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Using The World As A Stage To Benefit Refugees

AN HONORS THESIS

College of St. Benedict/St. John's University

In Partial Fulfillment

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by

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PROJECT TITLE: Using the World as a Stage to Benefit Refugees

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Abstract

The present study looked at whether theatre could be used as a successful intervention for refugees living in the United States. Using Boal's (1985) Theatre of the Oppressed model, Karen refugees from Laos and Thailand, now living in Minnesota completed a four day workshop. Before and after the theatre workshop the participants were tested on overall well-being (self-esteem and mood), creativity, and English language abilities. Significant improvements were found for overall well-being. In addition, the workshops were shown to have the greatest impact on those who had a lower English language ability to start. Overall, theatre appears to be a promising tool for helping refugees and other marginalized groups and the benefits should continue to be studied.

Using the World as a Stage to Benefit Refugees

*All the world's a stage,
And all the men and women merely players:
They have their exits and their entrances;
And one man in his time plays many parts.*
William Shakespeare (1623)

When coming to a new country, refugees report problems of feeling disconnected and a loss of community. Refugees often go through an acculturation process. Usually a negative experience, acculturation can be defined as the changes an individual must make when in contact with a new culture (Mio, Barker, Tumaming, 2012). Countries that have high immigrant or refugee populations are working on creating the best system to accommodate their needs. Creative approaches—theatre, dance, music and visual art—can sometimes be the best intervention simply due to the unique combination of structure and freedom (Grainger, 1990; Johnson, 2000). In addition to overall well-being, one of the most common problems refugees and immigrants face is learning a new language. Learning a new language can be an arduous process unless the refugee or immigrant is exposed to it before he or she arrives in a new country/home. Boal (1985) has argued that theatre is a literary tool that can improve language proficiency in an oppressed group. Theatre, when used properly, can be an alternative intervention that can address the language difficulties and psychological well-being problems that refugees and immigrants experience. Theatre has been adapted and modified to become a new therapy program: drama therapy. Creators of drama therapy recognize that theatre can be a psychological well-being intervention; its nature lends itself to creativity and the ability to create something new. Simply using one's experiences can allow for discovery through the theatre.

Theatre

The Greeks are known for creating what we recognize as theatre. Theatre foremost provided entertainment but also addressed societal issues. Theatre gave a voice to problems in society that were often overlooked. Aristotle believed that comedy was the best for examining social inequalities while tragedy was best for examining the internal psychological problems (Aristotle, 1995). Plays allow an audience to watch and reflect on the characters' situations. The audience can learn from the characters' mistakes or successes without having to go through it themselves.

Theatre became less of a form of entertainment and more a form of expressing real life beginning in the 1930's. Clurman, along with Strasburg and Crawford, created a paradigm shift in the theatre world; theatre was a place in which "problems of their life, past and present, could be given a voice" (Clurman, 1975, p.4). Now, realism is the common genre amongst American directors (Martin, 2013). Plays need to imitate real life and reflect real struggles. Every character on stage needs to connect to the audience. The realness and truth that theatre seeks to find helps an audience come to an understanding (Martin, 2013). Theatre has allowed people to find the truth about one's self and other difficult topics such as war and politics (Martin, 2013). To successfully portray realism, actors are encouraged to know exactly who they are so as they can easily adopt another character (Hagen, 1973).

Stanislavsky, a revolutionary thespian, sought to create natural and real performances each night. His work was a major influence for Strasburg, Crawford, Clurman, Hagen, and all of Western theatre. He believed that acting needed to be inspired and reflect a true emotion. In other words, the actor or actress should be feeling and living what is going on-stage. To do so, one begins with becoming acquainted with their body and physicality. Stanislavsky believed this

could be done through gymnastics, breathing exercises, singing, dancing, etc. (Hewitt & D'Angelo, 1932). After the body was well trained, Stanislavsky said the mind needed to be trained as well. It is through having a trained mind and body that an actor or actress could access the “realness” needed on stage. An actor does this in many ways, one of which is imagination. An actor or actress is instructed to imagine certain situations, real or not, and commit to believing these situations exist. This exercise brings up memory and emotions which the actor or actress can store and use later on stage. Through training the body and the mind, one can become a successful and present actor or actress (Hewitt & D'Angelo, 1932). At the heart of Stanislavsky's work there was the idea of becoming aware of who one is. This idea is prevalent in most Western Theatre approaches. It is intensive work which was created to improve acting. This was a pivotal moment in acting history as the acting began to become an internal experience for the actor rather than an external representation of an emotion. For example, the actor is now encouraged to feel the action and emotion on stage rather than just act it out or show the emotion. To be vulnerable like this on stage comes from a deep reflection on the self and confidence in who one is (Hewitt & D'Angelo, 1932).

Inspired by Aristotle and Brecht, Boal took a new approach to theatre. Still using realism, Boal began to use theatre as a means for social activism. Boal believed that people create characters in real life, and become the “protagonist”. This was a shift away from Aristotle's emphasis on dramatic structure and Brecht's emphasis on the message and meaning. Theatre is a language, Boal believed, that allowed anyone to express themselves and learn new concepts. In 1970, Peru was struggling to unite the country under one language, Spanish. There were 45 different languages in addition to multiple dialects of those languages and about one third of the country was illiterate (Boal, 1985). When Boal went to Peru, he created what has

been titled the *Theatre of the Oppressed*. He partnered with the government to make Spanish the national language throughout Peru and unite the country. As theatre is not dependent on a language, and is a language in itself, Boal was able to work with these non-native Spanish speakers, oppressed people, and free them from the constraints of being illiterate. He focused on using the body and making pictures to converse with the Peruvians. Eventually, thanks to this form of theatre, the participants in Boal's theatre were having complex discussions in Spanish (Boal, 1985).

Theatre continues to thrive in realism and social activism. A little over ten years ago, Matthew Shepard, a gay man from Laramie, Wyoming, was beaten and brutally killed because of his sexuality. The Tectonic Theatre Project and Moisés Kaufman ventured to Laramie to create a play, *The Laramie Project*, to bring awareness to discrimination against the GLBTQ community. The group was spreading their message via theatre (Tectonic Theatre Project). Similarly, the Emily Project uses theatre and monologue writing to bring about awareness for eating disorders (Emily Program, 2014). Additionally, in Chicago, a group called TeenStreet strives to help students who struggle to stay academically motivated in school. These students work to create original pieces of theatre (through dance, movement, scenes, and songs) about their stories. While creating these stories, the teenagers learn about writing, reading, critical thinking, and most importantly, teamwork (Worthman, 2002). Theatre is emerging as a tool to tell stories and to connect with a variety of people.

Drama Therapy

In the United States, drama therapy is emerging as a new field. Drama therapy can be seen as the harmonious relationship between psychology and theatre. In a sense, it seeks to use a scientific and artistic approach to drawing out the inner voice. Irwin, a founding member of the

National Association for Drama Therapy, believes the ultimate goal is to promote the development of the client and bring about positive feelings (Irwin, 2000). Drama therapy is all about discovering the underlying truths and making the “invisible become visible” (Irwin, 2000). The founder of drama therapy, Moreno, meant this to be the purpose of drama therapy—becoming aware of human impulses and the beliefs we hold (Irwin, 2000). It is through theatre games and exercises that the drama therapist works to better the client psychologically and emotionally (Drama therapy—NYU Steinhardt, 2013). In its early stages, drama therapy was created in the footprints of existential psychology, meaning that the focus of drama therapy was on the emotional, interpersonal, and the spiritual aspects of life (Kellermann, 1992). In her article, Irwin highlights a case study with a child named Carol. When Carol first came to Irwin, she was electively mute. Irwin managed to engage Carol with coloring exercises, play, and drama games. Through these activities, Irwin was able to get Carol talking and expressing more positive emotions. (Irwin, 2000).

Moreno’s founding beliefs still permeate the field today (Wilson, 2011). For example, when Croyle’s 4th and 5th grade class witnessed the horrible nightmare of the planes crashing into the Twin Towers on September 11, 2001, Robert Landy, director of Steinhardt’s NYU Drama Therapy program, used drama therapy as a tool to help the students cope. At the end of every day, Landy asked, “What did we learn today?” (Stern, 2002). The students gave varied answers, from learning about heroes and villains to the importance of tragedy and comedy. Landy gave the students a chance to come to an understanding of what they discovered about themselves and the event through theatre games. What resulted was a poignant original play based on the students’ experiences which gave them words and led to an understanding of what happened (Stern, 2002).

In Wethered's book she examined the use of drama therapy on patients in a psychiatric ward. Wethered writes about countless case studies in which an individual's physical movement and body language allows the therapist to understand more about him or her. After doing movement and theatre exercises, individuals claim that they are more centered and have a better understanding of who they are (Wethered, 1993). Skeiker (2011) found this same idea to be true when he brought theatre to Palestinian youths in a refugee camp orphanage. Refugees are forced from their homelands due to persecution and find themselves in new places with different languages, different cultures, and different social norms. Skeiker found that the drama created a social bond in the community that was not present in the refugee camp before. The children were given a chance to voice their stories and experience through these theatre exercises (Skeiker, 2011).

Refugees

Currently within the United States, specifically within the state of Minnesota, there has been an influx of Karen refugees. The Karen people are an ethnic group originally from Burma (Myanmar), Thailand, and India. When Burma became a military dictatorship, there began an ethnic cleansing of the Karen people. Thousands of Karen people have been forced to flee their homes and have been placed in refugee camps (Feurtes, 2010). Some have managed to escape to other areas such as America, Canada, Australia, and Europe. Some of the most common health problems of refugees are starvation and other treatable diseases such as mumps and measles. Most refugees have been denied adequate health care (Paxton, Sangster, Maxwell, McBride, & Drewe, 2012). There are not a lot of services available in the refugee camps leading to a prevalence of starvation (Paxton et al., 2012). Refugees report having their homes, villages, stores, schools and farms burned, they have no home to return too. Without homes, stores or

schools refugees lack adequate basic needs such as food, shelter and education. Even with everything gone, refugees are afraid to go back to their home in the Karen State (located in the southern part of Burma (Myanmar)) because the military dictatorship still has control (Ongoing militarization prevents Lu Thaw Township IDPS from returning home, 2014).

The challenges that refugees face are recognized and studied by psychologists to fully understand the impact of their struggles and hardships. From 2009 to 2012, there was an influx in the number of suicides amongst Bhutanese refugees who had resettled in the United States (Center for Disease Control and Prevention, 2013). In individuals who considered suicide, there were common underlying traits: a lack of citizenship, having to flee suddenly, and a lack of freedom to relocate. In addition, most Bhutanese refugees also reported having difficulties with language. This made it more difficult for these people to find work and led to higher family conflict (Center for Disease Control and Prevention, 2013). After an examination of refugee research, these problems are found across other refugee populations.

In a study conducted by van Tubergen (2010), he noticed similar problems with refugees in the Netherlands, specifically, in terms of language acquisition. van Tubergen (2011) interviewed refugees from Afghanistan, Iran, Iraq, former Yugoslavia, and Somalia. All of these refugees were forced to live in the Netherlands at the time of the interview. In the Netherlands, when a refugee first arrives, he or she must live in the refugee reception center and complete an integration course. The hope is that with the reception center and course, the refugees will become acclimated to the Netherlands. van Tubergen (2011) noted that the ability to speak Dutch, the access to the Dutch language before arriving in the Netherlands, the education level of the refugees' parents, and the individual's age improved language acquisition and eased the

transition. However, the mental health of the participants did not influence the ease with which they learned Dutch.

There are currently about 6,500 Karen refugees in Minnesota, with majority of those refugees residing in the first tier suburb, Roseville, of St. Paul (Moonieinda, 2011). This is the first time that Roseville has had such a huge refugee population, as a result, there are few services available to these refugees (Minnesota Department of Human Rights, 2009). Much like van Tubergen (2010) reported, Watkins, Razée and Richters (2012) found that the primary problem, on average, for Karen refugees was the English language. Researchers found a negative correlation between fluency in English and well-being; those who did not know English as well were more stressed and had lower self-efficacy (Watkins et al., 2012). Furthermore, sitting in desks, listening to a teacher, and other educational factors were novel to the refugees. In Thailand, the Karen people would sit on the floor. Finally, the Karen refugees are known for being shy; they believe suffering is a component of human life, and each person must quietly accept that. To best accommodate the Karen refugees, Watkins et al. (2012) suggests to teach classes in English and be aware of the needs and history of these people.

Researchers are trying to determine the best way to help the refugees adapt to a new country. As noted above, Skeiker (2011) noticed young children in orphanages in refugee camps had problems assimilating to the new culture. Through telling stories, the young children learned from each other, developed a strong community and began to trust (Skeiker, 2011). After the workshops, the children learned that there is support for them, with one participant reporting that she can now “lean on [her] friends in times of stress” (Skeiker, 2011). This theatre approach by Skeiker (2011) suggested that theatrical interventions could have a powerful effect on refugees.

Those in Skeiker's (2011) study had an increased overall well-being. Even a short workshop was effective.

As noted, refugees struggle to become acclimated to a new country's culture and often experience acculturative stress or tension (Mio et al., 2012). The most commonly reported problem refugees have is with learning a new language. Without being able to communicate with individuals in the new country, refugees often feel lonely and depressed (Mio et al., 2012; Watkins et al., 2012). Hagège argues that language embodies and gives voice to a culture. There are certain words or phrases in some languages that do not literally translate to other languages, perhaps due to an underlying meaning or feeling (Hagège, 2006; Nadeau & Barlow, 2003). Becoming fluent in a new country's language can improve one's overall living. Interventions, like theatre, focus on improving the well-being of clients but can also lend itself to improvements in language and creativity (Boal, 1985; Skeiker, 2011; Boon & Plastow, 2004). Self-esteem, mood, language, and creativity are four major areas that can be improved through the use of theatre.

Well-being

Well-being was a factor that has been manipulated and improved by various theatre interventions (Skeiker, 2011; Boon & Plastow, 2004). Within the make-up of well-being lies two components: self-esteem and mood. These help make up the psychological well-being of a person. Self-esteem is the attitude which we hold towards ourselves, and can be manipulated by the right intervention. Boon and Plastow (2004) created a collection of articles on theatre around the world in which artists used theatre as a voice to portray their message. Boon and Plastow (2004) noticed one overarching theme in how the artists felt after their performances: joy. Each group characterized this joy as being a feeling of accomplishment. These thespians

accomplished their goal and felt successful as a result. Coopersmith (1967) believes that self-esteem comes from a mindset and attitude based on how capable we are of acting in a situation, how successful or worthy we view ourselves. Someone who holds a higher self-esteem will be more likely to take risks and be an active participant in society (Coopersmith, 1967). While self-esteem was not directly measured in Boon and Plastow's (2004) examples, in each of these theatrical experiences, the joy cited demonstrates a raise in self-esteem. Lyumbomirsky gives an updated look at self-esteem and happiness. Similar to what Coopersmith believed, Lyumbomirsky believes that self-esteem is a cognitive process and results from having a sense of meaning or purpose (Lyumbomirsky, 2007). Activities centered on goals, developing confidence, or having pride can lead to a higher self-esteem (Lyumbomirsky, 2007). Lyumbomirsky's (2007) book focuses on happiness and improving mood, through which self-esteem also increases. Beck and his cognitive triad demonstrated this same thing; those who have a negative mood tend to have more negative thoughts about the self, the world and the future (Kramer, Bernstein, & Phares, 2009). Mood influences self-esteem and in return, self-esteem influences mood.

Mood is comprised of thoughts and feelings, a state of mind. Like self-esteem, one's mood can change. Bhullar's (2012) study investigates the ability one has to influence another's mood and how easily influence people are. He defines mood as a state of feeling, which lasts longer and is in lower intensity than emotions. People who are happy or have positive moods seek out things that are happy--the higher your mood, the more positive emotions you may feel (Bhullar, 2012; Yuan, Chen, Ju, Norman, & Ding, 2014; Lyumbomirsky, 2007). Bhullar (2012) found a correlation between positive mood and a susceptibility to positive emotions (the same was found with negative mood). However, a negative mood can be a spiral downward. Yuan,

Chen, Yang, Ju, Norman, and Ding (2014) manipulated participants' moods and found that mood did, in fact, magnify the brain's susceptibility to unpleasant events. This was found to be true even in healthy participants (those with no prior mood disorder) and those who had a positive mood induced were *less* susceptible to unpleasant events (Yuan et al., 2014). Yuan et al.'s (2014) study demonstrates the power mood has over an individual and suggests that mood is flexible and easy to manipulate.

Interested in the idea of the flexibility of mood, Jun, Roh, and Kim (2013) developed a music-movement therapy intervention for stroke patients. Patients who had a stroke two weeks prior to the study participated in either movement-music therapy intervention or continued with the normal stroke rehabilitation that the hospital offered. The experimental group not only reported a positive increase in mood, but also having an increase in mobility. Whether through pictures or music, artful interventions can increase a patient's mood in ways that traditional interventions cannot (Jun, Roh, & Kim, 2013; Yuan et al., 2014).

Inclusion in a group or community can also lead to an increase in mood. Single mothers are a population that tend to feel lonely and isolated (Lipman, Waymouth, Gammon, Carter, Secord, Leung...Hicks, 2007). When put in a community-based group for social support and education, single mothers reported a feeling of being more involved and a higher self-esteem and mood, indicating that groups can be beneficial for improving one's mood and self-esteem (Lipman et al., 2007). Like Skeiker (2011) noticed, the theatre community within the refugee camp in Jordan led to an overall increase in feelings of trust and connection. It was as simple as being part of a group that led to this change. There are many ways that one can increase mood and self-esteem. Creative approaches, such as using music, and group interventions, such as a support group, are shown to be strong interventions.

Language

In addition to well-being, language is also an area of difficulty for refugees. Chomsky's revolutionary idea of the acquisition of language explains why refugees may struggle (Galotti, 2008a). Children are able to determine underlying grammar rules when learning their native language; that is to say people do not learn syntax, rather, it naturally develops (Galotti, 2008b). Children, Chomsky believed, are born ready to learn a human language. To acquire language, each human has an inborn set of mechanisms which Chomsky named the language acquisition device (Galotti, 2008b). Up until a certain age, or critical period, children have the ability to learn any language. Genie, a feral child raised in a bathroom, exhibits the critical stage. While being able to learn new words and form simple sentences and ideas, Genie was never able to use grammatically correct language, which is something that comes naturally for children of a younger age (Garmon, 1994). Johnson and Newport (1989) studied the acquisition of a language, which after puberty, becomes difficult. In a previous study, done by Johnson and Newport, people with congenital deafness showed a decline in American Sign Language (ASL) ability if ASL was learned later in life. However, this was a pattern for acquiring a first language and Johnson and Newport (1989) were interested in what that meant for learning a second language. Previous studies have demonstrated that children who learn a second language are superior in phonology and in syntax, learning a second language after puberty becomes difficult (Johnson & Newport, 1989). When Johnson and Newport (1989) studied Chinese and Korean immigrants whose native language was not English, they found a strong relationship between age of arrival to the US and English ability. All of the participants who arrived in the United States over the age of 7, even those only 8 years of age, did significantly worse on the English tests than those who arrived in the United States before age 7. Johnson and Newport (1989) therefore,

suggest that language acquisition can become easier and more successful if the age of arrival (and thus immersion into a new language) is younger than 7, or if the learning of a new language takes place at a young age in the native or host country (Johnson & Newport, 1989).

Contradictory studies argue that critical periods do not exist. When studying native English speakers and their acquisition of Dutch after one year, Snow and Hoefnagel-Hohle (1978) found that those who were in the age group of 12-15 years old approached native level faster than those in any other age group. While the researchers argue this demonstrates contrary evidence to a critical period, subjects were only studied for a year, whereas with Johnson and Newport's (1989) study, the subjects' journey with English was studied over the course of many years. Snow and Hoefnagel-Hohle (1978) demonstrated that those in early teen years may learn a language faster than any other age group but it does not discredit the critical period. Those in Snow and Hoefnagel-Hohle's study (1978) who were in the youngest group, 3 to 5 years, were so young that learning a second language would take time, but result in near fluency.

Most theories and studies suggest that adult language learners never reach the same level as native speakers, with a select few exceptions. Hellman (2011) found this to be true, especially in regard to grammar—most language learners never develop grammar abilities equivalent to that of native speakers. Hellman (2011) found that immigrants who had lived in the United States for 20 years or more and had daily interactions with native English speakers demonstrated a proficiency equal to that of a native speaker.

While the number of years learning a language helps one achieve fluency, simply being immersed and in contact with those who speak the native language fluently can lead to success in proficiency of a second language. Boal (1985), in accordance with the Integral Literacy Operation, developed the Theatre of the Oppressed model. In 1973, Peru set a goal of

eradicating illiteracy in four years. Boal wanted participants to hold onto their native language while also becoming literate and fluent in Spanish. Using theatre, Boal slowly achieved higher levels of Spanish comprehension. He began with using only the body, not the voice to portray messages. By the last stage, theatre participants were reading the newspaper and developing short dramas on the problems they read in the newspaper (Boal, 1985). When Boal wrote about his experiences in Peru, it was still too early to determine the effects of his interventions, however, he managed to communicate in Spanish with non-native Spanish speakers on large scale issues in Spanish. The participants did agree that they felt some form of liberation from their language oppression after the workshops.

The research suggests that becoming fluent in a second language is possible for children exposed to a second language at a young age (Galotti, 2008a, Galotti, 2008b, Snow & Hoefnagel-Hohle, 1978 & Johnson & Newport, 1989). However, research surrounding adults becoming fluent varies (Johnson & Newport, 1989; Snow & Hoefnagel-Hohle, 1978). A lot of studies are not hopeful for adults learning a second language (Johnson & Newport, 1989; Hellman, 2011). Adults who are learning a second language never fully reach proficiency and fluency (Hellman, 2011). Immersion and living in an environment where the second language is the native language suggests that perhaps attaining fluency and proficiency in adults is possible but it takes years (Hellman, 2011). Various interventions have been tried but the effects of those interventions are not conclusive (Boal, 1985, Johnson & Newport, 1989, Hellman, 2011).

Creativity

Creativity has been used to promote learning in students and can lead to learning (Cooper, 2004). Cooper (2004) created a program called Theatre-In-Education, or TIE, which serves as a program to improve students' investment in a task and enhance problem-solving, two

skills that are very important for success. These students commented that they did learn and discover something new despite the fact that this kind of learning cannot be measured by an SAT score (Cooper, 2004). This idea of using creative approaches to learning have been used globally and shown successful. For 14 years, Cape Town has been seeking out active learning to teach their teenagers about bigger, global issues. Each year the YES Environmental Drama Festival, is held, with the goal of developing awareness through drama and using that awareness to create something new and innovative (Buirski, 2013). Using creativity, students ages 15-18, create original theater pieces that focus on the environment and ways everyone can live sustainably. The Festival gives students a creative outlet to discover and learn in a hands-on manner (Buirski, 2013). Denault, Poulin, and Pedersen (2009) found a positive correlation between participation in the fine arts and grades. As participation increased, so did the students' grades. Creativity supports students learning and also positively influences emotional health. Denault et al., also found that students who participated in sports at a high school level had a higher tendency to use alcohol as compared to those in youth clubs (e.g., Boys and Girls Club, Girl Scouts, Boy Scouts, etc.) and fine arts (e.g., dance, painting, drawing, theatre, etc.).

Creative interventions have been used as therapy interventions as well. Play therapy is often one way therapists work with children. Moore and Russ (2008) conducted a study with young children in which the long term effects of play therapy were studied weeks after the intervention ended. Those children who had imagination-focused play therapy retained these imagination and play skills. This study demonstrates that through play therapy, children can be taught how to play and how to use their imagination which can lead to children being more creative and more inventive (Moore & Russ, 2008). Creativity need not be something innate but something that with the proper guidance and direction can be achieved in any situation.

There is no question that refugees and immigrants struggle to adjust and become acclimated when they arrive in a new country. The research suggests these problems stem from the inability to speak the new country's language. The refugees and immigrants may feel lonely and isolated. The Karen refugees, a relatively new population to the United States and specifically Minnesota, are experiencing these issues right now. Special schools and organizations have been created to help these Karen refugees but the most effective intervention has yet to be found (Minnesota Department of Human Rights, 2009). Boal (1985) was able to create assumed proficiency in Spanish among non-native Spanish speakers using Theatre of the Oppressed. As previous studies have suggested, theatre can influence participants' mood, self-esteem and creativity. Specific theatrical interventions are not noted as the best way to improve mood, self-esteem, and creativity, but rather, any form of theatre has the possibility to positively impact them. Therefore, the researcher hypothesized the present study. Using Boal's (1985) Theatre of the Oppressed model, the researcher hypothesized that theatre will positively influence three areas: well-being, English language comprehension and creativity. First, the researcher hypothesized that theatre will improve well-being (mood and self-esteem). Second, theatre will also lead to higher English language comprehension or fluency of processing. Finally, theatre will help participants become more creative.

Method

Participants

Participants were 16 adult Karen refugees (8 Females), ages 18 to 65. Of the initial 16, five did not complete the entire four day theatre workshop. Data from the total 16 participants was included in the descriptive statistics of the pre-measures but the five participants are excluded from the final statistics analyzing change. Participants were students of Adult Learning

Center at a community center in a first tier suburban city in Minnesota. The English Learners (EL) program is designed for adults (ages 18 and older) to learn English, prepare to take the TOEFL (an international test on fluency), and take citizenship classes. The goal of the school is to have students achieve a reading level appropriate for high school. The participants had been residence of Minnesota for 2 or less years. Majority of the students had low to intermediate skills in reading, writing and speaking in English as determined by the CASAS system (CASAS, 2014).

Materials

There were several questionnaires and tests used to measure the dependent variable. There were two questionnaires to measure well-being: Rosenberg Self-Esteem Scale and the Positive and Negative Affect Scale (PANAS). There were two tests designed to measure language processing and fluency: Stroop Test and English Language Comprehension Test. There was one test to measure creativity, Creative Functioning Test.

Rosenberg Self Esteem Scale. The Rosenberg Self-Esteem Scale (Schmitt & Allik, 2005) is a ten question questionnaire which assesses a participant's self-esteem. The Rosenberg Self-Esteem has participants rate themselves on a scale of "strongly agree" to "strongly disagree". The questionnaire had questions such as "On the whole, I am satisfied with myself" and reversed items such as "At times, I think I am no good at all". The total possible score for the Rosenberg Self Esteem Scale ranges from 10 to 40. A higher score indicates a higher self-esteem. The Rosenberg Self-Esteem scale has been shown to be valid and reliable in past research, Cronbach's alpha = .81 (Schmitt & Allik, 2005).

Positive and Negative Affect Scale (PANAS). The PANAS (Watson, Clark & Tellegan, 1988) is a 20 question scale which measures an individual's mood. The scale involves twenty

adjectives in which people rate themselves from 1-5 ranging from “very slightly or not at all” to “extremely”. This scale asks participants to rate themselves on positive adjectives such as “excited”, “strong” and “inspired” and negative adjectives such as “distressed”, “guilty” and “hostile”. The positive adjectives are added up together and range from 10-50. The negative adjectives are added up together and range from 10-50 as well. The PANAS is shown to be reliable and valid in past research, Cronbach’s alpha = .87 (negative affect) and .88 (positive affect) (De Carvalho, Andreoli, Lara, Patrick, Quintana, Bressan, & ... Jorge, 2013; Watson et al., 1988).

When combined together the Rosenberg Self-Esteem Scale and the PANAS created an overall well-being score. To obtain this score the Rosenberg Self-Esteem score was added to the positive affect score from the PANAS. The negative affect was subtracted from this number. A higher number indicates a more overall positive mental well-being.

Stroop Test. The Stroop Test measures implicit reading (Stroop, 1935). The basis of the Stroop Test is to *say* the color of the word, rather than reading the word. For example, **blue** (printed in red ink). The correct response would be red. Participants were presented with four conditions: English matched version (colors and words are congruent), English un-matched version (colors and words are incongruent), Karen matched version (colors and words are congruent) and Karen un-matched version (colors and words are incongruent). There were 28 words for each version. Participants were scored based on how long it took them to complete the task, as measured by seconds. Lower scores (thus completing the task quickly) indicate that the task was completed with relative ease, meaning there is no reading interference or implicit processing of the color words. Higher scores (taking longer to complete the task) indicate that the task was completed with difficulty, meaning there was an interference effect between

“reading” the color and processing the word. Composite scores for the Stroop Test were created because it best illustrates the Stroop Effect and interference of implicitly reading and processing color. The scores from the unmatched conditions (both Karen and English) were added together for both the pre-test and the post-test. These sums from the pre-test and the post-test were then added together to get an overall interference score for the Stroop tests as a whole and to create a composite score. A higher number indicates more of an interference. This task has been shown to have validity (Stroop, 1935; Adams, & Jarrold, 2009).

English Language Comprehension. The English Language Comprehension test measures English fluency (Johnson & Newport, 1989). The original English Language Comprehension test is 276 questions long. The questions are presented to the participants via audio recording. The English Language Comprehension test was adapted for this study to be 20 questions long. There were 20 sentence pairs presented to participants and they were asked to pick the grammatically correct sentence. For example, “a) The farmer bought two pigs at the market” or “b) The farmer bought two pig at the market”. For each correct response participants were awarded one point, the scores ranged from 0-20. Johnson and Newport’s (1989) original test was based on Linebarger, Schwartz, and Saffran’s (1983) study on sensitivity to grammatical structure.

To measure the effectiveness of the theater workshops in terms of language ability, the composite score for the unmatched Stroop Test was compared to the English Language pre-test score. This score indicated how participants’ English language abilities and processing changed over the course of the workshop.

Creative Functioning Test. The Creative Functioning Test (Smith & Carlsson, 1987) measures cognitive flexibility and creativity. Participants are shown a picture, such as a tree, and

asked to write what they saw. This was chosen because of its pictorial nature, though participants were asked to write in English what they saw. There were two conditions: increasing sequence and the decreasing sequence. For the increasing sequence, participants were shown the entire picture in increasing increments of time. The first time the picture was shown it lasted .01 seconds, the last time the picture was shown it lasted for .64. Participants were scored based on the number of themes as proposed by Smith and Carlsson (1987): P1 (the first time a meaningful structure is seen), partial C-phase (when a main subject of the picture is seen), Co (when the entire picture is described) and new ideas presented. The time a participant reached P1, partial C-phase and Co were recorded. The sooner a participant reached each phase, the more creative (Smith & Carlsson, 1987). Each time something new was seen the participant was awarded one point. The higher the point value, the more creative (Smith & Carlsson, 1987). For the decreasing sequence, participants were shown the entire picture in decreasing increments of time. The first time the picture was shown it lasted for .64 seconds, in the last frame, the picture was shown for .01 seconds. Participants were scored based on the number of themes as proposed by Smith and Carlsson (1987): XX (“a new, articulated interpretation of the motif with a loss of its correct meaning”), X (“a new, articulated interpretation of the entire motif. But the stimulus meaning can remain as an alternative”), (X) (“a partial or hesitant new interpretation”), O (“the change is more qualitative than plastic, ‘a feeling of’”), S (“more than two plastic changes of the picture”) and “__” (“at most report that the picture is becoming less clear”) (Smith and Carlsson, 1987, pp. 13-19). Each theme was given one point. The total for each theme was added together and then an overall total was obtained by adding all the themes together. A higher score in the XX or X theme or a high score overall indicate a more creative participant (Smith & Carlsson, 1987). The Creative Functioning Test was used to determine if a participant became more

creative after the workshops. An increase in the scores indicated this change. This test has been correlated with high creativity (Smith & Carlsson, 1987).

Procedure

Participants for this study were found through the Adult Learning Center's English Learners Program (EL). Participation was voluntary and participants were guaranteed confidentiality; their names or any identifiers were not noted on the measures. The researcher told the students would participate in free workshops during their school day and were highly encouraged to participate by the principal of the EL program. For clarity, a professional translator was hired to translate the consent form and the documents (i.e. directions for questionnaires) to guarantee that participants were aware of what they were consenting to. The researcher emphasized the voluntary nature of the study and the opportunity to withdraw at any time.

A within subjects repeated measures design was used. All participants completed the same testing before and after a four day theatre workshop. The researcher told participants were that this theatre workshop was an experiment and they would be asked to do some testing. The first day of the workshop lasted for three hours and included signing the consent form, completing the pre-test measures, and working on Boal's (1985) first theme: knowing the body. The second and third day of the workshop were two hours each and consisted of theatre games and exercises based on Boal's (1985) second and third themes: making the body expressive and theatre as a language. The final day of the workshop was two and a half hours and included the last of Boal's (1985) theme: theatre as discourse, a mini-performance for the Adult School, and post-test measures. The researcher told participants of the time commitment during the consent procedure. The researcher informed participants would be participating in theatre games

influenced by Boal's (1985) four major themes: knowing the body, making the body expressive, the theatre as language, and finally, theatre as discourse (for a complete schedule see Appendix). The workshops ended with a performance of the poem *Whose Woods These Are* by Robert Frost (Frost, 1995). Other adult students and teachers attended this performance. The workshops took place in a suburban community dance studio which is attached to an adult school.

Results

Hypothesis Testing

A paired t-test was used to test the first hypothesis; the participants' well-being would improve as a result of the theatre workshops. Using the composite overall well-being score the difference between the pre-test well-being score ($M = 31.90$; $SD = 12.42$) and the post-test well-being score ($M = 37.00$; $SD = 8.44$) was significant, $t(10) = -2.58$, $p = .03$ with an effect size of Cohen's $d = .81$. The hypothesis was supported. See Figure 1. For a complete list of the self-esteem results and mood results see Table 1.

Figure 1. Plot of Pre-Workshop and Post-Workshop well-being. The line on the graph indicates no change. Those who are above the line demonstrate an improvement in overall well-being. Those who are below the line indicate a decrease in overall well-being. Majority of the participants are above the line indicating an improvement in overall well-being.

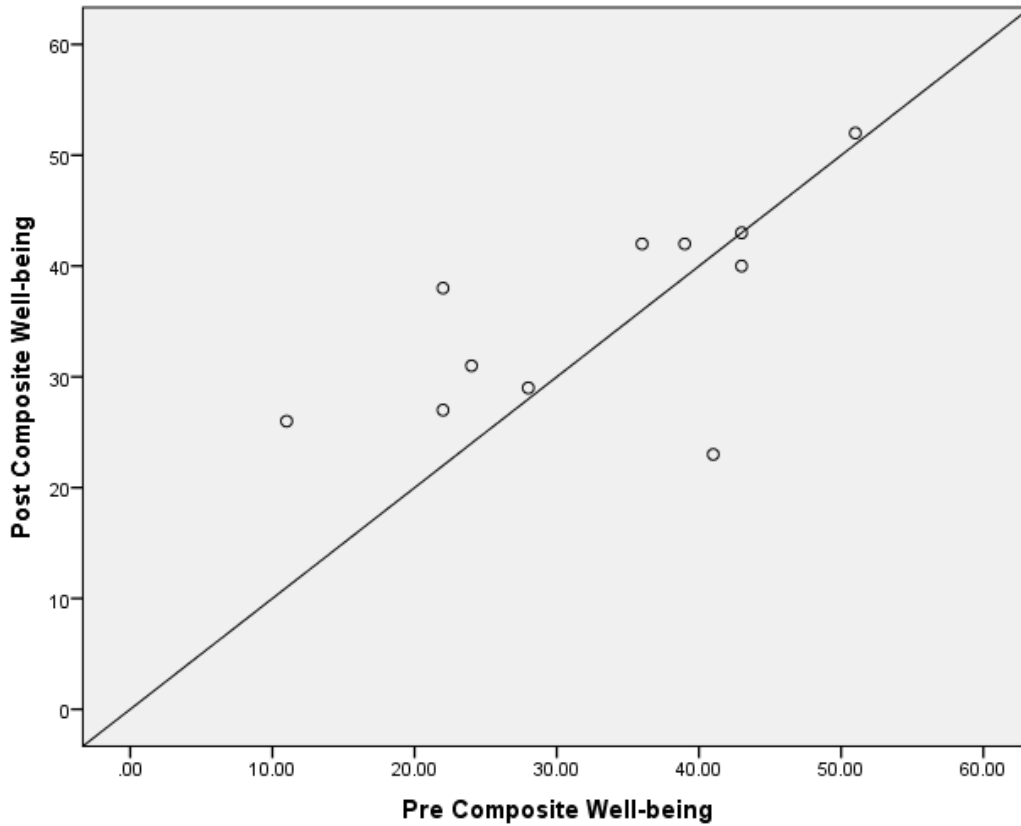


Table 1.

Individual results for the Rosenberg Self-Esteem Scale, PANAS, and English Language Comprehension. A paired t-test was used due to a within subjects design.

Variable	Mean (pre-test)	S. D. (pre-test)	Mean (post-test)	S. D. (post-test)	Sample Size	t-value	p-value
Rosenberg	17.45*	3.91	17.82	4.49	11	-.536	.603
Positive Affect	39.36	4.50	39.36*	3.96	11	.000	1.000
Negative Affect	24.09	8.38	21.45*	6.76	11	.954	.363
English Language Comprehension	9.64	3.93	10.45	2.30	11	-.574	.579

* denotes scores were averaged to account for missing data

A bivariate correlation was used to test the second hypothesis, that participants' language processing and fluency would improve as a result of the theatre workshops. A correlation between the pre-test English Language Comprehension scores ($M = 9.63$; $SD = 3.93$) and a composite score of the Stroop Test ($M = 2.09$; $SD = 39.00$), was statistically significant, $r(10) = -.71$, $p = .014$. This relationship indicates that those who had lower English abilities to start with (as determined by the English Language Comprehension score) had a higher Stroop Effect after the workshops were done. See Figure 2. This means that those adults who had low levels of English were most affected by the theatre workshops. The hypothesis was not fully supported. If the hypothesis was supported there would be a significant change as measured by a paired t-test from pre-test measures in both the Stroop Test and the English Language Comprehension test and the post-test measures, $p = .84$. However, the relationship between the Stroop Test and the English Language Comprehension test show that the workshops were effective for those individuals who came in with lower English abilities. Individuals who have lower English abilities are most influenced and changed as a result of the theatre intervention. For a complete list of the statistical results for the Stroop Test, see Table 2. For a complete list of the statistical results for the English Language Comprehension Test, see Table 1.

Figure 2. Plot of the relationship between the Stroop Effect and the pre-test English Language Comprehension scores. The line linear and inverse lines demonstrate a perfect negative correlation. While the data is not a perfect negative correlation, the data is highly suggestive. The inverse line gives a high correlation, $r^2 = .75$ and the linear line has a correlation of $r^2 = .50$. Those who had a lower English Language Comprehension score had a larger Stroop

Effect.

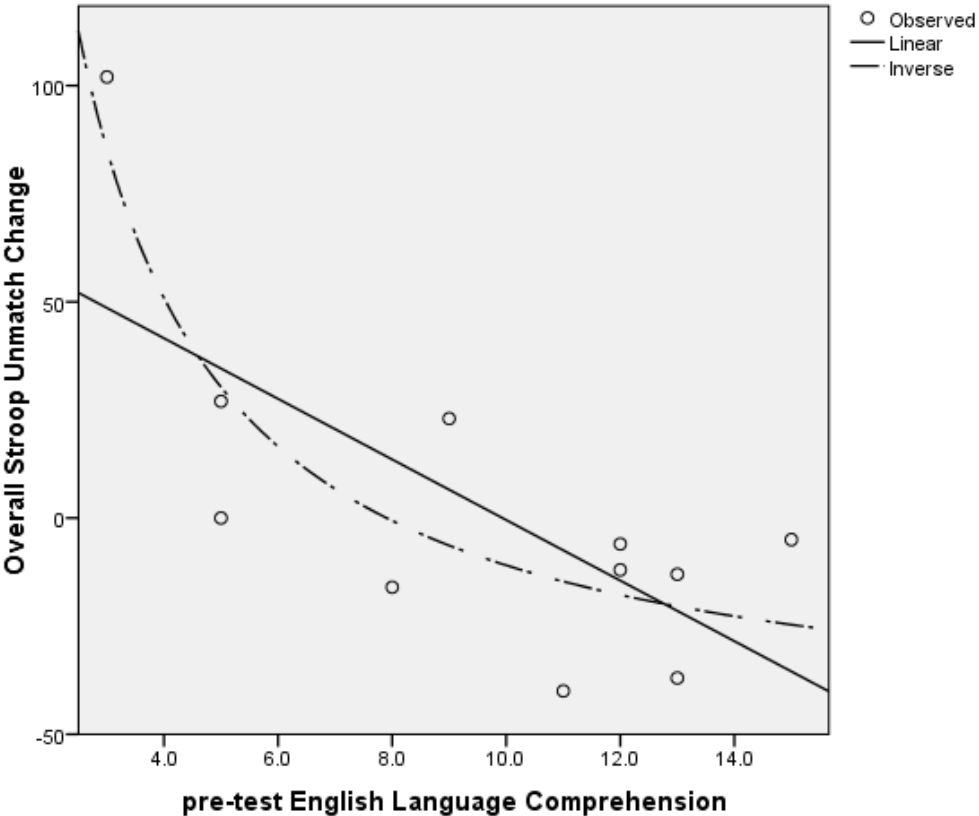


Table 2. Results for Stroop Test. A paired t-test was used due to a within subjects design.

Variables	Mean (pre-test)	S. D. (pre-test)	Mean (post-test)	S. D (post-test)	Sample	t-value	p-value
English Matching	17.73	4.92	17.45	5.11	11	.230	.822
English Unmatching	40.18	14.27	37.00	11.71	11	1.111	.292
Karen Matching	14.73	3.85	14.45	5.45	11	.209	.839
Karen Unmatching	51.73	25.76	57.00	32.83	11	-.497	.630

The third hypothesis predicted that participants would be more creative after the theatre workshops. A paired t-test was used to because the pre- and post- test measures were taken from the same participants. There was no change in terms of themes in the increasing sequence. For a complete list of statistical results see Table 3. There was no change in terms of the decreasing sequence except for the (X) themes reported on the pre-test ($M = .36$; $SD = .67$) and the post-test (X) themes ($M = 2.27$; $SD = 2.05$), was statistically significant, $t(10) = -3.29$, $p < .05$. The (X) theme indicates a partial new interpretation which means that the participant modified their description of the picture from the previous description. This change suggests not an overall increase in creativity but rather an increase in attention to detail and description. It also indicates the very beginning of improving creativity. Participants were starting to see something new or different. Part of being creative is being innovative and coming up with a new idea. While participants' descriptions were not fully new ideas of what was being seen, they were starting to see the picture in a new way. This change indicates that participants were beginning to be more creative as a result of the theatre workshops. However, this hypothesis was not fully supported.

Table 3.

Results for CFT. A paired t-test was used due to a within subjects design.

Variable	Mean (pre-test)	S.D. (pre-test)	Mean (post-test)	S.D. (post-test)	Sample Size	t-value	p-value
P1 phase	2.00	1.34	1.45	1.21	11	.896	.391
Co phase	2.00	1.34	1.64	1.50	11	.559	.588
Final C phase	1.27	2.83	1.00	2.24	11	.227	.825
Total Themes	5.64	1.567	7.00	2.19	11	-1.753	.110
XX themes	.18	.41	.55	.93	11	-1.077	.307
X themes	1.36	.67	2.00	1.45	11	-1.295	.224
(X) themes	.36	.67	2.27	2.05	11	-3.296	.008

S themes	.55	.93	.00	.00	11	1.936	.082
O themes	1.45	1.57	1.27	1.79	11	.265	.796

Discussion

The first hypothesis was that this theatre workshop would improve participants' overall mental well-being. This hypothesis was supported. Theatre has been shown to have an influence on a person's overall well-being as the findings from Denault et al. (2009) found. High school students in Denault et al.'s (2009) study who participated in fine arts activities had lower drinking habits and higher well-being. Boon and Plastow (2004) also found theatre enthusiasts finding joy and feeling proud of their accomplishments indicating that theatre has qualities that can improve well-being. This change in well-being could be explained by the fact that the researcher was very supportive and encouraging of the participants' efforts. The researcher kept a very positive and energetic mood which could easily influence the way the participants were feeling. The workshops culminated in a mini-performance of *Whose Woods These Are* by Robert Frost for about 40 students and faculty at their school. This performance was created to give participants a sense of accomplishment and feeling like they had achieved a goal which would lead to an increase in self-esteem. Both of these, the performance and the researchers' attitude, could be explanations for the significant results seen. This could mean that theatre is related to and could possibly influence mental well-being overall but so can other external factors such as someone else's mood.

In studying evacuees from Hurricane Katrina, LaJoie, Sprang, and McKinney (2010) found that being able to return to their pre-disaster environment and functioning level gave

evacuees a higher well-being. This indicates that well-being can be composed of self-esteem and mood. Since self-esteem comes from how capable an individual thinks themselves of acting or being in a given circumstance it makes sense that these evacuees would experience lower self-esteem. And, mood often fluctuates with self-esteem. Individuals who have depression tend to get caught in a negative triad and have negative thoughts about themselves, their environment and their future. This cycle of thoughts perpetuates the depressed feeling and leads individuals to think less of themselves, indicating a low self-esteem (Rasmussen, Crager, Baser, Chuh, & Gany, 2010). Mood is often an indicator of psychological well-being as a result (De Carvalho et al., 2013). Refugees are similar to evacuees in that they are being forced to move from their homeland are often at risk for mental health issues such as depression, anxiety, and others (Mio et al., 2012; Rasmussen et al., 2010). This study demonstrates an increase in well-being which means that the participants thought more highly of themselves afterward and had a more positive mood. With refugees experiencing many mental health issues, attending to psychological well-being is imperative. This study suggests that there is a relationship between theatre and well-being and that perhaps, given more research, researchers will find that theatre is a good intervention for working with refugees.

The second hypothesis was that this theatre workshop would improve participants' English language ability and processing. This hypothesis was not fully supported though a relationship between processing (as measured by the Stroop) and ability (as measured by the English Language Comprehension) was found. The relationship demonstrates that the lower a participant's English abilities were the larger the slowdown in the Stroop test during post-testing. The Stroop test measures implicit reading, meaning the greater time it takes someone to do the Stroop Test indicates a greater interference of reading the words rather than saying the color. The

Karen refugees were expected to have lower scores on the test when doing the English version of the Stroop Test versus the Karen version. Those who had a low English level as determined by the English Language Comprehension test were more likely to have a greater overall Stroop Effect. Participants who had lower English abilities at the start of the workshops demonstrated the greatest improvement after the 4-day workshop. While majority of the participants came from the same CASAS level, there is individual variation within that level. Like Boal (1985) found with his Peruvian participants, after a theater interventions they had higher confidence and comfort when speaking Spanish. After the theatre workshop, the Karen refugees' language abilities changed, even if on a small scale. This gives hope for future theatre workshops. Participants who had low English abilities demonstrated greater difficult with the Stroop Test after four days. There was a difference in participants' processing abilities after the four day workshop.

In Hellman (2011), immersion was stressed as the way to adequately learn a language to a level of proficiency. While Hellman (2011) argues that after 20 years (or more) one can achieve native-like fluency and proficiency, the results from the present study found that perhaps it does not take 20 years to achieve that level. After only four days of a theater intervention participants developed a Stroop Effect. It may have just been the simple immersion these adult students had with the English language. The researcher of the present study is a native English speaker and therefore everything was done in English (with an exception for the consent form and directions regarding the measures). The workshops averaged two hours per day with the required English classes the students were enrolled in before and after the workshops. The students were immersed in the language and had to communicate in English with the teachers and staff at the school. As many of the studies support, learning a second language is only

successful when immersed (Johnson & Newport, 1989; Snow & Hoefnagel-Hohle, 1978; Boal 1985). While the learning may be difficult since it is past a critical period, there is a possibility that one can achieve fluency. It might not just be the theatrical nature of the workshops, but being in constant contact with native speakers.

The third hypothesis was that this workshop would improve participants' creativity. This hypothesis was not supported. Measuring creativity can be difficult since it is such an abstract idea. As such, participants may have improved in creativity during the four days but the CFT was not able to measure this change.

Boal (1985) did find a change in participants' language abilities as a result of his Theatre of the Oppressed. His theatre games and philosophies have been used around the world as a result (Boal, 1985; Boal, 2002). In the book, *Games for Actors and Non-Actors*, Boal outlines all of the games and theatre exercises he used in Theatre of the Oppressed, even expanding and providing more games under each section (Boal, 2002). It is surprising, then, that significant results were not found. However, the workshop was only four days whereas Boal had years. Participants in the present study and in Boal's (1985) study were new to theatre and the basics needed to be taught. Even while trying to follow all of Boal's (1985) themes (knowing the body, making the body expressive, the theatre as language, and finally, theatre as discourse) the researcher of the present study had to modify games to fit the participants' needs. Therefore, the games tended to be easier in nature and focused more on body movement than voice. This could influence the language ability and the language skills the participants required as a result. It may explain why little significance was found. Hagen (1973) believed that to be a successful actor, one needs to know who they are in every sense. Knowing who you are and accepting who you are can lead to a higher self-esteem. The participants were becoming more comfortable with

each other, themselves, and the researcher as the four day workshops went on. This was evident by the fact that more participants talked amongst each other and engaged in conversation with each other during breaks and transitions. By the end of the workshops, participants were making eye contact rather than avoiding eye contact like they would at the beginning. During the initial data collection, participants often turned to their friends for help and assistance on the measures, during the final data collection, participants were coming up to the researcher to ask for help. This shows that they were gaining confidence in themselves and confident in the situation. Information such as this cannot be reflected in the quantitative measures taken above but can be noted through observation and experience. This suggests that theatre may be a powerful tool and should continue to be used but the changes brought on by theatre might not be measurable by quantitative measures. Theatre can be the tool and the approach to work with refugees despite the lack of significant results. Unlike other therapy tools, theatre can be a malleable approach—it can be changed to fit the client's needs (Linklater, 2006; Wethered, 1993; Hagen, 1973; Way, 1967).

Linklater (2006) believed that speech and vocal patterns are conditioned by society. In other words, vocal production is not due to surroundings and culture. An individual may hold tensions in the voice or restrain certain emotional responses because society has told the individual those are unacceptable. Linklater (2006) seeks to free what she calls the natural voice in order to allow someone to be truly liberated and free to express themselves. Linklater's (2006) acknowledgment of the constraints of society goes beyond just restrictions on voice. Hagen (1973) and Way (1967) both argue that society continues to restrict individuals and force them into something they may not be. Role Theory, a drama therapy approach practiced and taught by Landy, works to discover and free each role that a person has (Landy, 2000). Much

like Gestalt therapy, Role Theory acknowledges that people are made up of many different parts and each role (or part) should be freed and utilized when needed (Landy, 2000). Refugees are then a good population for theatre interventions. When coming to a new country, refugees experience acculturation and acculturative stress; they are forced to change and adapt to a new culture. When this happens, integral parts of their culture (and therefore, themselves) can be lost or changed. This can be a very negative experience for the individual. Theatre allows the participant to recognize each aspect of themselves (Landy, 2000; Hagen, 1973; Way, 1967). The refugee participant can then figure out how the old and new self fit together. This could lead to alleviating acculturative stress and other negative feelings that can result in an increase in overall well-being. Looking forward, theatre workshops can be very valuable tools to use with refugees. Theatre workshops will not force the refugees to become assimilated into the new country but rather allow them to recognize who they are and how that fits into the new society.

Overall, after a four day theatre workshop based on Boal's (1985) Theatre of the Oppressed, there were significant results found in terms of overall well-being. There was a relationship found between language ability and processing as well. Finally, creativity did not change as a result of the theatre workshops. In the future, it would be beneficial to study these measures again when using a theatrical intervention with a refugee population. Previous research and studies are hopeful in the positive benefits of a theatre intervention.

Limitations

While there were some significant results found, the majority of the results were not significant. The study has some internal validity issues. The study was a within subjects design meaning that participants were measured before and after the workshops rather than having a control or comparison group. Since there is low internal validity, the researcher cannot make

casual statements regarding the findings of the study. The research suggest that theatre may be a helpful intervention but more research is needed to support this claim. In addition to internal validity issues, the study has external validity issues as well. It is possible that all of the students who chose to participate were somehow different than those who chose not to participate. The significant results may be significant, but this study should be viewed as a pilot study. It provides a good starting point for researchers. Past research suggests that there is some strength in theatre, in all populations (Stern, 2002; Irwin 2000; Wethered, 1993). Therefore, ruling theatre out as an intervention because of this study would be irrational, rather, more research needs to be conducted. In addition, there was very low control. Since students' levels of English varied, directions and instructions could not be kept consistent. Some participants needed multiple explanations while some understood the instructions right away. The Rosenberg Self-Esteem Scale and the PANAS both have high reliability and validity (Schmitt & Allik, 2005), however, the language presented in these was higher than most students' abilities. This led to the researchers having to act out and figure out different ways of explaining the sentence. Most of the vocabulary used was then "good" or "bad". These simple words did not always capture the meaning of the sentences that the Rosenberg or PANAS was trying to achieve. The word can be translated directly but the sense or the complete meaning of the word does not always translate over. In the future, it would be beneficial to partner with a native Karen speaker and find another measure that has the same validity of the Rosenberg or the PANAS. The researcher also suggests that it would be helpful and beneficial to work with a Karen translator and have her/him translate the documents to keep the sense of the phrase in Karen.

The Karen refugees in particular are known for being shy and more submissive (Watkins et al., 2012). Theatre encourages participants to get up and perform in front of a group;

if someone is shy this can be very threatening. The workshops were progressive in nature and the researcher created the workshops to build up to performance level. Throughout the four days there were mini performances but they were in groups and for the group. Some individuals did opt to sit out of these performances and since everything was voluntary, these participants could. The last performance (which again was voluntary but everyone participated) was in front of other adult students and staff which created a 40 member audience and could have caused nervousness and tension had a participant not been ready to perform. The researcher taught participants how to deal with nerves through breathing, stretching, and focus, however, these tricks might not have worked for everyone. In addition while Denault et al. (2009) and Boon and Plastow (2004) found the results that they did with theatre participants, it is worth noting that they studied participants who had chosen to do theatre. Participation in this study was voluntary. However, a lot of students thought that theatre meant movie theatre and therefore movies. Some participants were hoping to learn about movie techniques and acting for a camera rather than a live audience. A live audience is quite different from a camera and can result in evaluation apprehension. This means that having someone watch can lead to social inhibition and make doing that activity more difficult and lead to more feelings of tension. Those that choose to do theatre as an extra-curricular activity or as a job must enjoy what they do, otherwise they would not choose to do it. These workshops took place during the school day which meant that instead of being in class for four hours each day, these participants were in class for two hours and involved in the workshop for the other two. This was the only activity that took students out of the classroom during the day. The adult students may have chosen the theatre workshops not for the theatrical aspect but because it was something different and unusual from the normal school day. When planning future interventions, this should be taken into consideration. The intervention should be

beneficial to every individual; by offering various artistic interventions, the needs of each participant could be met. Perhaps, it is the creativity of the theatre workshops that led to such success and if that is the case, maybe an intervention like painting or drawing, something still creative, would lead to an improvement of well-being for everyone.

Future Directions

Looking forward, the researcher would suggest to have more participants. Only eleven participants completed the workshops, therefore there might be some individual differences in the participants that chose to complete the workshop. Therefore, more participants would change this issue. In addition, it would be beneficial to hold the workshops for more than four days. The workshops were relatively short and brief, which might have detracted from any possible change. To continue the research, it would be helpful to work with other refugee populations. The results might be generalizable to other refugee populations as other refugees struggle with well-being (in terms of self-esteem and mood) and English language acquisition. Creativity is a highly sought after trait so becoming more creative is valuable in the United States today. The Karen refugee population was chosen due to the easy access of the group. However, it would be beneficial to see if positive results and changes can be found in other refugee groups. If this was found to be the case, it would indicate that theatre is a very useful tool to use with refugees and become acclimated to a new population.

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Appendix

Schedule

Day 1: Knowing the Body

9 am: arrive at FAHS

9:30: Gather participants

9:45: Consent Form

10:10: PANAS, Rosenberg, Listening

10:45: Stroop, CFT, Open-Ended Question

Noon: Warm Ups

Woosh: Woosh: stand in a big circle and pass an invisible ball of energy around using hand motions indicating the direction and saying WOOSH.

Shakeout: Everyone starts with their right hand up in the air and shakes it out as they count up to 10. Each person continues to do this with the left hand, right foot, and finally left foot. Once you have reached the left foot you start over and count up to 9. This exercise continues until everyone reaches 1. Each time you start over with the right hand, you get a little bit louder and a little bit faster.

12:15 Good Day Exercise

Participants walk around the room shaking hands and introducing themselves. They can only let go of the person's hand they are shaking when they begin to shake another's. **can change name to be other things, such as favorite color, place of birth, etc. ** (Boal, 2002)

12:20 Touch Exercise

The guide instructs participants to close their eyes. The guide makes suggestions to become aware of the other senses: feeling what the fingers are on, feeling the fabric of a shirt, the floor against the legs and feet, etc. (Way, 1965).

12:30 Mirror, mirror

Each participant pairs with another. They sit facing each other and copy the movements of partner exactly. Start out copying just the head and facial expressions, then add arms, then legs and finally allow these movements to take participants around the room.

12:35 Read through of Walrus and Carpenter

12:55 END

Day 2: Making the Body Expressive, Theatre as a Language

9:00 am: Arrive at FAHS

9:20: begin gathering participants

9:30: begin workshops (about 8 participants had to finish doing testing so they left)

Warm-ups: Started with body and facial stretching, spine roll overs, star jumps, Woosh, shakeout, tongue twisters red leather/yellow leather, a flea and a fly and a flew, unique New York, Great Big Moose

A Flea and A Fly and A Flew: A flea and a fly and a flue, were stuck so what could they do? “Let us fly,” said the flea. “Let us flee.” said the fly. So they flew through a flaw in the flue.

Great Big Moose: There was a great big moose, who like to drink a lot of juice. [refrain] Singing Wooooaahh, wayo, wayO, wayO, wayO, wayo, wayo, wayo. The moose’s name was Fred, he liked to drink his juice in bed. [refrain]. He drank his juice with care but he spilt some on hair. [refrain]. Now he’s a sticky moose, he’s a moose, full of juice, on the loose. [refrain]

10:10 Circle hand tap Game

Participants lay in a circle with their right hand over another’s left hand. A tap is passed around the circle. One tap means the tap keeps going in that direction, a double tap means the tap changes directions.

10:20 Break

10:30 Excited Dance

Left leg forward, right leg forward, run run run, up, down, shake it out

10:45 Name Dance

Using different body parts, each actor is asked to write their name, or other words that have come about during practice, using the whole space. Play with expression and movement. After they have theirs down, they are encouraged to teach another person.

10:55 Perform Name Dances

11:05 Reader's Theatre

Read the poem 4 times

11:30 Dismissal

Day 3: Theatre as a Language, Theatre as Discourse

9am: arrive at FAHS

9:20: Gather participants

9:30 Warm-Ups: Woosh, Shakeout, Tongue Twisters (Who Washed Washington's?, Red leather/Yellow leather, Unique New York, A flea, and a fly and a flew)

Who Washed Washington's: Who washed Washington's white woolen underwear when Washington's washer woman went west? (repeat)

10:15 Body Warm-Ups: Sunshine, Circle Hand Slap, Yes! Let's!

Sunshine: Everyone stands in a circle. Each person gets a turn to call out a word and do an action in which others copy and repeat that. The three words and actions used are described. When someone says grape everyone hold their arms out in front of them in the shape of a grape. When little raisin is said, everyone reaches their hands down to the ground and wiggles their fingers. When sunshine is said, everyone turns in a circle waving their arms above their head.

Yes! Lets!: Everyone walks around the room and waits for someone to yell out a suggestion, like , "Lets do 10 jumping jacks!" Or "Lets all freeze!" Or "Everyone walk

backwards” and everyone else replies, “Yes! Lets!” You continue doing the action until someone else makes a new suggestion.

10:30 P-O-W-E-R

Everyone stands in a circle and sings the song below:

All: P-O-W-E-R we've got the power 'cuz we are people.

One person: My name is _____

All: Yeah!

One person: And I'm next on the list.

All: Yeah!

One person: I've got a reputation 'cuz I do it like this [do a quick, easy to copy dance]

All: He/she's got a reputation 'cuz he/she does it like this [do dance], he/she does it like t his [do dance again].

10:45 Rain Storm

Everyone stands in a circle. One person walks around the circle doing an action. Each individual keeps doing the action given to them by the person walking around the circle until a new action is given. The order of the actions are as follows: arms at your side, snapping, rubbing hands together, light clap, a hard clap, slapping thighs, stomping feet, slapping thighs, a hard clap, a light/soft clap, rubbing hands together, snapping, arms at your side. When done in this order and with a lot of people, it sounds like a rain storm.

11:00 Make the Picture

The guide (director, leader) gives the participants an image to work with. While the guide slowly counts to five, the participants create the picture without talking. Once the picture is created the participants freeze in that position. The guide may call, “bring it to life” and for another five seconds, the participants silently act out the picture (Way, 1965).

11:10 Practice Reader’s Theatre Poem

11:30 Dismissal

Day 4: Theatre as Discourse

9am: arrive at FAHS

9:20: Gather participants

9:30 Begin Workshops

Warm-Ups: Woosh, Shakeout (up to 5), Stretching face, Sunshine, Red leather, Unique New York, Who Washed Washington’s?, A flea, and a fly and a flew

9:50 Practice Reader’s Theatre

10:10 Perform

10:15 Break

10:30 Post Measures

Rosenberg/PANAS/Open-Ended

Stroop and CFT

English Language Comprehension

Noon Dismissal