

Exploring psychological wellbeing in actors:
A qualitative study of professionals and students

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Abstract

This thesis investigates the psychological wellbeing (PWB) of professional and student actors in Australia. The research comprised 35 in-depth interviews and used thematic analysis and qualitative content analysis to analyse the data. Various checks of methodological rigour were used throughout. The findings are presented in four related papers investigating, respectively: a) how student and professional actors define PWB, b) what factors underpin and impact the PWB of professional actors, c) what factors underpin and impact the PWB of student actors and d) what support student and professional actors need to maintain and/or enhance their PWB.

In Paper 1, results presented include the difficulty of defining PWB, the importance of self-awareness, self-regard and accepting and navigating one's internal world, PWB as an activity and coping strategies. Findings suggested that participants' definition of PWB was grounded in their identity as actors. Implications for care included being alert for help-seeking difficulties, along with ensuring actors have appropriate tools for managing PWB.

In Paper 2, two categories were established pertaining to professional actors' PWB: environmental and personal factors. Environmental factors concerned the use of power in the acting industry, precarious lifestyle, uniqueness, engagement, complex relationships and self-care. Personal factors were drive, strengths, viewing acting as a calling, a precarious internal world and self-reflection. Key findings suggested actors experience a range of threats to PWB, as well as experiences which facilitate it. There were clinical implications suggesting actors are vulnerable to depression, generalised anxiety symptoms, vicarious trauma and perfectionism.

Paper 3 explored PWB in student actors. Findings clustered into three domains: the conservatoire (environmental/cultural factors), acting training (process factors) and student qualities (individual factors). Influences on students' PWB were complex personal relationships, workload, uncertainty, perfectionism, strengths, mental health difficulties,

identity de-stabilisation, growth and feeling exposed. Practical implications included building mental health literacy, increasing students' feelings of competence, fostering the ability to tolerate stress and uncertainty and employing a specialist clinician within the conservatoire.

Paper 4 explored what support student and professional actors need to maintain and/or enhance PWB. Key recommendations for students included mental health resources, an embedded clinician, alterations to the course structure, examining the role of staff, connecting with the wider community, broadening students' identities, creating a professional network and practical resources. In the professional cohort, areas of support included practical resources, connectedness, changing the social perception of actors, life outside acting and industry functioning. The key finding across both cohorts was the need for multi-level, contextually sensitive support for actors across their careers.

The thesis concludes with a discussion comprising, firstly, an overview of findings and the contribution of the research to the broader literature and to knowledge about professional and student actors' PWB. Clinical implications of the findings are discussed, including a clinician's guide to areas of concern developed from the research. Service delivery for actors, including non- traditional models of care, is explored and the limitations of the research are highlighted. Areas for future endeavour are noted throughout and the chapter concludes with some final thoughts on working with actors to maintain and enhance PWB in light of broader issues facing the acting industry in Australia.

Declaration

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission in my name for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide and where applicable, any partner institution responsible for the joint award of this degree.

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I acknowledge the support I have received for my research through the provision of an Australian Government Research Training Program Scholarship.

Signed:

(Alison Robb)

Date: 11/09/2017

Publications contained in this thesis

Robb, A., & Due, C. (under review). Actors define psychological wellbeing: through the lens of social identity. *Australian Community Psychologist*.

Robb, A., Due, C., & Venning, A. (2016). Exploring psychological wellbeing in a sample of Australian actors. *Australian Psychologist*. doi:10.1111/ap.12221

Robb, A., & Due, C. (2017). Exploring psychological wellbeing in acting training: an Australian interview study. *Theatre, Dance and Performance Training*. doi: 10.1080/19443927.2017.1324518

Robb, A., & Due, C. (in preparation). Supporting psychological wellbeing in student and professional actors: an applied ecological scoping study. *The American Journal of Community Psychology*.

Presentations based on this thesis

Arts Industry Council of South Australia: “40 Year Vision for the Arts”, Adelaide Town Hall, 2014. *Wellbeing: How are you going and what do you need?*

Australian Theatre Forum, Seymour Centre, University of Sydney, 2015. *Making it healthy: How are you doing and what do you need?*

Florey Postgraduate Research Conference, Adelaide, 2015. Poster: *Exploring psychological wellbeing in a sample of Australian actors*. Alison Robb, Dr Clemence Due, Emeritus Professor Ted Nettelbeck, Dr Anthony Venning.

Victorian Theatre Forum: New Potential and Adaptive Resilience. Melbourne, 2016. Keynote address: *Here I Stand: Cultivating resilience in the face of chaos*. Workshop: *Start where you are: your own personal map of resilience*.

Australian Performing Arts Centres Association, 'The New Normal' Conference, Melbourne, 2016. Workshop: *Mental health in the arts workplace*.

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For the actors...the storytellers, the survivors, the mercurial light-bringers...

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Preface

As I move through the final stages of preparing this manuscript, it seems appropriate to reflect on how this program of research came about. In many ways, I have been set on this course since I graduated in 1999 from the Flinders University Drama Centre in South Australia, Australia. I was a newly minted director, 21 years old, whose passion for drama had borne me through my professional learning to the brink of my creative career. I underwent four years of rigorous training, including many of the same classes as my colleagues who were actors: vocal training, dance and movement, acting technique, devising new work and performing existing shows in lengthy production periods. As an emerging artist, I had massive loans and a heavy load of anxious uncertainty to carry forward; but I also had a project on the horizon, single-minded drive and skills. I had learned my craft, and in the subsequent decade I applied it wherever possible in the world of theatre, in venues and with companies large and small, as director, assistant director, stage manager, administrator, writer, lighting and sound operator and usher/front of house manager. I supported myself financially by working an array of casual jobs in cinemas and retail. With other willing artists, I put on shows with no budget, no pay and small audiences. I said yes to everything, worked extremely hard and my career trundled along in a similar vein to my colleagues: sporadic, exhausting, occasionally exciting and satisfying, and with high personal cost, driven by the wonder of storytelling.

As a director in both funded and non-funded companies I had the opportunity to work with actors at all stages of career, from new graduates to seasoned veterans. The work of a director with a group of actors is intimate and compelling. Ideally, the director creates an alliance with each actor and finds out very quickly how to interpret that actor's signals. The director works to provide the safety which will allow the actor to take deep emotional risks. Everyone works in alliance toward a common vision of the story. It is very like the relationship between therapist and client and often, as a director, I became confidant, witness

and guide to actors' struggles with psychological wellbeing. Throughout my career, I did not experience a single occasion in which psychological wellbeing was openly discussed, nor was I aware of anyone seeking professional help. The world of performing arts seemed complete unto itself: a consuming and demanding bubble, with a specific culture and rules for behaviour.

The above experiences, along with my struggle to psychologically and materially sustain my beloved artistic career, led me to re-train as a psychologist. The opportunity to undertake a PhD was one I never looked for, but when I became aware of the sheer lack of research with actors, the chance to lay a small foundation stone of evidence for actors' needs was too important to pass up. The program of research in the following thesis was, therefore, guided by the principle that the experiences of actors, both in vocational training and the profession, have been overlooked in research; an issue explored further in section 6.4 of Chapter 1. Further, there is reason to suppose, given their unusual work demands and environments (both professional and training), that actors may have a unique understanding of what psychological wellbeing is or means. Actors may also be exposed to a specific set of factors impacting their psychological wellbeing and this has flow-on implications for their care and support. Finally, it is not yet known what support or care actors might need to improve and maintain their psychological wellbeing. There is certainly no known specialist, evidence-based psychological service catering to actors. Moreover, it is not known if a specialist service is necessary, or if treatment-as-usual is sufficient to meet actors' psychological wellbeing needs.

It is my sincere hope that the following thesis is of assistance to actors and those who work closely with them, both in training and in the profession. I hope it provides a launching pad for clinicians already working with this population. I further hope it may spark interest in other researchers and clinicians to consider engaging more proactively with actors and building a path to evidence-based practice which will consider actors' preferences.

Aims

The aims of this program of research were as follows:

1. Investigate how student and professional actors define psychological wellbeing, with the broader goal of identifying whether this is context-specific and/or fits with dominant established models of psychological wellbeing.
2. Investigate what factors impact the psychological wellbeing of professional actors.
3. Investigate what factors impact the psychological wellbeing of student actors in vocational training.
4. Explore the preferences of student and professional actors regarding how to improve/maintain their psychological wellbeing, with the broader goal of guiding clinical practice and service development.

Overview

In Chapter 1, I begin by outlining the practical considerations of this research program, such as the requirements of my combined Doctor of Philosophy/Master of Psychology (Clinical) candidature. This is followed by a guide to clinical frameworks encompassing both mental disorders and indicators of positive functioning, along with a brief explanation of the principle of evidence-based health care. I then provide a background introduction to the arts in Australian society, with specific information on the workforce of professional actors and the body of student actors in vocational training. I continue by introducing the specialty of performing arts health, including its history and the current state of service in Australia. I identify key theoretical concepts used in this thesis, including a note on language, the dual-focus framework of psychological wellbeing and a model through which to consider positive functioning.

I then review the evidence concerning performing artists' psychological wellbeing, including a note on the complexity of searching this literature and a summary of the trends in psychological research with musicians and dancers. The 'forgotten patients' section reviews the scant literature on psychological wellbeing in professional and student actors. The rationale for the research is summarised and the aims re-articulated. Chapter 1 concludes with an overview of the research program, together with an outline of ethical considerations and the methodological approach, including a discussion of quality in qualitative research and the specific types of analysis used.

The subsequent four chapters consist of manuscripts, with varying publication status, reporting the results of this research program. Chapter 2 consists of a paper currently under review by *The Australian Community Psychologist*, entitled "Actors define psychological wellbeing: through the lens of social identity". The paper details the first study in this program; an investigation into how professional and student actors define psychological wellbeing and suggests that actors' definition is context-specific and grounded in their social

identity as actors. The results are discussed in terms of implications for monitoring and measuring actors' psychological wellbeing.

Chapter 3 contains the published manuscript of a paper arising from the second study: "Exploring psychological wellbeing in a sample of Australian actors" (doi: 10.1111/ap.12221, *Australian Psychologist*). This study investigated what factors might impact the psychological wellbeing of professional actors and the paper discusses the results in relation to mental illness and positive functioning and highlights key areas of interest including: anxiety, depression, trauma, perfectionism, alcohol use, loneliness, low help-seeking and identity problems, along with identifying actors' personal strengths.

Chapter 4 contains the published manuscript of a paper arising from the third study: "Exploring psychological wellbeing in acting training: an Australian interview study" (doi: 10.1080/19443927.2017.1324518, *Theatre, Dance and Performance Training*). A sister-study to that found in the previous chapter, findings are once again discussed in relation to mental illness and positive functioning. Key findings in the student population include the impact of: complex personal relationships, intense workload, chronic uncertainty, perfectionism, personal strengths, mental health difficulties, identity de-stabilisation and feeling exposed.

Chapter 5 consists of a manuscript in preparation for submission to *The American Journal of Community Psychology*. This manuscript, "Supporting psychological wellbeing in student and professional actors: an applied ecological scoping study" reports the results of the fourth and final study in this program of research. The study explored student and professional actors' preferences for psychological wellbeing support. The findings are reported as an ecological timeline of needs from training through working life and highlight the need for intervention in multiple domains and the vast scope for future research and engagement with actors.

Finally, in Chapter 6 (Conclusions), I summarise the findings and articulate the overall significance and implications of the research. The chapter builds on, but does not re-state or re-work discussions found in the manuscripts (as outlined by the rules for the thesis-by -

publication format) and is, therefore, more concise than the concluding chapter of a traditional thesis. This chapter also highlights limitations of the program of research and details directions for future investigation and clinical endeavour.

Summary of terms

Before continuing to the first chapter of this thesis, it is necessary to outline some of the key population and theoretical terms used within this work. This is important both in relation to clarity and to note that these terms are used consciously, with acknowledgement of the fact that they may be contentious or debated.

Firstly, this thesis deals with a research population of actors, who fall into the category of both artists and performing artists. The terms ‘actor’, ‘artist’ and ‘performing artist’ are often used interchangeably both anecdotally and in scholarship. Within this thesis, however, it is important to highlight that they technically refer to different groups of people, with this thesis focusing on actors specifically.

The term ‘artist’ is used to denote a person who professes and practises an imaginative art, is skilled in one of the fine arts and/or is a skilled performer. Artistic practises include, but are not limited to, visual art (such as painting and sculpture) and performing art (such as music, dance and acting). More specifically then, a ‘performing artist’ is a type of artist whose work is displayed either live or in a recording in front of an in-person, radio or online audience or screen consumer and requires the presence and use of that performing artist’s physical body for the work to be delivered (Manchester, 2009). Performing artists work in disciplines such as, but not limited to, music, dance, acting, circus, opera and performance art. Importantly then, I use the term ‘actor’ to refer to a performing artist whose work involves developing and portraying a character in front of an audience (either live or recorded). This work may be in the context of an existing story/text or the creation and staging of a new work. An actor may work across a variety of platforms including theatre, film, television, radio, online or cross-platform work. An actor is required to use body, voice, facial expression and emotion to convey a specific message to an audience and is frequently required to memorise, recall and express large volumes of text.

Secondly, several theoretical terms are used throughout this thesis, the meanings of which are debatable and, at times, contentious. Each of the terms summarised here is explained in further detail in the appropriate section of this thesis. As a candidate for a professional psychology degree in combination with a Doctor of Philosophy, I built this program of research from a ‘clinical psychology’ framework. The purpose of clinical psychology can be defined as understanding, predicting, and alleviating maladjustment, disability and discomfort, as well as promoting adaptation, adjustment and personal development (American Psychological Association, 2013). Clinical psychology is a health profession and in this thesis I conceptualise ‘health’ as a complete state of wellbeing, rather than purely the absence of disease (in alignment with the World Health Organization, 1948). This approach, considering both the negative and positive aspects of human experience, is known as a ‘dual-focus’ approach (see section 5.2 of Chapter 1).

This clinical psychology thesis is bound to operate in the realm of ‘mental health’. Here, I am again guided by the World Health Organization, under the auspices of which good mental health is considered to be a state that allows people to realize their potential, cope with the normal stresses of life, work productively and contribute to community (World Health Organization, 2013). Further, I specifically use the language of ‘psychological wellbeing’ (PWB) to denote an approach to mental health encompassing the impact of both ‘mental disorders’ and indicators of ‘positive functioning’. Mental disorders (also termed ‘mental illnesses’) are considered to be those found in the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM5)(American Psychiatric Association, 2013), while positive functioning is denoted by indicators found in Ryff’s (1989, 2014) model (see section 5.3 of Chapter 1 for more information). Finally, I utilise an ecological approach to PWB (Bronfenbrenner, 1977), which highlights the impact that contextual factors such as culture, political institutions, working and learning environments have on an individual’s dynamic and evolving state of PWB.