of the time/Sometimes/Rarely/Not at all

**11. I find it easy to resolve conflict in relationships with others**

All the time/Most of the time/Sometimes/Rarely/Not at all

**12. I feel confident that I do anything in the world and that I have something valuable to offer**

All the time/Most of the time/Sometimes/Rarely/Not at all

**13. I find it easy to control anxiety, fear or worry and deal with any situation well**

All the time/Most of the time/Sometimes/Rarely/Not at all

**14. I find it easy to tolerate frustration and have patience**

All the time/Most of the time/Sometimes/Rarely/Not at all

**15. I feel free to play and take risks by myself and with other people**

All the time/Most of the time/Sometimes/Rarely/Not at all

**16. I feel confident in my ability to present myself to others**

All the time/Most of the time/Sometimes/Rarely/Not at all

**17. I find it easy to empathize with other people and understand how they feel even if I disagree with them**

All the time/Most of the time/Sometimes/Rarely/Not at all

**18. I feel strong about my ability to support others**

All the time/Most of the time/Sometimes/Rarely/Not at all

**19. I feel hope for my future and a strong sense of faith in my own abilities**

All the time/Most of the time/Sometimes/Rarely/Not at all

**20. I feel strong in my ability to put myself in someone else's shoes and understand their perspective even if I feel they are very different from myself**

All the time/Most of the time/Sometimes/Rarely/Not at all

**21. I feel that I am more than anything that has happened to me in the past**

All the time/Most of the time/Sometimes/Rarely/Not at all



**22. I feel strong in my sense of self as I move out into the world**

All the time/Most of the time/Sometimes/Rarely/Not at all

**23. I feel that I have many possibilities that are open for me personally and in terms of work**

All the time/Most of the time/Sometimes/Rarely/Not at all

**24. I feel that I have integrated my past issues and traumas into who I am now**

All the time/Most of the time/Sometimes/Rarely/Not at all

**25. I feel a freedom from having to keep my past pain and traumas out of my mind**

All the time/Most of the time/Sometimes/Rarely/Not at all































