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Theatre, disability and wellbeing: addressing best practice and creative outcomes across disabled and non-disabled communities through an Interpretative Phenomenological Analysis

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ABSTRACT

Background: In the context of ongoing underrepresentation of disabled people and shifts in the theatre industry, this article examines the significance of personal disability understandings and how these are interpreted in relation to the wellbeing of disabled people in theatre.

Methods: The findings presented are part of an Interpretative Phenomenological Analysis; an interdisciplinary study detailing experiences of theatre practice and disability among professional actors and directors in theatres that are funded by Arts Council England.

Results: One of the six emergent themes from interviews, *Navigating Inexperience of Disability in Theatre*, assists in considering disability understandings and aspects of actors' wellbeing in this article. It details interpersonal and emotional competencies required of disabled people in day-to-day practice; these relate to confidence, risk, empathy, compromise, value, and contribution.

Conclusions: Routes to building accessibility in theatre are proposed as a shared and personal endeavour; value is placed on learning from disability as crucial in preserving wellbeing, creativity, and effective arts practices across disabled and non-disabled communities.

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Background

Despite statistical evidence of ongoing underrepresentation of disabled people in theatre, professional performance opportunities for disabled people are developing outside of disabled-led theatre companies like Graeae, who are well known as “experts in accessible aesthetics” (Graeae, n.d.). Actors with a range of impairments have been cast in recent seasons at the National Theatre, Royal Shakespeare Company (RSC), and regional theatres across England. Arthur Hughes, who self-defines as a “disabled actor” who is “limb

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different”, describes his recent casting in the title role of *Richard III* as “a big gesture from the RSC... taking disability representation seriously” (Saunders, 2022), a sign that approaches to onstage roles are shifting. Moreover, for the first time, major theatres are being held accountable by Arts Council England (ACE) for the position disabled people have within their workforce (Arts Council England, 2015). Theatre critic Lyn Gardner highlights that disability has fast become the day-to-day business of all individuals working in theatre, commenting, “no artistic director planning a programme or casting a show can hide any longer behind lack of knowledge [...] people will be on your case” (2016). As strategy and practice are shifting, so are the personal experiences of disability and theatre among professionals in the industry. ACE’s (2015) shift in diversity strategy is provoking a genuine reassessment of casting, rehearsal, and performance practices; but due attention must also be given to psychological shifts in understandings of disability and theatre that are being navigated in theatre workplaces. If these are not considered, even though collaboration across disabled and non-disabled communities may increase, it is possible that the environments, structures, and attitudes experienced in theatre settings will be neither helpful nor appropriate.

Recent publications around disability and theatre have moved from historical accounts of exclusion and stereotype to more nuanced discussion of shifts in theory and practice, and the perspectives of disabled people (A. M. Fox & Sandahl, 2018; Johnston, 2016; Koppers, 2017). These align with the approach taken here. Recognising the range of arts-based studies centred on disability-focused projects (Dacre & Bulmer, 2009; Eckard & Myers, 2009; Johnston, 2017), the Interpretative Phenomenological Analysis (IPA) study informing this article sheds light on lived experiences of disability in the context of professional theatre practice (Worthington, 2021). Existing literature around the participation of disabled people in theatre often culminates in guidance for inclusion, which highlights changes in practice and environment required of the majority, non-disabled people (Barton Farcas, 2018; A. Fox & MacPherson, 2015; Graeae, 2009). Writing such as this provides much needed information for those less experienced in working with disabled people to support their participation in the arts. However, less attention is given to how inexperience or non-disabled theatre makers’ need for guidance around disability issues impacts the wellbeing of disabled people they work with, which is the focus of this article.

Performance and disability scholars Galloway, Nudd and Sandahl provide a manifesto for what they refer to as an “ethic of accommodation” (2007). This draws attention to shifts in attitudes, behaviour, beliefs, and creativity that are necessary in making performance practice accessible. They adopt the term accommodation, to encompass adjustments “to an environment, an attitude or requirement so that a disabled person is able to participate” (ibid., p.228). In the UK, this term is more often substituted for accessibility; both are prevalent here. This article builds on key aspects of this ethic by drawing attention to mutual accommodations in theatre as a route to preserving wellbeing, creativity, and effective practices and outcomes across theatre settings; it exposes how disabled people carry a weight of responsibility for non-disabled people’s learning from disability and about accessibility, representation, language, and effective collaboration in practice.

Acknowledging the social, emotional, and wellbeing demands of disabled people employed in theatre is not intended to undermine their talent, expertise, or professional identity as actors. Instead, experiences of theatre practice and disability among actor-

participants in the IPA study referred to highlight intrapersonal and interpersonal competencies beyond the day-to-day requirements of an acting career. The ability to adapt to a range of performance settings is often assumed of actors, as is responding to diverse environments as offering a safe space for creativity and collaboration. Yet, for actors who self-define as disabled people, theatre workplaces are often experienced as complex and challenging environments when a lack of disability knowledge and understanding is encountered. Complexity stems from the historical exclusion of disabled people in theatre, rigid casting approaches, and medical model views of disability among those they work with. Findings examined here indicate competencies and emotional skills that are important in responding to this.

This article details lived experiences of theatre practice and disability among seven actors. It overviews the approach taken across the whole IPA study before examining a section of findings from actor-participants' interviews that are most relevant in considering the significance of disability understanding and wellbeing in theatre. Mutual accommodations across disabled and non-disabled communities are then discussed as a route to preserving wellbeing, creativity, and effective practices and outcomes across theatre settings. In closing, learning from disability in theatre is highlighted as beneficial to theatre training, not just for those in the industry but for others working across the arts, health, and disability sectors.

Research approach and methodology

Drawing on the rich history and critical knowledge of disability studies and considering shifting theatre practice, the Interpretative Phenomenological Analysis (IPA) study informing this article aimed to: understand more about why both actors and directors, disabled and non-disabled people, are choosing to, or not to, work together; facilitate open sharing of personal experiences of theatre practice and disability; and motivate policy based on lived experiences of practice and long-term change. IPA is "committed to the examination of how people make sense of their major life experiences" (Smith et al., 2009, p. 1). Its phenomenological, hermeneutic, and idiographic roots open a psychological view of experiences in theatre workplaces and how individuals interpret these. Semi-structured interviews were carried out with seven actors with physical impairments who self-define as disabled people, and twelve directors who consider themselves non-disabled. All participants had been employed in ACE's most highly funded theatre organisations since 2015; as it is now imperative these organisations report annually on workplace diversity, it seemed probable that issues surrounding the participation of disabled people in theatre would have heightened personal relevance for individuals in these settings (Bazalgette, 2015).

Open-ended questions encouraged participants to talk freely about their experiences and about key issues of theatre and disability identified in a literature review; these related to understanding and awareness, casting and theatrical roles, audiences and accessibility, and confidence and ability. Sample interview questions include: In what way has disability been relevant in your experience of theatre? How would you describe your own experience of working with directors/actors? What might effective work with a director/actor in rehearsal and performance look like for you? With participants' consent, interviews were

audio recorded, transcribed verbatim, and anonymised (the research was granted ethical approval from Newman University's Research Ethics Committee).

The inductive and thematic processes associated with IPA allowed findings to emerge from the interview data. The focus of IPA is on participants' attempts to make sense of their own experiences (Smith et al., 2009, p. 79). The analysis process began with the interview itself, with the researcher becoming aware of the participant's thoughts, feelings, and values. As set out by (Smith et al. 2009, p. 79–107), the analysis involved reading, listening, and notetaking; each transcript was annotated line by line with exploratory reflections, comments, and observations for each participant, and coded for descriptive, linguistic, and conceptual features. Based on annotations, emergent themes were identified and titled for each participant and written alongside individual transcripts. Themes in each transcript were then grouped together with a descriptive heading and a table of superordinate themes was created for each participant, linking to extracts from the original transcripts before moving to the next case. Finally, patterns across cases were identified, recognising themes shared across participants, and a master table of themes was created to highlight connections for each participant group.

Results: navigating inexperience of disability

The IPA study revealed what happens when a shift from the outside-in, in diversity strategy, impacts an inside-out view of intrapersonal and interpersonal processes of engagement with disability in theatre (Worthington, 2021; 2025). Extending beyond casting assumptions or funding requirements, this gave rise to complex and entirely personal responses reflected in six superordinate themes that emerged from the analysis. Themes for directors emerged as *Disability Consciousness*, *Narratives of Caution and Confidence*, and *Perceptions of External Constraints on Casting*. Themes for actors emerged as *Impact of Theatre on Perceptions of Identity*, *Wrestling with Authenticity*, and *Navigating Directors' Inexperience of Disability*. As an IPA study is purposed to uncover detailed accounts of real-life, the scope of this article allows for one superordinate theme from actor-participants' interviews, *Navigating Directors' Inexperience of Disability*, to be reported on; this theme is most relevant in considering the significance of personal disability understandings and wellbeing from the perspective of disabled people who work in theatre themselves.

Navigating Directors' Inexperience of Disability refers to how actors, Pete, Moira, Sophie, James, Lydia, Paul, and Neil (pseudonyms), are experiencing interpersonal engagement with directors, particularly working with directors for whom disability is unfamiliar. Findings relating to this theme expose how these actors are compromising their own wellbeing, comfort, safety, and creative satisfaction to preserve the wellbeing of non-disabled people they work with. The term *inexperience* denotes a lack of knowledge, skill, and wisdom. These actors describe how they respond to a lack of disability knowledge, lack of skill in making work accessible, and what could be viewed as a lack of wisdom to judge appropriate decisions in practice, whether experience is lacking or not. For them, navigating inexperience of disability requires careful negotiation with confidence, risk, empathy, compromise, value, and contribution. These factors reflect the competencies involved in *challenging disability issues*, *dealing with discomfort*, and *handling power*

dynamics; these emerged as three subthemes nestled within the superordinate theme, and structure the results that follow.

Confidence and risk: challenging disability issues

Actor-participants expose differing levels of confidence and risk associated with voicing their opinions in practice, and interpretations of whether this is appropriate or not. They describe experiences of challenging issues of accessibility, representation, and language in theatre workplaces. They set out diverse motivations and approaches adopted in responding to directors' disability views and levels of experience, and how they perceive their role in directors' learning processes. Like others in the study, Pete acknowledges inherited distance from disability as relevant in this, a gap that needs to be bridged. Speaking about how this impacts practice, he explains, "if they have a disabled child or a family member that's disabled [...] it's like a shorthand, it becomes easier" (Pete, p.10–11). It seems important to Pete that the people he works with understand wider disability issues. He expresses a need to offer guidance to directors lacking experience of disability and to explain disability in some way. He describes working with directors saying, "they know all the notes, but sometimes haven't quite learnt the tune" (p.9). His metaphor sets apart those who know "the notes", perhaps disability facts, policy, or appropriate language, and those who have learnt "the tune" (Pete, p.9); it appears this refers to those who have embedded this knowledge in practice, as he adds, "we talk about [...] a creative response to access within theatre, within art, some directors can't quite see that" (Pete, p.9).

In setting out approaches to challenging disability issues, actor-participants are keen to clarify that inexperience of disability does not necessarily hinder positive experiences in practice. However, directors' learning processes are significant. Moira describes her response to this, explaining, "I always go in [...] with a couple hats on I think in terms of like I understand that I'm an actor [...] but I'm also there as a teacher" (p.12). A battlefield mentality carries through her descriptions of practice, taking a head-on approach to declaring disability to assess whether her access needs will be met and, perhaps more importantly, whether those she works with are willing to listen and learn. Galloway et al. also recognised this as a necessary part of their ethic of accommodation that "includes the politics of listening as well as the politics of speaking"; they note, "most minority groups maintain that they have been 'silenced' by the majority and thus place speaking at a premium, disability communities often place listening on the same plane" (2007, p. 229). In this way, Moira battles against the grain as an actor positioning herself as a teacher or advisor on disability, expecting to be heard.

Although appearing confident in this forthright approach, this seems adopted out of necessity not choice, as Moira later clarifies:

... you get people asking you stuff all the time. You get people who don't understand who want to understand [...] If you want to be in a space where you're working and you're seen [...] you have to contend with it, you don't have a choice. (p.18)

The idea that Moira feels she must "contend" with directors' questions and need for advice on disability is a far from ideal reality of current practice. The wellbeing

implications of this are pointed to as she explains, “they’re going in with no knowledge and expecting the disabled cast to give them all that knowledge, that’s really unfair”; a situation she regards as “really frustrating politically and artistically” (Moira, p.25).

Speaking out about disability matters is not just about actors preserving their own wellbeing in terms of access needs being met, approaches in this reflect a political responsibility to accurately represent the disabled community. Sophie describes her experience challenging decisions around representation, saying:

there was an incident [...] that I took issue with [...] one of the actors, to help his character to be seen more sympathetically, he wanted to put his arm in a sling, and I was like, “hang on a minute [...] you’re asking an able-bodied actor to essentially crip up, like why are you doing that?” (p.13)

Sophie implies a weight of responsibility in this. Media articles have long argued that to “crip up” is unacceptable, that is for a non-disabled actor to play a disabled character (Ryan, 2015; Shaban, 2015); however, for an actor to present this argument face to face with a director perhaps requires more boldness, which carries personal cost, as Sophie adds:

I think I’m less scared of you know, I think most actors are like you have to toe the line to (laughs) get the next show, you know you’re so frightened of upsetting a director or producer in case you don’t work again [...] we’re not only doing this for ourselves we’re doing it for future generations of actors. (p.16)

It is unlikely that the risk involved in challenging directors’ approaches to disability representation is taken lightly by Sophie. Although her confidence has increased, fear of causing offence in practice is not alleviated entirely.

Lydia distinguishes between interpersonal skills in speaking up about logistics or representation and challenging personal disability views. She describes a rehearsal where the director referred to her by her impairment rather than by her name, and recalls, “the cast members came up to me later and they were like, ‘are you ok with that being said?’, and I was like, ‘no, not really [...] I should have just said’” (Lydia, p.11). Interpreting this, she explains, “as soon as it’s about someone’s vocabulary and it’s about someone’s actual point of view [...] that’s so much more personal and you don’t want to offend someone” (Lydia, p.12). Like Sophie, risk of causing offence appears real for Lydia, a reason to remain “silenced” (Galloway et al., 2007, p. 229). In announcing its new diversity strategy, former chair of ACE Peter Bazalgette recognised, “it’s all about changing minds”, what these actors seem to perceive as the greater challenge in practice (2015).

In contrast to Lydia, Moira and Sophie, Paul offers no examples of challenging disability issues. His stories centre on tactics to hide his impairment, expressing hesitancy to voice his most fundamental access requirements, as he states:

I always say it’s my problem [...] I hesitate to make a fuss about the wires being in the way and cables and microphone stands and bits of set, I hesitate to moan about that because I don’t want it to be a big issue. (Paul, p.10)

Confidence to speak up, or the ability to judge when it is appropriate to challenge and when it is not, cannot be assumed of practitioners, actors, or participants in any theatre setting; as Paul confesses, “you’ve got to be supremely confident in this game [...] and sometimes I’m not” (p.26). Yet, silence is detrimental to his wellbeing and those he works

with; he describes rehearsals where safety felt compromised, referring to the theatre workplace as “a very dangerous environment” (p.16). Instead of the expectation being “the majority make difficult changes in its practices and environment”, Paul seems intent on minimising necessity for this (Galloway et al., 2007, p. 229); it appears the risk of a negative response is perceived as too great.

Empathy and compromise: dealing with discomfort

Actor-participants uncover differing levels of empathy with directors’ learning processes. They express awareness of disorientation and discomfort experienced in exploring new territory, not distinguishing between disabled and non-disabled people’s levels of experience or knowledge. They detail personal perceptions of others’ discomfort working with them, individual efforts to minimise this, and the interpersonal and emotional skills this requires. Actors’ responses reflect the four attributes of empathy set out by Wiseman: perspective taking, being non-judgemental, understanding others’ feelings, and communicating this understanding (1996, p. 1165). Lydia and Sophie presume directors’ vulnerability and fear of error, acknowledging changes in practice can be difficult. Lydia comments:

the last thing I would want to do is embarrass someone about their perhaps lack of awareness, because I think the people that are taking a chance should be applauded [...], you know I didn’t know how to ... the first time I worked with a Deaf actor um looking back, I was awful [...] that wasn’t because I was being mean or anything like that it was just that I was a bit ... a bit ignorant. (pp.12–13)

Rather than being judgemental of inexperience, Lydia acknowledges a sense of risk felt in working with disabled people for the first time; she connects her own failings, working with a Deaf actor, with directors’ gaps in learning.

Likewise, Sophie recalls the discomfort she felt when first “exposed to a whole different politic in the room” (p.12). She interprets her learning alongside presumptions of how others respond to new disability understandings and difficulty interpreting this in practice. As Parrey recognises in students starting out in Disability Studies, initial consideration of disability perspectives can create personal moments of disruption and disorientation (2016). Sophie appears to acknowledge this. Like Lydia, referring to casting disabled people, she commends directors for making what she implies are brave and uncomfortable choices; she remarks, “courage is the main thing, you know, in terms of everyone (*sighs*) tackling this issue [...] it takes courage for a director to take a risk on an actor” (p.33). Sophie and Lydia seem to relate to perceived discomfort felt by directors as they reimagine accessibility, behaviour, and casting. Their empathy may be interpreted as a way of justifying the insufficiencies they experience. Galloway et al. suggest an ethic of accommodation involving non-disabled people “letting go of preconceived notions of perfectibility and negotiating complex sets of needs” (2007, p. 229). Here, it is disabled people making allowances for non-disabled people’s imperfections and the learning curve they are on.

As actor-participants describe encounters in theatre in which discomfort seems more tangible, they detail how compromising personal wellbeing is a factor in dealing with this.

Discomfort associated with disability is observed by James through directors' behaviour regarding questioning impairment. He describes:

you can tell very quickly how comfortable someone is with you [...] I'm aware that it's constantly on their mind [...] you can sometimes tell in certain professional situations when someone sort of like edging towards you to ask you a question about it, to kind of go "so err ...?" and kind of dancing around the point. (p.14)

James encounters people he feels cannot move past his impairment (p.9); this is what Garland-Thomson considers the normate's fixation with disability, "reducing the complex person to a single attribute" (1997, p. 12). James juxtaposes this scenario with a frank discussion with a non-disabled director about the relevance of his impairment to his role. He refers to this director as exemplary in his approach to rehearsal, saying, "I always feel comfortable in the room with him, I always feel brave in the room with him, I feel uninhibited" (James, p.3). He implies others' ease around impairment directly impacts his wellbeing in theatre, his comfort, confidence, and creative satisfaction.

Goodley et al. recognise disabled people "find themselves caught up in interactions with non-disabled people" in which "well known social scripts" permit "the asking of inappropriate, demeaning and highly personalised questions" (2018, p. 208). They ask, "How are disabled people [...] meant to respond emotionally to these questions?", highlighting the common response is "accommodating non-disabled people, perhaps offering a smile, a short answer and a response that will not make the non-disabled person even more uncomfortable" (ibid., p.207). In terms of this response impacting personal wellbeing, Lydia notes, "I spend so long trying to make a new director feel comfortable about working with me that actually I haven't raised issues that are making me feel uncomfortable" (p. 35).

In a similar way, Neil appears to prioritise non-disabled people's comfort over his own needs. Rather than challenging directors, his stories focus on interpersonal skill in building rapport in theatre. Describing auditioning for one director, he recalls, "I'm just a normal bloke, but he said, 'I haven't got a lot of experience of working with disabled actors'. I get a lot of that" (p.16). Neil is alert to his skill in dealing with this, explaining, "when people meet me, they are always a little bit worried about not understanding me, like I'm very good at relaxing people, I have my own strategy I suppose" (p.17). He describes humour easing discomfort, meeting directors "and just have a laugh" (Neil, p.1). Galloway et al. also recognise "difficult changes in practice" are often made with "a strong dose of humour", which lifts "that burdensome expectation of perfection off everyone's shoulders" (2007, p. 230). The effectiveness of this strategy for Neil is implied in his remark, "one day in rehearsal with [the director] and I'm just a normal pain in the arse actor who can't remember their lines" (p.17). Even in hostile environments, Neil feels able to influence change; in one theatre, he recalls, "I knew (*laughs*) they were only doing it because the Arts Council had told them to, but once you get in there you can begin to make a real impact" (Neil, p.10). There are also elements of compromised wellbeing in Neil's humour and patience, a period in which he feels treated differently from others. This appears to be the most intense period of what Goodley et al. refer to as "complex management of feeling and the relational politics inherent to responding in the right ways", requiring "skilled emotional labour" (2018,

p. 207); Hochschild introduced the concept of emotional labour as an extension to the physical and mental labour performed in the scope of workplace duties (1983). This reality of what is required of these actors in navigating auditions and rehearsals seems to be accepted by them as standard practice.

Value and contribution: handling power dynamics

Actor-participants point to factors of value and contribution as influencing their well-being; how they feel their opinions are valued by people they work with, and how they are regarded as collaborators in theatre. Galloway et al. state, “at its core an ethic of accommodation means that the majority does not rule” (2007, p. 229). However, if non-disabled people are in a position traditionally viewed as having authority in the creative process, there is potential for conflict when disabled people feel they must lead on disability matters. Moira recalls raising a problem she foresaw in rehearsals, saying, “I would flag this to the director and um get yelled at [. . .] ‘we got it under control, this isn’t your job’” (p.26). She was challenging approaches to audience accessibility and conveys frustration with her advice not being heeded. Her comments add another layer of complexity to her sense of battling in theatre echoed by Sophie, who shares similar frustrations with power structures and being blamed for non-disabled directors’ failings. Detailing her challenge to representation issues, she describes “a conversation that didn’t resolve itself” (p.14), saying:

instead of having his arm in a sling because I took issue with it, he had a birth mark put on his face. Now I spoke to an audience member who has a birth mark she covers up every day, and she said “I was really disappointed [. . .] to find out that it was make up” [. . .] it’s a lack of awareness and a lack of thought that normally trips people up. (Sophie, p.14)

It appears Sophie foresaw the possibility of a negative response from the audience, which perhaps the director did not. Moreover, there is a sense of failing an obligation to the disabled community; both Sophie and Moira imply an assumed expectation that they can sway creative decisions, which is not always a reality.

Galloway et al. describe an ethic of accommodation where “listening does not have to happen with the ears. Listening, here, means being taken into consideration, being attended to” (2007, p. 229). In the cases of Sophie and Moira, it seems unlikely their views on access or representation went unheard, but instead their contributions were not given proper consideration or value, causing dissatisfaction with creative outcomes for them. de Senna et al.’s chapter, “*Nothing About Us Without Us: Collaborations between Disabled and Non-Disabled Practitioners*,” expands on how such practice places collaborators on “equal footing” (2016, p. 223). This is not reflected in the practice actors describe here. Pete explains, “even in a situation [. . .] geared up to working with Deaf and disabled performers, you know you still feel sometimes you’re [. . .] a second-class citizen. It really depends on who you are working with” (p.4).

Pete’s interpretation of power dynamics in theatre extends beyond job title and status. He recognises this as determined by how individuals perceive disabled people ranking in society, explaining:

it’s being treated like you’ve got some sort of contribution [. . .] if the power balance is affected by the fact that the director has a passive view of disabled people, that they are

generally passive consumers, useless eaters as Hitler so pleasantly put it, then that's gonna affect how they work with you. (Pete, p.34)

His quotation of “useless eaters” seems particularly powerful in expressing the extent to which Pete feels his contribution can be disregarded, even as an established actor (p.34). He implies still encountering age-old assumptions of disabled people as a “burden”, “incapable of participating fully in community life” in theatre settings (Barnes, 1992). Although challenges to recognition are shared across all actors, Band et al. note that “issues of value and (inclusive) philosophy, [. . .] excellence and likelihood of employment [. . .] are compounded for actors with disabilities” (2011, p. 893). Disabled people’s authority is commonly diminished by “assumed authority” granted through power inequities (Bolt, 2014, p. 9). Bolt acknowledges assumed authority is “so widespread in its diminishment of agency that it even extends to the workplace” (2021, p. xvi). Actors’ responses highlight the scope for further work to consider how authority, agency, and the valued contribution of disabled people are shifting in theatre workplace settings.

Discussion and implications

Navigating inexperience of disability in theatre practice through challenge, dealing with discomfort, and power dynamics has become an implicit but ever-present part of these actors’ job descriptions. Learning about best practice and creative outcomes across disabled and non-disabled communities is clearly still required, a gap they attempt to fill. Actor-participants’ diverse approaches to challenging access logistics, representation, and language highlight the difficulties faced and adjustments made when disability knowledge or experience is lacking. Interpersonal approaches to supporting others’ learning can confuse roles and responsibilities, risking conflict, and compromising actors’ sense of value and creative contribution. Actor Bruce Alexandra believes all actors need “a good, safe environment where they feel free to take creative risks” (as cited in BBC Academy, 2016). Yet, it appears theatre environments can feel far from safe or relaxed for these actors; the task of relieving discomfort, easing communication, and building rapport with those lacking disability experience is an ongoing concern.

Key factors of Galloway et al.’s manifesto for including everyone in theatre have been drawn on in interpreting IPA findings here. These highlight how aspects of an ethic of accommodation are reflected in theatre workplaces, including “the majority does not rule”; “the majority making difficult changes in its practices and environments”; “a politics of listening as well as a politics of speaking”; and “letting go of preconceived notions of perfectibility and negotiating complex sets of needs” (2007, p. 229). Actors are pushing for this ethic in their interpersonal engagement in theatre. Insufficiencies in this ethic are also pointed to, as are the implications of this for disabled people. As such, if the requirements of promoting a mutual ethic of accommodation in theatre are set out based on participants’ experiences here, it may mean being empathetic – considering difficulty others might experience in making changes to practices and environments, explaining disability whilst understanding the implications of personal disorientation and learning processes; battling to be heard – being confident to speak out about errors, whilst risking not being listened to and opinions not being given proper consideration; remaining alert and sensitive to a complex set of needs – weighing when to speak and when silence, humour, or patience might

minimise discomfort or offence for others; having the resilience to let go of perfectibility – moving on from personal errors and humiliations, looking to uphold obligations to the disabled community, and stepping into settings that may compromise personal comfort and creative satisfaction. The consequences of insufficiencies highlighted by the actors here extend beyond personal wellbeing. They shape identities, perceptions of authenticity, aesthetic production, workplace cultures, and environments that determine whether disabled people engage in theatre or not. Although outside the scope of this article, these additional factors of actors' lived experiences of theatre are important to examine in future work.

For individuals working across arts and health contexts, it is perhaps easy to look at experiences of disability in industry settings at some distance. Perhaps it is assumed that equal collaboration, accessibility, and sensitivity towards the needs of the communities we work with are more deeply entwined in our motivations, research, and practice than for professionals in major theatres. They may well be. Still, in his instruction that “arts and health should not be confused with arts and disability” Naughton, a leader in Disability Arts, also values intersection; he believes “arts and disability [is. . .] a sector that, when required, can support more inclusive ways of working in arts and health projects for both practitioners and participants” (2021). Phenomenological perspectives are crucial in this; the stories of actors in this study are relevant to those working across sectors of arts, health, and disability, helping us move towards disability experience in some way.

Despite difficulties, actor-participants do point to positive interpersonal engagement that preserves their wellbeing; they value non-disabled theatre practitioners who are willing to listen and learn, are comfortable discussing disability and impairment, and, like them, proactively drive change forwards. Actors' responses support calls for a redefining of accessibility beyond logistics, and for greater appreciation of disabled people's contribution to theatre and training. As in Mingus' article on the notion of “access intimacy”, actors here value “that elusive, hard to describe feeling when someone else ‘gets’ your access needs” (2017); a definition of accessibility that involves factors of comfort, safety, communication, and connection. In the findings shared in this article and in Mingus' writing it is recognised that this is, “not easy to build” (ibid.). For non-disabled people, this not only raises questions of “how am I building accessibility and valuing disabled people's contribution in my practice”, but also “what are disabled people having to do to accommodate my inexperience of disability and how can I ease the weight of that”.

Arts and health researchers have already identified key emotional skills necessary in negotiating challenging workplace settings. Sextou et al. argue that intrapersonal and emotional skills relating to empathy, patience, sensitivity, and resilience are important in responding to impairment and illness encountered in the day-to-day practice of artists working in healthcare settings and contexts (2020). They propose that:

emotional and social awareness, empathy, reflective listening, congruency and emotional resilience are important skills to include in the future training of artists in health care [. . .] that artists need to take responsibility for the safety of the audience, themselves and the environment through emotional awareness and processing. (ibid., p.101)

Findings from actors in the IPA study suggest similar responses are important when navigating inexperience of disability in theatre. As such, space for disabled and non-disabled people to develop intrapersonal and emotional skills required in responding to disability, impairment or illness is beneficial across broader theatre

training. Likewise, with one in four people in the UK reporting as “disabled”, the assumption that artists in healthcare will encounter disability, impairment, or illness must be reflected across all workplace settings (Department of Work and Pensions, 2020).

However, easing a weight on disabled people to accommodate those lacking disability experience or redefining accessibility in a way that values their contribution to theatre requires learning at multiple levels. Sharing responsibility for change requires a proactive approach to learning from disability, not just protecting individuals from discomfort and disorientation but embracing it (Parrey, 2016). Bolt and Penketh observed how “critical avoidance” of disability in the academy is common, even in work crossing arts, health, and disability (2016, p. 7); IPA findings here support their view of necessity to “make more explicit the interdisciplinary significance of disability studies – and, by extension, disability theory, activism, experience, and culture” (ibid.). Knowledge that is the bedrock of disability studies is still being discovered in theatre, yet is crucial for making sense of attitudes, structures, and environments experienced in theatre workplaces and contexts, including our own. Interdisciplinary engagement with disability studies is vital in opening communication around disability matters, promoting familiarity with appropriate approaches to access, representation, and language in training across sectors (Worthington, 2025). If we value wellbeing, good practice, and creative outcomes in working with disabled people, we must make space to consider our personal disability views; to make sense of and respond to our own experiences of disability with new encounters, awareness, knowledge, learning, practice, relationships, and responsibility for change.

Conclusion

Navigating inexperience of disability in theatre is both a shared and personal endeavour. A mutual ethic of accommodation requires empathy, confidence, sensitivity, and resilience, sharing a weight of responsibility for change equally across disabled and non-disabled communities and sectors. Disabled people engaged in theatre are constantly adapting to make allowances for others' lack of understanding. In this way, supporting disabled people's wellbeing in theatre practice requires individuals across sectors to question their position in an intrapersonal and interpersonal process of engagement with disability (Worthington, 2021, p. 257; 2025). That is, to consider the notes and the tune, their understandings of disability *and* how they embed disability understandings in their practice, to refuse an “inheritance” of distance from disability and choose to share responsibility for change (Ahmed, 2007, p. 155). This balanced and proactive response to inexperience of disability is necessary if the wellbeing, comfort, safety, satisfaction, and contribution of disabled people is to be genuinely valued in any creative setting.

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