



## Research Article

## Conducting playback theatre with older adults—A therapist's perspective

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## ABSTRACT

Playback Theatre (PT) is a form of improvisational theatre that centers on the personal story. Therapists conduct PT with older adults (PT-O) in a therapeutic setting. However, there are only a handful of studies to support its use. This report presents the experiences of therapists who conduct PT-O in a group therapeutic setting. Eight therapists were interviewed about their experience of conducting PT groups or the use of PT tools in a therapeutic setting with older adults. Data were gathered and analyzed using Grounded Theory to generate concepts and inter-related categories. The constructed theoretical PT-O model yielded four major categories that represent the four key aspects of the process and its healing effects: 1) PT brings personal stories to life, thereby generating therapeutic value from the testimonies and reconstruction of one's life story in old age; 2) Playing within the stories of others encourages playfulness, fun, flexibility and self-development along with a sense of relevance and essentiality for older adults; 3) The aging body joins the spirit, resulting in a sort of awakening, which becomes visible through the creative process; 4) A shared, group experience is created for the older participants. Based on the findings, we constructed a theoretical model that anchors the key concepts relating to the PT-O. These concepts portray guidelines for PT-O process. The model also illustrates PT-O's therapeutic value, although further research is necessary to more fully examine the efficacy of PT within the therapeutic setting in old age. Implications of these aspects to conducting PT-O are discussed.

## Introduction

The prolonged life expectancy of recent decades has created a fundamental need to develop available therapeutic interventions tailored for older adults, which may strengthen coping resources and enhance mental well-being (World Health Organization, 2015; World Health Organization, 2016). Studies show that therapy supports centered on processing life-stories, life-review and reminiscence - called *life-story-work* - have a positive effect on older adults' psychological well-being (Bohlmeijer, Roemer, Cuijpers, & Smit, 2007; Haight & Webster, 1995; Korte, Bohlmeijer, Cappeliez, Smit, & Westerhof, 2012; Lewis & Butler, 1974; Pinquart & Forstmeier, 2012; Soltys & Knuz, 2007; Westerhof, 2016). Life-story-work has been adapted to the aging development process, which emphasizes that studying one's life story in old age enhances individuals' sense of integrity, gratitude, and acceptance of life (1982, Erikson, 1959), and allows older adults to reconsider past experiences and overcome unresolved conflicts (Butler, 1963).

*Playback Theatre* (PT) is centered on life-stories; older adults can recall and explore past experiences in a creative and safe environment. Therapists use PT as a life-story-work approach; promoting well-being in old age. The aim of this research is to further understand how therapists interpret the process of PT groups in a therapeutic setting with older adults.

PT is a form of improvisational theatre created in response to a personal story from the audience (H. Fox, 2007; Salas, 1993). The term *playback* refers to the gentle movement of a personal story from the audience, to the stage, and then *back* to the audience, as an improvisational dramatic action (Lubrari Rohnik, 2009). PT was founded by Jonathan Fox, his partner Jo Salas and their original Playback Theatre Company in 1975 in the Mid-Hudson Valley in New York (Rowe, 2007). Their work originated in an informal type of non-scripted, personal theatre, which was meant to revive the earlier goal of theatre - to preserve memory and hold the tribe together (H. Fox, 2007). This idea spread to international dimensions; today there are

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hundreds of registered groups in over 60 countries (IPTN, 2018).

PT has a ritual framework that defines the roles of the participants: the conductor, the teller, the actors and the audience. In addition, it also defines the sequence of events illustrated by telling the story, defining roles for the actors, improvising with the story material, and finally the act of bringing the story back to the teller (Fox et al., 1999). Although PT does not define itself as a therapy method (Fox, 2007bb), the literature mentions its healing potential. PT unites therapeutic aspects such as deep encounters with personal stories, creative processes and social connections (Fox et al., 1999; Salas, 2007, 2009). For example, participants in a PT course, challenged with mental illness, reported PT as enhancing self-esteem, self-knowledge, fun and relaxation, as well as stimulating one's sense of connection for others (Moran & Alon, 2011). A recent study indicates that 18 older adults experienced improvement in their emotional state after undergoing PT training (Chung et al., 2018). The ability to focus on one's personal story in a creative theatre group process has made it a common approach for drama therapists and group therapists (Barak, 2013; Chesner et al., 2002; Landy, 2006). PT has been adopted in a wide range of therapeutic settings with diverse populations such as children at risk (Salas, 2007), older adults (Chung et al., 2018), hospitals, and mental institutions (Haneji, 1998; Larkinson & Rowe, 2003; Rowe, 2007).

Making use of the dramatic reality (Pendzik, 2006) in order to explore individual narratives is an accepted practice in drama therapy (Dunne, 2000, 2003), psychodrama (Brown-Shaw, Westwood, & De Vries, 1999), theatre (Mangan, Sarlos, Goldingay, & Mitchell, 2013; Schweitzer, 2007) and PT (Barak, 2013). For example, life-review integrated with drama therapy in old age was found to enhance meaning in life, self-acceptance and successful aging; to increase positive relationships with others and reduce depressive symptoms (Keisari & Palgi, 2017). PT is centered on the participants' life-stories and enables older adults to explore and process their life-stories within the dramatic reality. Beyond this, it provides older adults with an opportunity to engage in a creative theatrical process.

Indeed, creativity and art were found to promote mental, cognitive and physiological health in old age (Castora-Binkley, Noelker, Prohaska, & Satariano, 2010; Cohen, 2006; Fraser et al., 2015; Malchiodi, 2015; Young, Camic, & Tischler, 2016). In addition, theatre groups, in general, were found to improve cognitive functioning (Noice & Noice, 2006, 2009; Noice, Noice, & Kramer, 2015), and other essential resources for coping with aging challenges such as creativity, pleasure and social involvement (Rickett & Bernard, 2014; Castora-Binkley et al., 2010; Lomas, 2016; Rickett & Bernard, 2014). In spite of this data, the literature indicates a lack of research-based theoretical models to guide art therapists in their work with older adults. Furthermore, there is a paucity of studies dealing with drama therapy in old age, in general, and even fewer that focus on exploring the life-stories of older adults in the dramatic reality. Although PT groups with older adults are being conducted, there is a lack of research-based theory that explores the underlying mechanisms that enhance the therapeutic process for conducting PT with aging populations. Therapy for older adults has its unique aspects, including the developmental

issues of the aging population and age-relevant adaptation, which need to be considered (Kennedy & Tannenbaum, 2000). Therefore, the aim of this article is to present the therapist's perspective regarding the conducting of the PT process, as a therapeutic approach for older adults, which places one's life-story at the center of a creative group process.

## Method

This qualitative study is based on a phenomenological perspective (Kvale, 1996), to explore people's experiences from their own point of view, within the contexts of their lives with others in time and space. This method reveals multiple points of view, providing an in-depth understanding of how therapists perceive the conducting of the PT-O process.

### Method approach

A grounded theory approach was selected for this study (Glaser & Strauss, 1967). According to this approach, the research aims to move beyond description and generate a theory grounded in data from the field. This, in turn, allows the creation of concepts and categories, and their inter-relationships (Charmaz, 2014; Strauss & Corbin, 1990). We wanted to develop a conceptual model that would delineate the process of PT groups with older adults in a therapeutic setting, and explain this process within the specific context of aging.

### Participants

This study is based on the cumulative data of interviews with therapists ( $n = 8$ ) who:

1) conduct therapy groups with older adults based on the PT ritual; or 2) use PT tools in therapy groups centered on the process of bringing up and exploring individual personal life stories in old age. This is an intensive sampling of therapists who have rich experience with the aging population. All therapists conducted a weekly group meeting for at least 6 months. In order to identify the participants, we contacted the "Israeli Playback Association", in an attempt to find therapists who specifically work with older adults. We also used our professional contacts with drama therapists in Israel. Four females and four males actively working as therapists and group conductors in various settings were identified (Table 1). Their ages ranged from 30 to 65 and their clinical experience varied from 2 to 23 years. A total of 7 participants were trained as therapists (clinical psychologist, social worker, drama therapist, psychodramatist); one had training as a group facilitator and an actress. Most of them ( $n = 6$ ) conducted groups in social clubs in community dwellings. Two of them worked with people suffering from dementia and most of them ( $n = 6$ ) conducted groups of older adults with normative cognitive functioning. All participants were trained in their professional past in acting, improvisation, PT, psychodrama and drama therapy.

**Table 1**  
Study Participants.

	Gender	Age	Profession	Clinical experience (years)	Elderly population
1	M	47	Psychologist	23	Community dwelling in social clubs and Holocaust survivors
2	F	49	Drama therapist	20	People with dementia in day centers and nursing homes
3	M	43	Social worker	11	Community dwelling in social clubs and Holocaust survivors
4	M	45	Drama therapist	16	Community dwelling in social clubs
5	F	30	Drama therapist	2	People with dementia in nursing homes
6	F	65	Drama therapist	15	Community dwelling in social clubs
7	F	48	Group facilitator	5	Community dwelling in social clubs
8	M	35	Psychodramatist	3.5	Community dwelling in social clubs and day centers

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