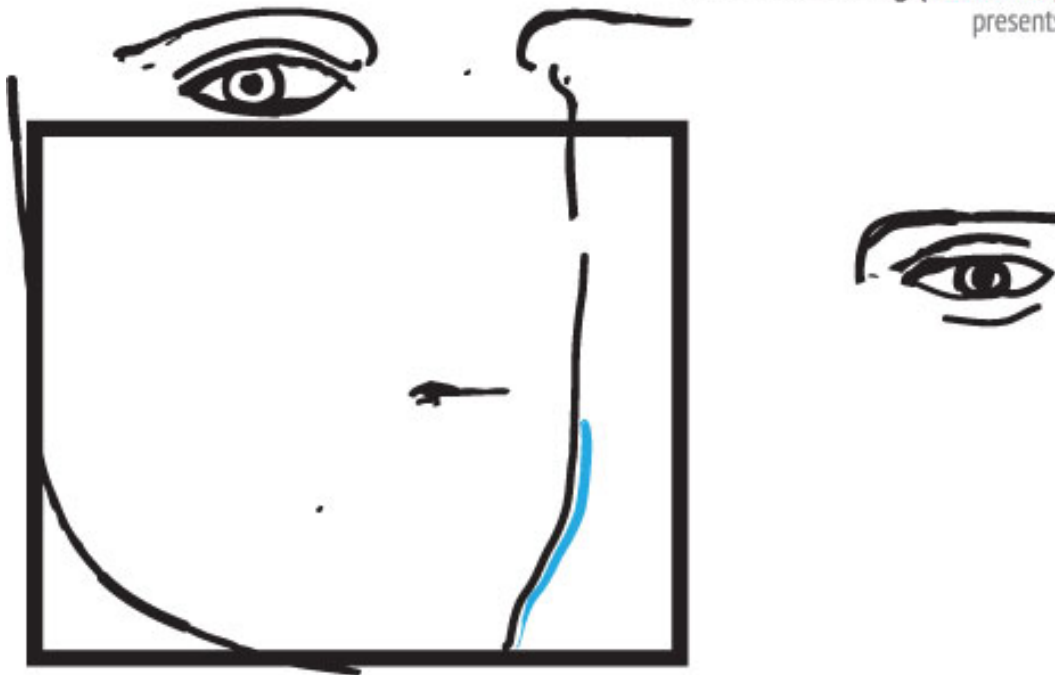


Humanizing Mental Health Care:

A Community Report

Written by Jaimie Sumner, Gillian Calder, and Valeria Cortés

theatre for living (**headlines**)
presents



2015 BC/Alberta Tour *"a remarkable piece of reality, piece of life itself"*

"maladjusted blew my mind"

"gut-wrenching yet funny"

maladjusted

Victoria, British Columbia

January 2015

Introduction

On Saturday, January 31, over 300 Victoria community members came together to engage in **maladjusted**, a mental health project facilitated by Theatre for Living. **maladjusted** is a Forum Theatre play that arose from workshops led by Theatre for Living in 2012. By 2012, the company thought it past time for a project with this focus; in their research and practice across Canada, they had come across “more and more patients and caregivers (counsellors, doctors, nurses, administrators) who were struggling inside the system. Professionals were less and less able to practice, in their own words, ‘the art of medicine’ and patients were finding that receiving what feels like holistic and integrated care was also becoming more and more difficult” (Theatre for Living, n.d). Thus, open workshops were announced, and participants flooded in, some becoming the creators and actors of **maladjusted**, a main stage play opening in Vancouver in 2013 and touring in 26 communities in B.C. and Alberta in 2015.

Created and performed by caregivers and patients who have struggled with mental health issues, **maladjusted** elicited firsthand perspectives on care. Based on (but not reproducing) the actors’ experiences, the production wove together three narratives: “A young teenager struggling with sadness over her friend’s suicide is misdiagnosed by her doctor; a young homeless man who is legitimately taking prescription meds gets thrown into dangerous circumstances by social workers, who are from within a mechanizing system trying their best to help him; and finally there is all of us, unable to adjust to the needs of a maladjusted mental health sector, who become potential agents for change” (Theatre for Living, 2015).

It is our hope in preparing this report that the knowledge shared by **maladjusted** participants will help inform policy for social services and government agencies, ensure that services are effective, and address the problem of mechanization in the mental health system.

The Method

Forum Theatre is participatory and transformative in nature. The process involves researching a community problem, helping community members theatrically represent the problem, and engaging in analysis, discussion, problem solving, and reflection following the play. In short, it is a means for a community to come together to collectively solve problems.

At the core of Forum Theatre is the metamorphosis of passive spectators into active “*spect-Actors*”, as the audience is invited to actually come up on stage and participate in the play. This participation is achieved through several methods. For one, the narrative engages the audience by depicting unresolved situations, conflicts, or injustices and offering up no solutions. The spectators are pulled into the

immediacy and gravity of the issues on stage as the play builds up to a final climax and ends abruptly. Using this momentum, the facilitator restarts the play, directing the audience to yell stop when they have an idea for change and come up on stage to replace or add a character. The scene is then replayed, with the actors responding to the audience member's intervention in the way they feel they would in reality.

A final important element of forum theatre is the community scribe, who transcribes all of the interventions and comments from the audience and actors. It is this material that you will find in the bulk of this report: insights into how we can humanize mental health care from diverse members of those in Victoria who are living the issues.

The Team

Hulitan Family Services and the Vancouver Island Health Authority provided the initial financial support for the performance in Victoria. The organization of the event took place in a collaborative manner with the lead of two Victoria community members.

Valeria Cortes. Co-Organizer

Jaimie Sumner. Co-Organizer

Colleen McDougall. Community Partner

Gillian Calder. Scribe

Karen Gillis. Community Outreach volunteer

Katie Patel. Publicity volunteer

Kylee Thwe. Social media volunteer

Kristen Withers. Stagehand

Jonathan Poole. Stagehand

Charles Crossland. Stagehand

Wenze (Maggie) Sun. Stagehand

Miranda Harvey. Box office

Henri Lock. Box office

Catherine Etmanski. Box office

Montana Livingstone, Event Counsellor

We are grateful for the support and commitment of the **maladjusted** team, and we thank all of our volunteers who worked hard on the day and night of the event. We also extend our heartfelt thanks to our community supporters.

Interventions

maladjusted was performed by Theatre for Living on Saturday, January 31st, 2015 to an audience of 300 at the beautiful Songhees Wellness Centre on traditional Lekwungen territories in Esquimalt, BC.

The evening began with a brief introduction by David Diamond and a welcoming prayer by the Chief and Elders of the Songhees Nation, followed by the play.

After the performance of the play the counsellors and the scribe were introduced to the audience. There were then eight interventions facilitated by David Diamond. As facilitator, he chose the scenes, invited one intervention on each of the scenes, and where possible, invited the audience to offer policy suggestions that arose from the intervention.

The interventions and their outcomes are chronicled below in order to offer readers the insights shared that evening by people in our community who work with and/or struggle with mental health issues.

1.

The original scene: Jack, a young man experiencing homelessness and taking prescribed meds, meets with Abby, a social worker, who encourages Jack to lie and say he has a drug dependency problem in order to be accepted to a recovery home. Jack agrees, not knowing that the home may take his prescription meds away.

Who is replaced: The audience member replaces Jack.

The intervention: Jack's character pushes back against Abby. He says that he doesn't have an addiction and thus doesn't do what Abby wants him to do in order to make getting into New Springs Recovery easier. He sees Abby as asking him to lie, and he refuses to do that. He says that he is not addicted to Oxycontin, but does concede perhaps that he is addicted to pot. He asks more questions about what going to New Springs Recovery means, and through conversation gets Abby to offer to call on his behalf to talk to the facility doctor about his medications before he arrives. He learns that there will be an issue about getting his medication cleared, and he expresses concern with that. He articulates more of what is going on in his life that makes being somewhere like New Springs Recovery something he wants. He says that he has a need for stability and that stability is a home, a bed. He comments that there are not many places for someone like him to go to help start a process of getting his life back in order.

Suggested policy or structural changes: The main policy ideas deal with what is required of Jack as street-involved to be safe and how to ensure that his anxiety is managed and that he is treated as a unique human being with specific needs, rather than as a generic patient who has to fit square rules in order to have safety in his life. Specific suggestions:

- The need for addiction as a prerequisite to admission is questioned, and it is suggested that procedures that encourage honesty will be better for Jack;
- There is high anxiety for people applying to a facility like New Springs Recovery, and that anxiety needs to be addressed to enable safer admissions;
- There is a direct relationship between mental health, addiction, and homelessness, and it is very important to have a safe place to sleep;
- There should be more intake screening—the intervention showed that this was not the best place for Jack, and there should be policies in place to determine that before there are adverse consequences for Jack;
- It might make sense to have a non-abstinence bed in the facility to enable safer transitions for people with mental health concerns;
- Networking between doctors will ensure that there is no delay, or less delay, in clearing prescribed medications before entry to a recovery home;
- More information is needed so Jack knows more about where he is going before he arrives and is confronted by rules;
- More training is needed for intake workers so that people are treated more as human beings and not as patients.

Facilitated observations: David questions the audience collectively by having everyone raise hands to indicate assent or dissent and finds that it is clear to the audience that New Springs Recovery is not the right place for Jack—that in fact, Jack might be safer in the street than in the house.

2.

The original scene: Mia, an Indigenous woman, calls upstairs to her daughter, Danielle, who is grieving over the suicide of her friend the year before. Mia wants Dani to come down and spend time with her like they did when Dani was younger. Dani comes down, but they begin to fight when Mia tries to talk Dani out of holding on to her grief.

Who is replaced: The audience member replaces Mia.

The Intervention: In this intervention, Mia starts talking to Dani about Mia's father. She tells her daughter that there is a lot of depression in the history of their family and asks her daughter open-ended questions to get her talking about how she is feeling. She then asks her directly, "Do you feel depressed?" Dani's demeanour shifts. She replies, "I think so." Mia continues in a compassionate, empathetic manner, asking her "Do you feel sometimes like nothing matters?" There is a

conversation between mother and daughter that is connecting, compassionate, and loving. They are in this together, and will get through it together.

Facilitator intervention: David intervenes and asks them to freeze and then move physically into what will happen next in this new scene. They move into an embrace. He then asks them to say each one secret thought. Dani says, “I knew she was the crazy one.” And Mia says, “I tried to take my own life.”

Suggested policy or structural changes: The audience is not asked for policy suggestions given the emotional weight and resolution of this scene. What is apparent, however, is that much more education is needed around inter-generational trauma, violence, and mental health struggles related to the former. It is not spoken by the audience, but the scene demonstrates that more education around colonialism, more attention to the affects of dislocation and isolation, and more opportunities for counselling and culturally appropriate support for Indigenous families living with the trauma of residential schools is needed.

Facilitated observations: David questions the audience and finds that it is clear to the audience that these are two different Mias. Moreover, this intervention enables the audience to see that without the argument that takes place in the couch scene the narrative is unlikely to proceed as it does in the original play, with the subsequent trip to the psychiatrist, the medication for Dani, Dani’s meeting with Jack, and Dani beginning to cut herself. Those are all likely not going to happen “today.” They may happen another time, but this interaction between mother and daughter will most likely lead to a different kind of day.

The intervention also shows, troublingly, a mother-blaming element. The audience is left with a sense that if only Mia was a different person then Dani wouldn’t end the day cutting herself. The scene is powerful, but the burden it places on Mia is a big one.

3.

The original scene: Jack, a young man experiencing homelessness, goes through an intake interview with Frank, the Director of New Springs Recovery. Frank is abrupt with him, quickly telling Jack the rules, searching Jack’s backpack, and making him empty his pockets. Frank confiscates Jack’s knife, and finding Jack’s medication, he says he has to take it away and get it approved by the doctor, to which Jack reluctantly agrees.

Who is replaced: The audience member replaces Frank.

The intervention: Frank is much gentler, politer, and more explanatory with Jack. Frank is not aggressive with Jack and responds to Jack more like a colleagues or a peer. Frank still takes the knife, still looks in the bag, and still gets him to clear his pockets, but is much more accessible, more humane. This Frank addresses the

medications by making promises to Jack that he will get the doctor on the phone and get the medications cleared. Jack responds well to Frank, but does not appear completely truthful in the scene. Frank wants to make sure that Jack understands, while making him feel welcome and secure. It is not clear that Jack does feel secure.

Suggested policy or structural changes: This intervention highlights the importance of seeing Jack as a human being and on intake procedures that centre on Jack and Jack's needs, rather than having risk-aversion as the predominant driving force. Specific suggestions:

- Having a doctor on-call so that clearing medications happens with in-take, not after;
- Having someone on-site at recovery homes who can prescribe medication;
- Having other health-care professionals on site, like nursing staff, who can deal with the medical issues that arise for people with mental health concerns upon their admission to a treatment facility;
- Having a segregation room or section for intake of people with prescribed medication to keep them safe between clearance on medication;
- Developing intake policies that are centred on the people, not on risk-aversion;
- Developing intake policies that do not treat everyone who enters the facility in the same manner, but are flexible enough to address the specific mental health issues that arise.

Facilitated observations: David questions the audience and finds that it is clear to the audience that most of us prefer the Frank in this intervention. He is different, less aggressive, and kinder towards Jack. There is a bit of a power shift in this scene with this Frank—Jack seems to have more control over his possessions and his needs going into the facility.

4.

Original scene: Mia has taken her daughter Dani to be diagnosed by a psychiatrist, Dr. Devreaux. Based on the results of the questionnaire Dani has done, Dr. Devreaux diagnoses her with bipolar disorder and prescribes medication. The meeting is short.

Who is replaced: The audience member replaces Dani at the moment she is receiving the diagnosis from Dr. Devreaux

The intervention: Dani is very assertive with respect to the diagnosis she is receiving. She asks a lot of questions. In particular, she is suspect of how Dr. Devreaux so quickly diagnoses her as bipolar on the basis of a questionnaire and a brief interview. He is caught a bit off-guard, and lets her know that she fits a pattern, which is what the questionnaire allows him to see. She then asks lots of questions about what it means to be bipolar, and is very cautious with the answers that do not seem to be

very informed. She then pushes hard against medication. Why is medication necessary? Why is it a first resort and not a last resort? She tells Dr. Devreaux that she has done research on depression on the Internet. She tells him that there is a strong movement against medication and in support of counselling. Shouldn't she have access to counselling before medication? Her assertive manner is successful; she leaves the meeting having convinced Dr. Devreaux and her initially resistant mother to let her try counselling. She also leaves with agency.

Suggested policy or structural changes: The main reaction to this scene centres on rights to information and to refuse medication in a society understood to be over-medicating. The reaction and discussion on this intervention focused on the unique needs of young people and how there are no easy fixes for mental health issues. The discussion highlighted the importance of having accessible counselling and ensuring that young people have information available to them so they can be actively involved in their treatment options. Specific suggestions:

- More youth-centred counselling;
- More information available for young people when diagnosed.

Facilitated observations: David questions the audience and finds that it is clear to the audience that, although Mia does not speak much during this intervention, it is clear that her closets are deep. Mia wants her daughter to be better, and she doesn't want this to be messy. Medication will be much easier for many who themselves do not want to go through pain while aiding a loved one. It is clear to the audience that after this new scene, there is hard work ahead.

Again, this is not a scene where issues related to colonialism are commented on; nor is there reflection about how finding a counsellor who understands the intersection of mental health and colonialism is a challenge, but we find it important to note.

5.

The original scene: Dani, newly diagnosed and medicated for bipolar disorder, is wandering the streets and encounters Jack, who has run away from the recovery home. Jack asks Dani for a cigarette and asks her to light it, and she complies. Jack tells Dani that the home took away his meds, and Dani tells him that she was recently prescribed medication.

Who is replaced: The audience member replaces Jack.

The intervention: Jack and Dani have more of a conversation, there is more information freely shared between the two of them, and as a result Dani talks more, gets more from Jack: more information, more insight, and in some ways, more fear. This Jack is very mellow, almost resigned. He has less agitation, a heightened sense of concern for Dani, and resignation in his own life. He convinces Dani to give him her medication, which is one of the ones that was taken from him.

Facilitator intervention: David encourages Dani to get what she needs from Jack. She pushes Jack, and Jack then purposely drops the medication that he has taken from Dani. David freezes the two of them, and they both hang their heads when asked to demonstrate with their bodies what they are feeling. When given the chance to share what they are feeling Dani says, “I don’t want to end up like him.” Jack says, “How did I end up like this?”

Suggested policy or structural changes: the audience is not asked for policy suggestions on this scene and intervention. The scene is very powerful, and it is apparent that the audience member is coming from a deep place of personal experience. It is clear that there are significant, long-standing, systemic issues to address for Jack to have the support he needs. The scene powerfully demonstrates how truly scary and uncertain Jack’s life is.

Facilitated observations: David questions the audience and finds that it is clear to the audience that these are two quite different Jacks. The scripted Jack would not have thrown away the pills—to him, they are too important to his health and help him get through each day. However, the intervening Jack made clearer his desperation and his desire not to be in the situation he finds himself in—he showed what Jack has to conquer, which enables the audience to see a bit more about what it means to live on the street with the kinds of needs that Jack has.

6.

The original scene: Abby, the social worker who referred Jack to Frank at New Springs Recovery, speaks with her superior, Dr. Devreaux. Abby tells him she has way too much work on her plate, and he talks about the impacts of cutbacks, saying she’s just going to have to do more. Frank interrupts the meeting to ask Abby if she can somehow get Jack’s medications cleared before next week when the New Springs doctor will be available, as he is worried that Jack will not be able to make it until then. They both ask Dr. Devreaux if he can sign off on the meds because he is a psychiatrist, but he says it is against policy and could get them all in trouble—this makes Frank angry, and he swears at Dr. Devreaux.

Who is replaced: The audience member replaces Frank.

The intervention: The Frank that emerges in this scene is not aggressive, but works assertively to get what Jack needs—which is some way to get his medications cleared. Frank argues directly with the doctor, saying that he, Frank, knows what Jack needs and knows that Dr. Devreaux has both the power and the will to help. Although he does not get Dr. Devreaux to sign off himself, Frank is able to get him to put in a call to the doctor at the other facility. Through his assertive persistence, Frank is able to push through the institutional obstacles and highlight what kinds of things are in the way. By asking Dr. Devreaux “What are you afraid of?”, we as an

audience can see what some of the obstacles are preventing Dr. Devreaux from making things happen for Jack in the moment.

Suggested policy or structural changes: This intervention shows that the doctors hold a lot of power and can be obstacles in the path of good care.

Facilitated observations: David questions the audience and finds that it is clear to them that this intervention changed Frank into someone who used a method that worked better—using assertive, respectful voice and body language and pleading instead of being aggressive—to get Jack what he needed, as a human being with strong mental health and safety needs.

7.

Original scene: Mia is obsessively cleaning at home when Dani comes home after being away all night. Mia chastises Dani for staying out and skipping school, and they get into a verbal fight. Frank, who is Dani's uncle, arrives and yells at Dani. Jack arrives, having followed Dani home because he wants to return her lighter that he borrowed. Frank recognizes Jack and flips out at him for following his niece; Jack pushes him and runs out.

Who is replaced: The audience member replaced Dani.

The intervention: In this scene, Dani is much more engaged with her mother, and the central theme of their conversation is one about trust. Dani begs her mother to listen to her and to respond to Dani's needs. Mia responds to this discursive Dani frankly by telling her what she does for her on a daily basis, but also by opening up a bit and telling Dani that she wants to trust her. The conversation shows that both women want connection to each other. Frank arrives in the scene, and the new understanding between Mia and Dani now makes Mia more of Dani's defender. Instead of being a passive participant in Frank's berating of Dani, Mia stands up for Dani and asks Frank to leave.

Facilitator intervention: David freezes the characters then asks them to move slowly toward what they each want. The two women move into an embrace, Frank turns away from them making powerful hand gesture. When asked to say a phrase that expresses what they feel, Frank says, "I wish my brother was still here" [understood as Mia's absent or deceased husband]; Mia says, "I can't lose you too"; and Dani says, "Please help me."

Suggested policy or structural changes: The audience is not asked for policy suggestions this time; however, the scene is highly evocative, leaving the audience with reflections on the work that parents need to do in order to be able to listen to their children. Parents who ask fewer questions often get more answers. The scene came to a different resolution when Dani was not reprimanded for her night away, but loved and listened to. When teenagers are listened to and treated like adults,

sometimes they will also take responsibility as adults. If policy was to flow from this intervention and the audience responses, it would likely be to again focus on parenting support and resources that can assist particularly single parents to be more present for their children.

Facilitated observations: David questions the audience and finds that it is clear to them that this scene involved a transformed Dani and that it also came to a fairly quick resolution. In the new scene, Dani was mostly seeking connection. With mental health issues it is important to keep in mind that many illnesses prevent the kind of connection that the scene portrayed. It is clear that more and different strategies of enabling parents to keep their children safe will be necessary.

8.

Original scene: Abby finds Jack asleep on the street in front of her workplace. She wakes him up and lets him in. He becomes agitated in telling her that they took his meds at New Springs Recovery and that he is now on the streets again. As she tries to calm him down, Frank comes in and begins yelling at Jack, saying they need to call the police because Jack followed his niece home and then hit him. Dr. Devreaux comes down from his office to join the chaotic scene.

Who is replaced: The audience member replaced Abby.

The intervention: In this scene, Abby has training in mindfulness, meditation, or other calming techniques. In her confrontations with Jack and with Frank, she works hard to keep them calm, trying to connect them to their bodies through guided breathing. She uses eye contact and calm speaking to diffuse the men who are in full crisis and likely to engage in violence. She asks Frank to leave for a moment, as she is busy with Jack. Her techniques diffuse the situation and get resolution in the sense that Dr. Devreaux is convinced to call a doctor rather than the cops, and Frank and Jack do not come to blows.

Suggested policy or structural changes:

The main policy reactions to this scene are connected to training and support for people who do front-line work. Other suggestions included:

- Front-line staff and other health care workers should be trained in conflict abatement and alternative dispute resolution;
- Policy around conflict resolution should be more flexible in times of crisis;
- Policy should be clear around conflicts of interest;
- There should be buzzers at office doors so that staff can manage potentially violent situations;
- Offices should have quiet rooms so that difficult moments with patients do not need to happen in full view of everyone;
- Social workers and other professionals like Abby need a personal office;

- Offices like Abby’s need on-call doctors or nurses who have the power to enable support for people in need like Jack.

Facilitated observations: David questions the audience and finds that it is apparent that a calm, empowered Abby helped Frank to let go of some of his concerns and anger and that resolution to some conflicts can be advanced by human compassion.

The evening ended with a series of thank yous from Theatre for Living to the organizers and to the Songhees Nation as hosts. Mayor Lisa Helps helped close the evening with her thanks to the performers and to the audience. Many members of the audience stayed around for a while to discuss and to help the crew pack up. And as everyone made their way home, they came away having experienced a night of outstanding theatre; moreover, they walked away with an intense and beautiful set of reflections on what needs to change to expand a patient-centred idea of mental health care to one that is more inclusive of the diversity of the human beings who are engaged, affected, and who deliver this work on a daily basis.

In Closing

A key strength of Forum Theatre is that it stimulates such an abundance of lived knowledge on an issue. It is important not to think of the audience as simply “theatre-goers” or “artsy types,” but as experienced human beings with vital insights to share. In our outreach for **maladjusted**, we walked all over the city, speaking with and inviting psychiatrists, psychologists, government workers, people accessing care, local politicians, those involved with charities, shelters, advocacy groups, funding organizations, member-run groups, community centres, and more. Free tickets were also offered to people attending various mental health programs. We hope you will take such first-hand knowledge to heart and even further than that—to your organization, your practice, and your daily experiences. Thank you for reading.

Contact Us

For more information about Theatre for Living visit theatreforliving.com

If you have questions about this report or if you would like to ask about transformational theatre please contact:

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