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Responsible Care in Actor Training: Effective support for occupational health training in Drama Schools

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Abstract

How actors are adequately prepared for their lifetime of work can be a vexed issue. However what is emerging in the field is data that suggests more can be done to prepare those entering the acting profession and support actors throughout their career development. The authors of this article argue that teaching staff, support staff and industry partners might usefully enter into conscious dialogue with each other about ensuring a healthier interplay between students' developmental needs, course expectations and workplace culture. Otherwise, students can be caught in a dilemma between accessing personal and interpersonal support as well as being professional and industry-ready.

Keywords:

Introduction

Those involved in the training of actors arguably need to be responsible in their care of students to provide the most comprehensive information and relevant skills to equip graduates to manage the occupational vulnerabilities

and risks associated with their work as professionals. Actor training is one such area of the performing arts where scant regard has been given to the occupational hazards of the job other than physical workplace health and safety matters. Furthermore, until very recent quantitative and qualitative studies of actors' health and wellbeing in Canada (Szlawieniec-Haw 2012) and Australia (Maxwell, Seton and Szabó 2013), the awareness of broader hazards, for example performance anxiety, financial and relational stress, bullying and harassment, remained primarily anecdotal or passed on through actors' 'war stories'.

In October 2013 Drama UK (the standards and advocacy organisation for Drama Schools in the United Kingdom) featured on its website an article by the British Association for Performing Arts Medicine (BAPAM) on the value of training and healthcare for successful acting careers (Drama UK October 2013). In announcing the launch of this feature article BAPAM asked its online membership whether or not they agreed that occupational health should be a core component of actors' training. It would appear, on the post, that no one had an opinion one way or the other.

Almost twenty years earlier, in the United States, the Performing Arts Medicine Association's (PAMA) founder, Alice Brandfonbrener, in a December 1992 Editorial of the Association's Journal, *Medical Problems of Performing Artists*, wrote of 'The Forgotten Patients', referring to actors. She observed, in the lifestyles of those associated with the theatre, that there were health risk factors 'including sleep deprivation, poor dietary habits, excesses of caffeine, tobacco, and alcohol; and a higher use of street drugs than I have encountered either in musicians or in dancers' (Brandfonbrener 1992, p. 101).

She also found that such risk-taking behaviour, while not condoned by peers, was sustained by an attitude of 'live and let live' unless a situation approached an emergency level. As a consequence many artists failed to seek timely help when treatment might be appropriate and effective. This reluctance in seeking help has also been identified in the Actor's Wellbeing Survey by the University of Sydney as described later in this article. Brandfonbrener also identified factors relating to potential 'psychological hazards of the theatre' regarding the requirement of the actor/actress to portray convincingly the emotions of their characters and, indeed, temporarily to take on the personality traits of this character (1992, p. 101). Her personal observation in providing medical care to many actors and actresses in this process of character creation was that:

> … while integral to being what they are, can put them in touch with some of their own feelings for the first time … For some this is a positive experience, but for others the process can range from difficult to unbearable. Even the most mature, stable, and experienced actor suffers the effects of playing Willy Loman night after night, and this is not confined to what transpires on the stage. This consequence is one that all of us should think about when we go to the theatre and especially when we are treating the medical problems of actors and actresses (Brandfonbrener 1992, p. 101)

From Brandfonbrener's Editorial, and from the apparent lack of engagement from both BAPAM and Drama UK's online memberships with the question of

occupational health and wellbeing for actors it might be concluded that actors, as a performing arts sub-group, do not openly express concerns about their health and wellbeing. At an industrial level, until perhaps more recently, it certainly does not appear to register as a priority for actors as union members.

Institutional Stakeholders and the Health of Actors

During Mark Seton's research into actors' health and wellbeing in the UK in 2009, he met with Stephen Spence (Assistant General Secretary, Live Performance and Organising), Martin Kenny (Legal Referrals Officer) and Hilary Hadley (Head of Organising, Live Performance) of Equity (UK). They, collectively, provided insights into what was of primary interest not only for actors but for the union as it sought to support them, represent them, and fight for their rights, while facing diminishing resources within the UK economy and the wage-earning capacity of Equity's constituency. The priority for actors, according to Spence, was about getting work and being appropriately remunerated rather than concerns for ongoing health and wellbeing (Seton 2009, p. 26). Hadley noted that the Theatre Safety Committee (TSC) did work for actors to address the physical aspects of health and safety. For example, they had produced reports on safe practice on the use of rakes (raised stage floors that can cause accidents and injuries to performers) that were widely available (Seton 2009, p. 26). These guidelines were being incorporated into industrial agreements and this was done within the context of producing guidance to the industry on safe working practices.   Seton's research

identified that at that time Equity was not actively addressing many of the broader, long-term health and wellbeing matters identified by Brandfonbrener in 1992.

However, in mid-February 2014, Equity alerted its members' attention to the workplace issue of bullying and harassment. It noted that:

> [t]he worlds of the media, arts and entertainment are often seen as glamorous, but a survey of 4,000 workers has revealed these industries are 'hotspots' of bullying, with more than half of those questioned (56%) saying they had been bullied, harassed or discriminated against at work. This statistic is compared to research in other industries such as the National Health Service and the education sector where research showed bullying reported at 20-25%. (Equity 17th February 2014).

Equity's General Secretary Christine Payne commented:

> We often hear excuses that the demands of creating art and entertainment are such that a difficult and sometimes unsafe working environment is necessary. This is simply not the case. We do not believe working people should be made to suffer for their art and we need to draw a line in the sand. On one side is good management, motivation and leadership and on the other is harassment, bullying and abuse. (Equity 17th February 2014).

The survey results showed significant levels of ill-treatment and inappropriate behaviour and a culture of silence, with only a third of those suffering bullying and harassment reporting the incidents. Eight out of 10 women (81%) responding to the survey said that their gender was a factor in the bullying, harassment and discrimination they suffered. The respondents reported incidents from lewd comments to sexual assault and commented on pressure from superiors to enter sexual relationships (Equity 17th February 2014). Significantly one key recommendation of the *Creating without Conflict Report* was that '[B]etter training should be provided for workers and management in dealing with unreasonable behaviour' (Equity 17th February 2014). And it is the view of the authors that such training could and should also be integrated into the curriculum of drama schools.

Such a recommendation is highly relevant given that later in April 2014 Drama UK in association with Birkbeck University of London hosted a panel discussion on Higher Education's role in employment and employability in the performing arts (Drama UK April 2014). It was reported that the key issues raised included:

- The importance of preparing students for life after graduation and managing their expectations.
- How training at a drama school can differ from what is offered by other HE institutions with regard to preparing graduates for employment.

- The challenge and opportunity afforded to institutions in adequately preparing students for employment in an ever changing and developing professional arena.

However, it is pertinent to raise the question whether the Equity-identified issue of bullying and harassment, and the need for remedial training, was brought up at this meeting given that it had been identified as an issue in mid-February (Equity was not represented in the Panel but representatives may have attended the event).

Although it is not the intention of this article to comprehensively examine perceptions of bullying and harassment in the workplace it is conceivable that artistic directorial vision may contribute to these reportings. To add complexity to some of the concerns about workplace behaviour, one must be cognisant of the role of play and playfulness intertwined in an actor's art. Much of the play of actors deals with issues that fall outside accepted codes of social behaviour – an occupational hazard if you will. A cognitive understanding of identification between actor and character is commonly agreed across numerous accepted acting approaches. For example 'Stanislavski believed in the character and the actor being the same' (Kemp 2012, p. 146). During the rehearsal process and in performance many actors attempt to remain 'in the moment' in order to bring about qualities of 'truthfulness' to their work. It will therefore be highly likely that things will be said and possibly done that may cross established conventional work boundaries. Obviously this does not give carte blanche to actors to break the law but the worlds of fact and fiction do collide as part of their particular

occupation. But how are young actors trained to deal with moving in and out of potentially distressing 'worlds'? Does contemporary actor training adequately prepare these actors?

Identifying baseline parameters for health and wellbeing

The emerging concerns in the UK reveal existing gaps in quantitative and qualitative data about the specific occupational health issues impacting actors. This has led to the initiative of a pilot study of actors' health and wellbeing in Australia. The resultant Actors' Wellbeing Study (Maxwell, Seton and Szabó 2013) has been a collaboration between the Department of Performance Studies and the School of Psychology, of The University of Sydney, and the Equity Foundation (Australia) (Maxwell, Seton and Szabó 2013). The initial aim has been to establish a set of data that will enable researchers to identify key areas in which actors' wellbeing is both threatened and enhanced through their vocation. The pilot study consisted of an on-line survey in April-August 2013, which gathered a significant body of data on actors' working lives, their training, incomes from acting and non-acting sources, as well as their responses to a range of scales and tests:

> The Alcohol Use Disorders Identification Test (AUDIT, 1993);
>
> The Drug Use Disorders Identification Test (DUDIT, 2005);
>
> The Depression Anxiety Stress Scale (DASS, 1995);
>
> The Eating Disorders Diagnostic Scale (EDDS, 2000); and
>
> The Satisfaction with Life Scale (SWLS, 1985).

Preliminary findings have been reported to the Equity Foundation (Australia) for publication through its members' quarterly newsletter *Equity* and were also presented at the 2013 Annual Conference of the Australian Society for Performing Arts Healthcare (Seton, Maxwell and Szabó 2013).

The Australian survey had 782 participants, representative of all types of professional acting (including theatre, film, TV, radio, corporate, community, musical) of which women made up 57% and men made up 43% of the sample. The diversity of experience in terms of income (from performance, as distinct from ancillary work) and professional status (measured by rates of pay) was also reflected in the range of research participants. In terms of overall health and wellbeing, 56% of respondents (362 of 641) reported that, over a twelve month period, they had experienced some bodily, vocal or psychological complaint (ailment or condition) that had impacted adversely on their capacity to perform. Of this subgroup, a specific vocal complaint was noted by 20% of the respondents (72 of 362), a bodily complaint was reported by 33% of respondents (117 of 362), and a psychological complaint was reported by 24% of respondents (89 of 362). In addition another 23% (84 of 362) reported a combination of vocal, bodily and psychological discomfort. It is telling that 43% of respondents (155 of 360) needed to manage their complaint over one or more years, 22% of respondents (78 of 360) over several months and 16% of respondents (60 of 360) over several weeks.

In response to whether a bodily, vocal or psychological complaint might impact on their capacity to perform, 39% of respondents (141 of 361) tried performing despite strong symptoms, while 26% of respondents (95 of 361)

reported that their performance was slightly affected. However, 20% of respondents (73 of 361) indicated that their performance was strongly impacted by their complaint, and 11% of respondents (39 of 361) found that performance was not possible. Only 4% of respondents (13 of 361) reported their performance was not affected. In addition, 29% of respondents (203 of 679) reported experiences of debilitating performance anxiety (stage fright). On a more positive note, 85% of respondents (668 of 782) had a conscious and intentional warm-up practice as a regular part of their performance preparation. The survey also identified that 62% of respondents (452 of 689) experienced financial stress as a regular or constant issue and 51% of all respondents (404 of 782) provided detailed accounts of how performing adversely impacted on their personal relationships. These Australian findings are the results of initial analysis of the data collected. Local drama schools do liaise with Equity (in Australia) to provide professional guidance about some already identified occupational hazards to their graduate actors each year. However, this new research initiative by Equity in Australia, in partnership with the University of Sydney, has and will continue to identify other crucial areas of ongoing concern that need addressing both in professional development and in Australia's drama schools (Seton, et. al. 2013, unpaginated).

Around the same time, the Equity East of Scotland General Branch Committee, in response to the suicides (during late 2012 and early 2013) of a number of members of the performing arts industries, set up a Mental Health Working Party (Burdon, et. al. 2014). The Working Party designed and sent out an informal questionnaire to East of Scotland Committee members that informed a subsequent broader consultation event at the 2013 Edinburgh

International Festival at Fringe Central in August (Burdon, et. al. 2014, p. 3).
At this event participants were asked:

What are the issues you deal with that lead to stress?

How does this impact on you?

How do you cope? (Who – or what – do you turn to?)

What would help? (Burdon, et. al. 2014, pp. 16 - 18)

Through these questions they identified 'the repeated testimony of real distress within the profession caused by many aspects that are completely changeable but which are too often simply dismissed as 'going with the territory'' (Burdon, et. al. 2014, p. 6). In reviewing the reported qualitative responses from this event alongside the qualitative responses informing quantitative data gathered in the Australian survey (as reported above) there is much common ground to be engaged with. Given such studies it would be particularly pertinent to explore if professional entertainment maxims (often inculcated in drama schools and professional practice) – 'the show must go on'; 'whatever doesn't kill you makes you stronger'; 'survival of the fittest' – may actually be doing more harm than good. It is understandable that actors potentially fear losing both work and the respect of their employers and peers if they don't 'soldier on'. However they may also be risking the possibility of further complications and more serious, debilitating stress or injury by simply tolerating or trying to hide or deny such health concerns. Is this habit of self-effacement and self-denial in regard to wellbeing something that might be re-

constituted in a healthier way within the teaching and learning environment of a drama school?

Actor Training and Responsible Care in Higher Education

A major piece of published work by Ross Prior entitled *Teaching Actors: knowledge transfer in actor training* (2012) researching the training of actors in UK and Australian drama schools raises issues of what is understood in training. The monograph demonstrates the struggle that many actor trainers face in articulating their own pedagogy. 'Trainers need to ensure that they are indeed meeting the requirements of the profession and have the ability to understand their particular function as actor trainers' (Prior 2012, p. xxii). However many trainers found it difficult to put into words how they taught, relying heavily upon how they were trained.

Given that actor training grew out of a tradition of apprenticeships which eventually became institutionalised it may not be all that surprising to learn that there potentially exist differences between trained and apprenticed actors. The British actor Simon Callow distinguishes the difference between drama school-trained actors and apprenticed actors of the past:

> What did they have that their untrained predecessors lacked? I would put it in a simple phrase: the possibility of going further. The old method of learning how to be an actor was built on observation and imitation; it was, essentially, an apprenticeship. You entered the profession at a lowly level, you learned how to

make the most of what you'd got, you watched the leading actors

like a hawk, seeing how they got their effects, you developed by

doing. You formed your own ideas about what the job entailed.

You discovered what worked and what didn't. Sometimes you got

advice. It was a pragmatic, a rough and ready, Darwinian

survival-of-the-fittest sort of a business. (Callow cited in Prior

2012, p. 13)

If formal actor training now allows young actors to somewhat expedite the

rough road of the apprentice, what more is offered in training to adequately

prepare an actor for the inevitable stresses of the industry? Little evidence

seems to exist to demonstrate that young actors are given education and

training in how to deal with the hierarchy of the acting profession which is

evident from the time of audition in drama school, all throughout training and

into the profession where agents, casting directors, producers and directors

have final say. It would also seem that the whole notion of elite drama schools

and revered actor trainers reinforces such hierarchical structures that of

course may be open to abuse. It may be possible to witness questionable

training practices in actor training today where students are taken into

traumatic psychological states without adequate support. The power and

control that many actor trainers either wittingly or unwittingly exercise seems

evident. In creating competence and confidence in an actor, two qualities

recognisable in the outcomes of actor training (Prior 2012, p. 58), the role of

the trainer must be fully examined. However, when trainers claim to be

building confidence in their students what they may really be suggesting is

they are 'harnessing the mind of the learner' (Parsloe 1993, p. 150). H. Wesley Balk (1991) argues that rather than harnessing their minds these learners must eventually be allowed to learn through their own experience. He writes: 'Performers need the information – the instructions – necessary to develop and expand their performing power *on their own*, and to be released from dependency upon external authority figures' (p. 164).

Furthermore, the tension between the needs of the institution in relation to industry and the needs of the student with regard to wellbeing and responsible care has been identified by David Petherbridge, an integrative psychotherapist who, for eight years, was the Head of Student Support Services at a drama school in the UK. In a paper he co-presented (with Prior and Seton) at the Performance Studies International (PSI) conference at Leeds University in 2012 (Seton, et. al. 2012, unpaginated), Petherbridge identified that vocational training of actors poses particular stresses to students. Students are beginning their training earlier when they are less developmentally mature. While it was once more common to begin conservatoire training subsequent to completion of another undergraduate degree, because of the changes to HE funding in the UK more students start training immediately after secondary school. He asserts:

> They are learning how to leave home, move to a new city, live in and manage shared accommodation, and forming first sexual relationships. They may be doing all of these things for the first time as well as embarking on an incredibly intense actor training programme. (Petherbridge in Seton, et. al. 2012, unpaginated)

All of this occurs in addition to the financial cost of training that can leave students with a significant financial burden as they are starting out in their careers. So within this context, how do actor trainers and the institutions for which they work demonstrate responsible care so that the students learn about resilience for their professional lives after graduation?

Pastoral Care as a form of Student Support

The provision of pastoral care for acting students, according to Petherbridge (Petherbridge in Seton, et. al. 2012, unpaginated), has traditionally been addressed by personal tutors and the insights and understandings of teachers overseeing the students' training. This apprenticeship model transmitted professional skills to the students through close observation and critical feedback. The temperament required of actors was implicit in the demands of training.

More recently, however, drama schools in the HE sector have increasingly relied upon specialist support staff to augment support provisions for its students e.g. counsellors, advisors and disability services personnel. Some of the factors that may prompt students to come to Student Support Services including pre-existing health conditions, social and economic deprivation, ill-health in a student's family, bereavement, parental divorce, adjustments to university life, difficulties in relationships with peers or onset of possible mental health difficulties (Petherbridge in Seton, et. al. 2012, unpaginated).

Actor training and other performing arts education is increasingly occurring within university contexts where this level of professional support is longer established and where there is a developed culture of 'duty of care' and reasonable adjustments. However, Petherbridge observes:

> There is therefore a need to design very specialised support services, within actor training institutions, which really understand the institutional context within which they work – [support services that] understand the demands of the profession, understand the demands of the curriculum and understand the student's developmental 'journey'. [These] embedded student support services can also have a role in influencing the curriculum and helping shape best practice for example in the realm of making courses more accessible to students with disabilities. (Petherbridge in Seton, et. al. 2012, unpaginated)

An example given by Petherbridge of collaboration between student support staff and teaching staff can be found in the *The Actor's Body: Identity and Image* project. Staff had been approaching Petherbridge concerned about significant changes in students' body shape, particularly between second and third years. Staff did not know how to address this because there was a concern that talking about eating and body image distress might only make it worse. Petherbridge knew through his professional links with other support services in similar institutions that this was not an isolated problem. He brought in Susie Orbach, a psychotherapist and writer on body image, as a

first step to opening up a conversation between staff about the problem and the dynamics at play. The project included a conference that brought together student actors, teachers, theatre practitioners and industry representatives all concerned about the pressures on actors to have certain proscribed kinds of bodies. Longer term the project has led to innovations in curriculum content and delivery. It has created spaces and opportunities for students to debate and interrogate the various dynamics and narratives coming into play around and inside actors' bodies in training, and beyond into their professional lives. This allows students (and staff) an explicit rather than implicit process by which the very real industry pressures students experience can be thought through. However, this didn't negate the need for specific psychological interventions with some students to deal with pre-existing or emerging eating disorders.   (Petherbridge in Seton, et. al. 2012, unpaginated).

A significant aspect of the project has been the inclusion of the related disciplines of wardrobe and costume design. Petherbridge said that what emerged through discussions between disciplines was the distress among costume design and wardrobe students when they were measuring acting students:

Costume design and wardrobe students were charting changes
in the shape of acting students' bodies and they were also party
to disparaging comments acting students would make about
themselves. They were coming to staff affected by what they
were seeing and hearing. One response from teaching staff was
to start to hold costume fitting workshops which included role

reversals between acting and costume students - again to open up the implicit and make it explicit allowing reflection and discussion. (Petherbridge in Seton, et. al. 2012, unpaginated)

Petherbridge argues that effective student support needs practitioners to identify and then engage with each of the spheres of influence acting upon themselves and their students:

Specifically, the role of student support services is to hold a multi-perspectival view of the student experience and the various "actors" influencing it. Student support services [embedded in training insitutions] in cooperation with teaching staff can make valuable contributions both to individual students' experience and the trainings offered as a whole when they help the different players involved empathically connect with one another. For example, one can't simply start championing [wellbeing needs and concerns of] students and get into an oppositional relationship with the industry, a "them and us" scenario. What is needed to promote responsible care is something more holistic. The training process [within training institutions] needs to encourage the articulation of the student experience in relation to peers, tutors, the institution and the industry. (Petherbridge in Seton, et. al. 2012, unpaginated)

Responsible care: challenges and opportunities

A challenge for actor training institutions and particularly teaching staff is to provide students with the richest learning opportunities that will make them industry-ready while ensuring educational quality assurance requirements. Many actor trainers experience this precarious balancing act of HE accountability and industry-readiness as a tug-of-war rather than a collaborative opportunity to develop inspiring teaching and learning that will benefit both the graduate and the industry.

Trainers often rely on 'feelings', 'intuitions' and 'traditions' when making choices in their teaching approach. While they are maybe seasoned practitioners, they predominantly may not have strong theoretical foundations for teaching and learning. Many may also struggle with recalling what it was like to not be an expert, and have difficulty making learning incrementally accessible and achievable in the rehearsal room. They often resort back to the 'way they were taught' (Prior 2012).

In particular, Conservatoire training typically involves long hours and the consistent physical training of voices and bodies, much like that of an athlete. Prior (2012) in his study reports:

> Actor training was seen [by actor trainers interviewed] to be experiential and based on 'trust' whereas universities were seen as places of intellectual endeavour and were based on 'scepticism'. Unanimously it was agreed that actor training relies upon understanding organic processes where actors are trained in an environment that supports practitioner-tutors who pass on

their own experiences. (pp. 146–147)

In Seton's doctoral research into sites of actor training he documented how, in acting school environments, the disciplines of training necessarily exert a formative effect on student bodies and minds. Openness, connection and vulnerability were among the key virtues pursued by teachers and students alike (Seton 2004, pp. 193 - 195). Suzanne Burgoyne in her 1991 *Theatre Topics* article observed that 'We educators like to consider ourselves professionals, but I have yet to see an explicitly-stated code of ethics guiding the training of actors' (p. 1). However, in spite of the submission of a 1997 Ethics Task Force Report (which calls for safe practices but does not identify potential risks) by the Association for Theatre in Higher Education (ATHE) in the United States, there has been no further collaborative discussion among teachers of acting to interrogate and address matters of vulnerability in actor training. Meanwhile, acting teacher Cheryl McFarren notes in her doctoral research *Acknowledging Trauma/Rethinking Affective Memory: Background, Method, and Challenge for Contemporary Actor Training* (2003) that there is often little, if any, consideration of the students' innate sensitivities that might, without the careful attention of the trainers, unwittingly place some at higher risk of mental illness. In such contexts, while very powerful teaching techniques are used to help students 'connect' and 'feel' the worlds of their characters, there is little if any training offered to help students cool-down and debrief, particularly after enacting some kind of traumatic experiences of the characters played (pp. 184, 201). What students learn and experience, in the institution, about appropriate self-care and sustainable practice is crucially

what will give them a better chance of surviving and hopefully flourishing in the field.

A more recent contribution to the responsibility of teachers for the care of student actors comes from Stephen Wangh's recent publication *The Heart of Teaching: Empowering students in the performing arts* (2013). While his focus is on how learning occurs and what nurtures creativity in students, he does articulate some of the often unspoken practical concerns of trainers as they encounter dynamics in the classroom and challenges such as student resistance, appropriate touch and student-trainer transference. He suggests that the angry or erotic impulses that a trainer may feel toward a student are not necessarily problems in themselves but it is rather the inescapable inequity in power between trainer and student that is overlaid on such feelings, especially when the trainer (as actor, director or casting agent) is an active professional and potential gate-keeper to the industry that the student aspires to enter (pp. 94, 95). According to Wangh, good teaching is an act of love:

> Whether that love is expressed as a touch, a smile, or a challenge, a critical insight or a word of encouragement, what good teachers give their students is the sensation of being seen and heard and appreciated – that is they give them the experience of being loved. (p. 95)

The observations and concerns of these actor trainers highlight the need for actor training institutions to initiate and facilitate deeper discussions. Conversations bringing together all stakeholders such as teaching and

administrative staff, student support staff, industry representatives, and students, should generate practical outcomes to support responsible care for students' holistic wellbeing as they prepare for industry and how they might sustain a healthy career.

It should be noted that current Higher Education professional development programmes to improve the educational and pastoral skills of teachers across all disciplines will necessarily emphasise the reviewing of generalised principles of 'effective teaching practice'. But such a general approach reveals a gap in understanding of how acting epistemologies – ways of knowing within the various sub-disciplines of acting – might usefully inform pedagogical practice, and approaches to learning to teach. There is potential to develop modes of professional learning and engagement that enable acting teachers to build teaching capability by firstly considering how the distinctive forms of thinking and reasoning within their discipline will require their students to employ particular kinds of learning, thinking, and knowledge building; secondly, why these may prove difficult and challenging for students to learn; and, thirdly, what trainers can do to support and enable students to overcome such difficulties (D'Agostino and O'Brien, 2010). Furthermore, Prior advocates that '[a] further consideration for the future might be to suggest a paradigm shift from traditional master-apprentice type models to newer apprenticeship models that allow for greater co-participation with working actors, and training models that are clearly articulated' (Prior 2012, p. 220).

Conclusion

More comprehensive and deeper awareness of potential physical, vocal and psychological hazards and industry challenges including financial, political and relational challenges both within actor training and beyond is something these authors anticipate can be achieved. As research begins to gather more data in this area the awareness of occupational risk must continue to be a topic of discussion, debate and affirmative action. We can no longer ignore preliminary research data and congruent anecdotal evidence emerging from a range of individuals and organisations shedding light upon this important subject.

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