



6-2018

Drug Story Theater: Where the Treatment of One Becomes the Prevention of Many

Joseph Shrand

Drug Story Theater; Harvard Medical School, drhsrand@drugstorytheater.org

Follow this and additional works at: <https://remix.berklee.edu/mh-exchange-music-medicine>

 Part of the [Substance Abuse and Addiction Commons](#), and the [Theatre and Performance Studies Commons](#)

Recommended Citation

Shrand, Joseph, "Drug Story Theater: Where the Treatment of One Becomes the Prevention of Many" (2018). *Crossroads of Music and Medicine*. 5.

<https://remix.berklee.edu/mh-exchange-music-medicine/5>

This White Paper is brought to you for free and open access by the Music and Health Exchange Series at Research Media and Information Exchange. It has been accepted for inclusion in Crossroads of Music and Medicine by an authorized administrator of Research Media and Information Exchange. For more information, please contact jmforce@berklee.edu.

Drug Story Theater: Where the Treatment of One Becomes the Prevention of Many

Abstract

Drug Story Theater takes teenagers in the early stages of recovery, teaches them improvisational theater, then uses psychodrama to help them create their own scripted shows about the seduction of, addiction to and recovery from drugs and alcohol. They perform these shows for middle schools and high schools so the treatment of one becomes the prevention of many. In between each scene, the cast members come out of character and use power-point presentations to teach the audience about the neuroscience of the adolescent brain. Through the DST program, teens in recovery experience the rewards of positive feedback, personal value, getting paid and the sense of accomplishment inherent in the field of theater.

Keywords

Adolescents; Expressive Arts Therapy; Music Therapy; Recreative Music Methods; Self-Concept; Substance Abuse and Addiction

Disciplines

Substance Abuse and Addiction | Theatre and Performance Studies

**Drug Story Theater:
Where the Treatment of One Becomes the Prevention of Many**

Joseph Shrand, M.D.

Participation moment #1. Imagine a boy playing a tuba behind an outhouse. Standing at a distance is a crowd of people, unable to see the boy, but hearing what they think is an extreme evacuation, loud farting noises, coming from inside the lavatory. The outhouse represents the wall of judgment, the shame of stigma. If we cannot get beyond the stigma, we will miss the music of each other and just think the worst.

Unfortunately, people who use drugs and alcohol get judged as being “bad” people. A person who thinks you see them as bad, or flawed, or broken, is not going to come and ask for help. In fact, only 10% of teenagers challenged by drugs and alcohol will get treatment. How do we change stigma? Stigma is based on perception. Change the perception; change the stigma.

Participation moment #2. Look at your index finger. Now close your left eye. Open and now close your right eye. Go back and forth a few times. See how the finger moves? That’s because each of your eyes has a slightly different geographic location in the world: a different perspective. There are more than seven billion perspectives in the world, each as valuable and interesting as the next. How do we get people to share those perspectives?

Participation moment #3. Close both eyes, count to three, then open your eyes again. That’s trust. How do we get someone to trust us with their perspective? That’s where Drug Story Theater comes in.

Drug Story Theater takes teenagers in the early stages of recovery, teaches them improvisational theater, then uses psychodrama to help them create their own scripted shows about the seduction of, addiction to and recovery from drugs and alcohol. They perform these shows for middle schools and high schools so *the treatment of one becomes the prevention of many*.

In between each scene, the cast members come out of character and use power-point presentations to teach the audience about the neuroscience of the adolescent brain. All the young people in the audience take a pre-show neuroscience quiz, and the same quiz after the show. Students who learn about their brains are more likely to change their perception about the addictive potential of drugs and alcohol including marijuana and about their effects on their school performance and their relationships in general.

After the show there is a “Talk Back” between the audience and the DST kids, a powerful communication that quickly breaks down the “outhouse wall” of stigma.

The first scene is **Seduction**. DST kids portray how they got into using drugs and alcohol. After that scene, the first power point presentation teaches the audience that all drugs and alcohol force the brain to make *dopamine*, an ancient brain chemical of pleasure. Dopamine affects the limbic system and is responsible for feelings, impulses, pleasure and memory. This is the part of the brain where addictions start.

The next scene is **Addiction**. This scene details the progression from the “recreational” use of drugs and alcohol to addiction and dependence. The desire, urge and need to use drugs begins to interfere with their lives, their relationships and their school work. The following powerpoint teaches that if a person starts using drugs or alcohol *after* the age of 21, one out of twenty-five people are at risk for lifelong addiction. However, if a person starts using drugs *before* the age of 18, the rate of lifelong addiction number rises from 1:25 to 1:4. The teenage brain is at highest risk for life-long addiction more than any brain simply because of the way it is developing. Why?

A picture of a great white shark illuminates brain development, and the difference between adult and adolescent brains. Right behind our forehead is a part of our brain called the pre-frontal cortex (PFC), responsible for thinking, solving problems, taking action and for anticipating the consequence of those actions. The PFC matures into adulthood. An adult would *not* swim with a great white shark.

However, in teenagers, the limbic system is more in control of the brain. A young person *may* swim with a great white shark, because that person is *more* impulsive. A teenager may swim with that shark, and a kid can start using drugs without being able to think about the future. One out of every four teenagers who use drugs or alcohol before the age of 18 is at risk for lifelong addiction simply because of the way the brain is developing.

This information confronts the stigma that people who are addicted are immoral people. Addiction is not about morality; it is about mortality and simply the way the brain is developing.

The **Treatment** scene mentions the brain chemical of trust: Oxytocin (not OxyContin!). The power point explains how this chemical is responsible for a different type of pleasure: the rush a person feels when another person sees them as amazing.

However, dopamine interferes with oxytocin. All drugs and alcohol force the brain to make dopamine. DST teaches that people can do drugs, but the price they are going to pay is trust. They get to choose.

Stigma is devastating, separating one person from another. DST is determined to dismantle stigma. Stigma comes in many forms, not only concerning drugs and alcohol. People are quick to judge another person as not good enough. The clothes they wear, the color of their skin, the myriad of ways that another can be seen as less-than, broken or without value. A person seen this way may begin to have low self-esteem. The greatest risk for a person who has low self-esteem is using drugs for the first time.

DST teaches that everyone wants the same thing: to feel valued by another person. At any and every moment in time, we can remind someone of their value and increase their oxytocin. And every time a person reminds another of *their value, they increase their own value*. The positive side of peer-pressure is that everyone wants to feel valuable. Every person can remind someone of their value and decrease the chance of low self-esteem, that greatest risk factor for first time use. No person can control another, but everyone can influence another.

Through the DST program, teens in recovery experience the rewards of positive feedback, personal value, getting paid and the sense of accomplishment inherent in the field of theater. DST's innovative concept for providing addiction treatment for individuals in early recovery has resulted in a performance-based prevention program designed to reach large peer and community audiences so "the

treatment of one becomes the prevention of many." They truly are helping others to break down stigma and hear their music. To learn more, please contact us at www.drugstorytheater.org