Yearning to learn:

A pandemic-inspired approach to grief literacy

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Letter to a future reader

Dear fellow squishy human[1],

      Well, the last few years were something, weren't they? Global pandemic, myriad responses to the virus and subsequent restrictions – including an interesting interpretation of the word 'freedom' - and then, when our faith in humanity seemed at its lowest, Russia invaded Ukraine. As I write this, there is talk of the probable necessity of monkeypox vaccination. The world feels like new territory on many levels.

      In personal terms, March 2020 marked the beginning of a different world for me within an educational setting. I was teaching at a rural high school in Manitoba, about 90 minutes north of Winnipeg, and had a field trip scheduled with my Global Issues class to the Museum of Human Rights. An avid CBC viewer, I tracked reports of the COVID-19 virus and decided the morning we were due to go to cancel the trip. The next day we were in PPE. I don't always pull off this kind of leadership win, but this one seemed instinctively the right call. The students were not impressed, until the next day, of course, when I looked like a BOSS. What followed were several semesters of online and what was described as hybrid learning, with some forays back into classrooms. We showed up, we followed protocols, and we learned to speak a new dialect.

      Fast forward to today and hitherto selectively used terms such as unprecedented times, quarantine, and N95 have become commonplace. But one missing from that list that does need to become more readily spoken outside of the circles within which I dwell is grief. As I write this, and if I am correct in my anticipation of the impact, as you read this, arguably everyone on the planet is grieving: the loss of someone, the loss of something, the anticipation that nothing will ever be the same, the disillusionment that things are indeed the

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[1] I use the term 'squishy human' to refer to myself and invite others to do so, too. It helps me better understand and frame the fragility of 21st-century life and the need to be gentle as we move forward; it seems to resonate well with clients and the students (especially the adult ones).

same. Odds are greatly in my favour that I'd win that argument. If you need convincing, this dissertation might be just the thing to tip you over to my side.

      As it is wont to do, life marches on, and I find being a squishy human is a daily challenge. I now live in another province, doing another job, trying to find the space, time, and wherewithal to put this thing together. So here it is. Because there's always a story; and,

I invite you into mine.

The first 'ask' on this journey is for you to view my digital story. Please visit this link to begin: [Better in than out](#)

With love,

A researcher doing fieldwork during a global pandemic

Acknowledgements

We do not live or write or dream or die in a vacuum. To share that I am grateful is the biggest understatement I know how to make. To:

Pauline Sameshima: *We took a walk that has never ended. Thank you for taking a chance on a drama teacher with a death problem.*

Kathy Kortes-Miller: *While we share a lack of fear of death, you have taught me the invaluable lesson of not fearing living. For that, and for so much else, I will be forever thankful that you answered the knock on your office door.*

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Jessica Msofe, PhD: *Your commitment to lifelong scholarship also motivates me to work, to learn, to be angry with the injustices of this jagged world, and to recognise that I need to do something with it all beyond "feeling all the feels"* (Phoebe the Sloth, 2021).

My parents: *My mother, to whom I am indebted for life and for re-life after my divorce: I literally could not have done it without you; to my father, who died in 2018, you will know from some other parallel universe that I finally finished this thing!*

Chris: *You were right - it's going to be okay.*

The bereaved, near and far: *It's going to be okay. It's going to be awful, too, but it's going to be okay.*

My dogs, Remi (2008-2022), Frank, and Jahni: *For reminding me that the out of doors is a sacred place where many academic obstacles are thought out; but, most of all for showing me that pure, unadulterated joy is in the being and not in the doing.*

Abstract

The COVID-19 global pandemic exacerbated and altered death- and non-death-related loss, insisting that grief and bereavement adhere to protocols that were unfamiliar and sometimes even prohibitive to moving forward in a healthy manner. As a dying, death, and loss educator who explores grief using applied theatre methods with children and adolescents, I responded to this recommendation by contemplating safe and novel ways to provide acute support within these new and uncertain parameters. To meet the long-term needs of the bereaved, development of grief literacy was recommended (Breen et al., 2022).

When my beloved uncle Chris died unexpectedly on May 17th, 2020, I grappled to negotiate my own pandemic-restricted grief. This caused me personal and professional angst: if I, with the appropriate tools and strategies at hand, was struggling, how was I ever going to be capable of holding space for others? I yearned to learn how to grieve in this new realm to subsequently hold space for others and enrolled in an online workshop to learn about digital storytelling.

This autoethnographic study examined my own pandemic-restricted grief experience through the digital storytelling workshop's process and product (digital story) as well ascertaining its applicability in my applied theatre praxis within dying, death, and loss education. Findings revealed that digital storytelling as an applied theatre method is potentially both a stand-alone and integral component of an applied theatre praxis to develop and/or enhance grief literacy rates. The findings also suggested ways to implement sustainable death education programs using applied theatre methods that respond to the immediacy of the needs of the bereaved in post-pandemic spaces.

Overall, this study contributes to the substantial body of research around the need for dying, death, and loss education programs. It adds to the burgeoning area of research around

grief literacy, specifically its necessity in a post-pandemic world and innovative ways in which to develop and enhance it.

Keywords: *grief literacy; COVID-19 pandemic; digital storytelling; applied theatre praxis; transformative learning; autoethnography; autoethnodrama*

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Chapter 1: Introduction

Introduction

This dissertation involves an exploration of a pandemic-restricted grief experience. It also seeks to ascertain the possibilities and limitations of using the skills and tools acquired during that experience in a theatre praxis in dying, death, and loss education. The COVID-19 global pandemic insisted, on myriad levels, that grief and bereavement practices be conducted in different ways, or halted all together, and navigating this new terrain was challenging as a professional. However, the unanticipated death of my uncle in May of 2020 created a personal conundrum for me: If I, as a dying, death, and loss educator, was struggling to navigate these new, restricted spaces of grief and bereavement, what would that look like for someone without this academic and professional background? This reinforced the vital need for widespread grief literacy rates to be developed and enhanced. The goal of this research was to explore digital storytelling within a framework of dying, death, and loss education to enhance levels of grief literacy. The objectives were: 1) to understand what was learned during the experience of digital storytelling as a bereavement practice; and, 2) to appreciate the possibilities and limitations of using digital storytelling as a component in a theatre praxis of dying, death, and loss education to enhance grief literacy. This chapter begins with this introductory paragraph, followed by a section each regarding the positionality of the researcher, the research problem, the rationale for the study and goal, objectives, and research questions, the scope of the study, the significance of the study, and the structure of the dissertation.

Positionality

I identify as White, female, Lesbian, slightly dyspraxic, and a creature of whimsy.

You may not identify as, or even with, any of those things, but we share a commonality: we are both going to die. And while I wish us both long and fruitful existences, the reality is that you and I one day, at least in a corporal sense, will cease to be.

If you are still reading this, I want you to take a moment and consider your reaction to the above. How does being reminded about your mortality sit with you? Comfortably? Angularly, with sharp corners? With a dollop of utter dread? Would you classify yourself, if pressed, as death-anxious? Death-aware? Death-accepting?

Imagine that a child has wandered into the room and has asked you if they are going to die one day – how do you feel now? What do you do?

In my limited time as a dying, death, and loss educator, in one form or another, I have been frequently asked by adults, teachers among them: how do I talk to kids about dying, death, and loss? And when it involves a fearful child, a worried child, a bereaved child, or even a curious child, the initial query is almost always followed by two others: *What if I say the wrong thing?*

What if I make it worse?

The simple response to these questions is that the only way we can make it worse for a child who is wanting to know more about dying and death, or one who is grieving, is by saying nothing at all (Kortes-Miller, 2018). Certainly, there are some responses that aren't as useful as others, such as using euphemisms or platitudes, or injecting faith into a secular situation, but for the most part active listening and honest, frank conversation goes a long way.

As an educator, actor, director, poet, playwright, and amateur puppeteer, my doctoral work and research pursuits have focused on using applied theatre to help affect change, particularly in health care environments and educational settings. My background in education has trained me to be action-orientated; theory is wonderful, but what can I do with what's been said? In other words, how do I apply this? Another component of my almost

three decades-long experience in myriad educational settings has reinforced the vital need for fostering relationships. Phoebe the Sloth, my charming orange puppet, and I have been an applied theatrical team for almost a decade, in both educational and healthcare spaces. While formally trained in many theatrical skills, puppetry is not one of them; nor am I a

ventriloquist. This caused me great concern when I first began to use Phoebe in educational settings. But, my ex-wife, often a voice of realism in my life, astutely pointed out that when Phoebe and I are together NO ONE is looking at ME. As Phoebe wraps tightly around me and is manipulated with ease by my right hand, she and I, in a sense, become one. This has meant that I am able to almost remove myself from the interaction, leaving Phoebe to solely engage. As such, as an educator but not a puppeteer, I hoped that she would become a teaching tool in the work that I do with children. What I did not know was that Phoebe would become so much more – she truly is a being unto herself, I think, due to the distancing I am afforded – and how popular she would be with humans of all ages. Phoebe becomes an instant source of friendship, in whatever form, in the interaction and I am very privileged to experience the trust people have in her. As such, she potentially offers a haven in any port. Together, we become a source of support amid the tender, difficult moments that we share at the bedside of a dying child or as we hold space for the bereaved. The use of theatre is a natural choice for me as an arts educator with specialist training in theatre, and my career to date has been predominantly in this area. But there are myriad reasons why it is applied theatre that is an appropriate, and often ideal, choice for exploring issues of death.

The moniker 'arts educator' can be construed in many ways, but for me an arts educator is a hybrid of the terms "art" and "education"; I situate myself as both educator and artist, the former in K-12 classrooms and myriad other settings in which learning occurs, the latter as a practitioner of theatre.

However, for the sake of this discussion it is understood that as an arts educator I do not solely engage in the teaching of the *art* of theatre, but explore methods of teaching *through* it, so that learning objectives for both subjects are met. For example, the Royal Conservatory of Music implemented a program called Learning Through the Arts (https://www.rcmusic.com/learning/learning-through-the-arts) in which I was assigned to a school and worked within a classroom for four sessions, bringing to life a part of the required Ontario curriculum through the medium of theatre. In these instances, the pupils were educated about both the components of the curricular area as well as the drama principles and techniques necessary to execute them effectively. In addition, work in conjunction with a

social worker from the Children's Centre of Thunder Bay and the Lakehead Public School Board meant that I participated for several years in a program called Circle of Wellness (http://www.childrenscentre.ca/cctbf/index.php/about/programs-and-initiatives). This program, targeted at grade five pupils, was created by a newly retired elementary school principal concerned by the increasing numbers of children in her care experiencing mental health challenges. Process - and not performance - driven, these applied theatre workshops took place over the course of several weeks and culminated in a group celebration with participating schools during Mental Health Week - annually, in the month of May. Akin to the work of Sextou (2011), where theatre is used as a tool in healthcare settings, here the pupils explored issues surrounding mental wellness through, in my case, the application of theatre methods – games and exercises – and I relied on my counterpart with her background in social work when I needed specific support regarding issues of mental wellness. This tandem approach was appropriate as I navigated the pupils and myself through the exercises I had devised for us. The classroom teacher also played a vital role as they had prior knowledge of the children as individuals and could provide support to the pupils and to we professional 'guests' as well.

While the Learning through the Arts programme was well received and viewed as a positive experience for the schools, Circle of Wellness brought another aspect of lifelong learning, especially in areas of potential adversity, to the foreground: what applied theatre practitioner Rohd (1998) called vital hope. It is my belief that the combination of the motivational force behind Circle of Wellness and its interdisciplinary practitioner approach created a synergy that was conducive to a transformative and enthralling experience for all, myself included.

Both programs on hiatus, my life as an arts educator turned onto another path as I embarked on a doctoral degree in education; accordingly, I am also a researcher, but this title on its own feels too restrictive. What is a more appropriate fit is what Fine (1994) calls a hyphenated identity– I name myself an arts-educator-researcher. If I view this as an all-encompassing tag, I am afforded opportunities to continue my teaching but within a new

framework as a reflective practitioner researcher (Taylor, 1996); it is also means that I can now embrace theatre methods through what is called applied praxis instead of the more confining practice, as praxis is inclusive of both the theoretical and the practical (Taylor, 2000). Finally, it positions me to explore a potential death education programme praxis. The following is an academic meander along paths I felt might be appropriate to follow to bring death education, in whatever package, to elementary school-aged children. **The research problem**

Context of the research problem

In the spring of 2020, COVID-19 restrictions created novel, for this century, parameters around dying, death, and loss, disrupting our usual experiences of grief (Wallace et al., 2020). As a scholar, moving into the research study phase of my doctoral studies, I faced a pandemic-inspired conundrum: How do I proceed with a study in which participants would have to be socially distanced or, more concerningly, not even physically present? This

resource brought to my attention the myriad ways research might potentially be malleable. I immediately dived into a project in tandem with a representative of Hospice Northwest (hospicenorthwest.ca), using digital/virtual methods to support young people with the myriad forms of grief that pandemic conditions can bring about, where I was able to use Phoebe the Sloth to offer answers to their pandemic-related questions (Appendix A).

Research problem statement

The bereaved have come to an understanding in their collective experience that spaces of grief and bereavement have associated tools such as rituals, rites, and practices that accompany the mourner on a new trajectory after the loss. These associated tools are understood to be of benefit in the short and longer terms and, while they share some commonality, are unique, as is the grief itself, to the individual. However, with the onset of pandemic-restricted grief and bereavement due to the COVID-19 virus, these associated tools became difficult and, in some cases, verboten. This shift acknowledges the importance of the fluidity and flexibility necessary when navigating experiences of grief and

bereavement, all the while reinforcing the belief that they are unique to the individual. It also contributes to the understanding of the pedagogical elements involved in the ways in which we can learn to grieve, and how we impart those learned knowledges to others. In other words, novel contexts of grief and bereavement demand novel approaches to healthy grieving. Justification of the research problem

As mentioned, COVID-19 insisted that grief and bereavement adhere to protocols that are unfamiliar and even sometimes are prohibitive to moving forward in a healthy manner. These rites and rituals surrounding grief represent opportunities for those left behind to share stories about the deceased, familiar and new and to acknowledge in a public way the significance of the loss. This and other pandemics have much to teach us about how we grieve and the need to find ways in which we might safely do so (Mayland & Preston, 2020;

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Wallace et al., 2020). This led me to re-examine through this lens potential consequences if grief is not afforded such spaces, e.g., disenfranchised grief (Doka, 1989), ambiguous loss (Boss, 2004), and cumulative loss (Harris, 2019). And while I was busily exploring all of this from a (somewhat) distanced researcher/practitioner perspective, my beloved uncle Chris died unexpectedly on May 17th, 2020, and I, too, became someone for whom I needed to contemplate safe and healthy ways to grieve within these new and uncertain parameters. I knew that I needed to grieve, yearned to learn how to do so in a space where the usual practices were not available, and was curious about the practical ways in which to impart any learning I garnered in my praxis of dying, death, and loss education.

Rationale

I use a well-worn analogy with adult clients to help reinforce the importance of understanding their own relationships with dying, death, and loss before they support the children and adolescents in their lives. The analogy repeats the directive given on flights by the flight attendant before take-off: In the unlikely event of a loss of cabin pressure, a mask will descend from above you; please put the mask securely on yourself before helping others. I could hear my voice in my head, the times that I have shared with clients. And I did what I have done countless times in my career in education: I decided I would have to try to fill this gap myself through some form of self-study project. This educator was going back to

class; more specifically, it led me to apply for a MITACS Research Training Award (herein MITACS RTA)[2]. For the purposes of clarity, the MITACS RTA is briefly explained in the following section and elaborated upon in Chapter Three.

MITACS RTA

The purpose of the MITACS RTA was to develop a working knowledge and basic skill set regarding digital storytelling as both a grief and bereavement tool and research

method. The project also provided an opportunity for me to actively grieve and determine to what extent I embarked upon, if at all, healthy grief experiences as a result. Because of my struggle, even with access to proposed effective strategies, I wanted to engage in studying myself, asking specifically this research question: What is revealed about grief as a human experience through digital storytelling during pandemic-restricted bereavement?

In terms of data collection for the MITACS RTA, I kept a reflexive journal (Appendix C) that constitutes the raw data, or process, of the study, always aware of my overarching goal of ascertaining the transferability of this exercise in these unprecedented bereavement terms so as to better support future research participants and/or students. The other two components of the dataset are: the script, another process component, of the digital story (Appendix D) and the workshop's product – finished digital story, entitled *Better In Than Out*, was the story viewed at the outset of this dissertation.

Research goal

Breen et al. (2022) strongly recommended the development and enhancement of grief literacy during the COVID-19 pandemic. This dissertation responds to this clarion call by personally exploring safe and novel applied theatre methods to produce facilitative educational experiences for children and adolescents. The goal of this qualitative research study was to explore a framework for dying, death, and loss curricula through digital

storytelling to enhance levels of grief literacy.

<u>Research questions</u>

This dissertation aims to: demonstrate how the processes and products of digital storytelling align with healthy grieving within pandemic-restricted spaces; develop a pedagogical framework for educators to use in their own practices with children and adolescents; and, explore the potential contribution of a digital storytelling framework within

an applied theatre praxis to enhance grief literacy. The following research questions were used in this study:

1. What can be learned about grief as a human experience through digital storytelling during pandemic-restricted bereavement? and,

2. What should an applied theatre praxis about dying, death, and loss curriculum contain?

Transformative framework

In *Oppression of the bereaved: A critical analysis of grief in Western society*, Harris (2009) concludes that the social rules and expectations of the bereaved "are grounded in values that are economically-based, and not humanistically-oriented" (p. 251). As a result, the bereaved are often marginalised or stigmatised as social rules may oppress instead of support bereaved individuals (2009). Harris sees the empowerment of bereaved clients in these subjective grief experiences as "crucial to her work" in clinical practice, to combat these barriers to healthy grief that are "not accidental and thus avoidable" (p. 243).

The COVID-19 pandemic created barriers for the bereaved that were, on the contrary, accidental, and thus not avoidable, but nonetheless oppressive. Protocols enforced by the pandemic directly and indirectly contributed to the oppression of many individual and collective expressions within bereavement. As a result, these practices usually associated with grief were transformed by these pandemic restrictions; what was subsequently needed was for the bereaved to embark on transformative practices to challenge these barriers and move forward with their grief within these parameters.

I considered the work of Jack Mezirow (1975), specifically his transformative learning theory, because it involves a transformation of perspective, going through ten ordered phases. I compared my predicament with oppressed grief and the ten phases, to

ascertain if a transformative learning experience was an appropriate framework.

Table 1 Transformative learning theory (Cranton, 2006, p. 20)

Mezirow (1975)	*Me (2020-2023)*
Experiencing a disorienting dilemma	*The death of my uncle during the global pandemic*
Undergoing self-examination	*Agonising over the nature and circumstances of the death; self-reflective / self-critical of inability to find ways to move forward with my grief*
Conducting a critical assessment of internalised assumptions and feeling a sense of alienation from traditional social expectations	*Grappling with why navigation was fraught with confusion; knew I had to grieve, just didn't know how to do so – usual rites/rituals not available/unsuited to task*
Relating discontent to the similar experiences of others – recognising that the problem is shared	*Grief work (volunteer)/ grief education suggests many others are experiencing the same frustrations, etc.*
Exploring options for new ways of acting	*Application for a MITACS Research Training Award (2020) to learn a new tool to with which to potentially explore grief*
Building competence and self-confidence in new roles	*Attended the six-week Digital Storytelling workshop at* The Story Center
Planning a course of action	*Proposed to Dr. Sameshima that the MITACS experience become the focus of my dissertation (2021)*
Acquiring the knowledge and skills for implementing a new course of action	*Dissertation / making connections to positionality/professionality*
Trying out new roles and assessing them	*Reflective practice with Dr. Kortes-Miller within research study (2020) and within my own practice as a grief support worker (Hospice Georgian Triangle 2021-2022)*

Reintegrating into society with the other perspective	*Dissemination of study with Dr. Kortes-Miller at symposium (2021); at conferences (Hospice Palliative Care of Ontario (2020; 2021); World Federation of Right to Die Societies (2022); 11th International Digital Storytelling Conference (June 2023)*

Transformative learning theory has two components: instrumental and communicative (Mezirow, 1975; 1978). The former, instrumental learning, focuses on task-orientated problem solving and evaluation of cause and effect. Referencing the above table, the problem needing to be addressed was my inability to process my acute grief (Phase One) and the evaluation of cause and effect involved the subsequent phases. The latter, communicative learning, focuses on how people communicate their feelings, needs, and desires, as demonstrated by the processes and products of the MITACS study and their subsequent dissemination at symposia and conferences.

Mezirow (1994) refined his initial thinking to arrive at what he describes as the heart of transformative learning: the realisation that what we believe is not necessarily making sense anymore, or no longer serves its purpose. My yearning to learn how to grieve in an unfamiliar realm reflected that paradigm shift; as an adult using grief tools from an established portfolio of dying, death, and loss strategies, I sensed that I had to make space for a novel (to me), more contextually appropriate one – namely, digital storytelling. Finally, Mezirow (1994) suggests that this transformation of perspective promotes psychological, convictional, and behavioural transformative learning, which bodes well for sustainable practice as a dying, death, and loss educator and bereaved individual.

The basic tenet of the transformative framework is that knowledge is not neutral and that it reflects power and social relationships within society (Merzirow, 1975). If the purpose of knowledge construction is to help people affect positive change (Mertens, 2003), it is nonsensical at best and nefarious at worst to suggest replication of knowledge construction opportunities using oppressor/oppressed binaries. Here, I look to Creswell (2013) and the notion that knowledge construction around dying, death, and loss is most effectively explored in a practical and collaborative manner - "'with' others rather than 'on' or 'to' others" (p. 26).

I have long sought in my applied theatre praxis to implement, facilitate, and ideally afford opportunities for potentially transformative experiences, for myself and the participant(s). I have borne witness to this first-hand, again specifically in my work with Circle of Wellness and more generally in the workshops and classes using the activities of Boal, in the new edition of *Theatre of the Oppressed* (2000), *Games for Actors and Non-Actors* (1992), and *The Rainbow of Desire: The Boal Method of Theatre and Therapy* (1995). Boal (2000) developed the *Theatre of the Oppressed* following the work of the *Pedagogy of the Oppressed* (Freire, 2000) and other theatre practitioners. Both texts are considered counter-cultural as they sought to affect change in their respective systems, education and theatre, by asking two questions: for whom is education? and, for whom is theatre (Zwerling, 2008)? Freire and then Boal used a similar methodology for realising their goal: "the engagement of the oppressed as co-creators of their future through dialogue, empowerment and active involvement" (p. 72). Within this pedagogical framework where the learner is a co-creator, I facilitate theatre spaces in which the actor can become the co-creator of the theatre piece, or spect-actor (Boal, 2000) in an effort to affect positive change in their lives using the tool of applied theatre games and exercises. However, while grief is often expressed interactively and holds shared components or characteristics, it is an experience unique to the individual so Boal's Forum Theatre, for example, would not be appropriate here. As such, this dissertation concentrates on the building blocks of Image Theatre (2000), The Cop in the Head (1995), and Boal's Machine (1992) in order to promote creation of the digital story and subsequent autoethnodramas.

Structure of the Dissertation

In Chapter Two, I explore the human experience of death as universal while reinforcing that this does not preclude comfort with or understanding of dying, death, and loss. This is developed in the subsequent literature review that begins with a look at dying,

death, and loss, in general terms and through a modern, Eurocentric lens, and then moves into dying, death, and loss education, again through the same lens. The link between these two reviews is the rise of death anxiety and responses that ensue, specifically hospice and awareness movements as well as death education ideals. Because I am an educator, the entirety of the chapter explores the literature in terms of its pedagogical status, be it historical, current, or potential. I then situate the discussion in Ontario elementary schools and seek answers to why death education in a curricular sense is not occurring, in whatever

form and to whatever degree. I suggest potential ways of addressing the needs and reinforce the ideal as prophylactic and not simply reactive, setting the tone for curriculum and policy development. Finally, I look specifically at grief, and how the COVID-19 pandemic required shifts in how losses of myriad variety are both experienced and navigated.

Chapter Three affords me the opportunity to explore the relationships between death education and theatre. These explorations occur within a pedagogical framework and serve to reinforce the underpinnings of my praxis to date: that the use of an applied theatre approach is of intrinsic value in dying, death, and loss education. This leads to the methodology and methods for this study, including the research questions and steps involved.

Chapter Four is dedicated to explorations of the data from the MITACS study - the field notes and script (process) and finished digital story (product), using the guiding questions as a launching point and inclusive of pandemic-restricted grief and bereavement reflections. Saldaña (2011) suggests that the digital story is an example of an autoethnodrama; in this vein, my digital story entitled *Better In Than Out* is considered the first autoethnodrama in this study. This chapter contains a second autoethnodrama, a self-devised script, in response to the findings, entitled *(this will work well for grief)*. I chose this title as it is, verbatim, one of my notes from the digital storytelling workshop field notes. This chapter also includes an exegesis of this second autoethnodrama.

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Chapter Five is the concluding chapter, with a discussion of the implications and limitations of the findings and the consideration of the potential of digital storytelling within an applied theatre praxis.

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Chapter 2: Review of the literature

Introduction

This review of literature is divided into two segments; the former section explores dying, death, and loss through a modern, Western lens, with a focus on the general Canadian experience, the response to loss, and the human experience of grief during a global pandemic. It is a deliberate review to attempt to understand how we are situated in the early 21st century in terms of our relationship with dying, death, and loss as it sets the precedent for how we approach learning about these experiences. Following suit, the latter section examines dying, death, and loss education, connections between death education and theatre, a contextual look at why death education is appropriate at the elementary-school level, and a focus on Ontario

elementary schools and why it potentially isn't happening. It also serves to look at the use of applied theatre in areas of grief as a human experience and surveys digital stories and digital storytelling within this realm.

Dying, death, and loss

Modern death through a Eurocentric lens

Death is an inevitable and universal experience, but how a society experiences it is not necessarily a given. In recent years, Canadians have seen a paradigm shift in the processes of dying and death and, as a result, also of grief and bereavement. For the most part, mid-twentieth century Canadians died at home, surrounded by family, and were interred by people in the community, often viewed after death in the home itself (Northcott & Wilson, 2017). Contemporary society sees most Canadians dying in hospital (Northcott & Wilson, 2017), usually after much medical intervention, and interred in less intimate ways (e.g., chain funeral homes). As such, because dying and death are now generally processes that happen at a distance, Canadians are becoming more and more fearful, which appears to often coincide with lifelong existential crises (Seale, 1998) and the embrace of practices of death-denial and

death-defiance as the cultural norm (Kastenbaum, 1981; Northcott & Wilson, 2017). This is reflected through increased rates of death anxiety (DeSpelder & Strickland, 2015), for the public as well as people in healthcare professions where dying and death are prevalent experiences (McClatchy & King, 2015). While it may be reasonable to accept that death anxiety to some degree is a reasonable human experience (for example, the notion that understanding of the finite nature of life promotes living to the full), it does also contribute to higher rates of depression, post-traumatic stress disorder, and suicide (Corr & Corr, 2003), as well as a futile compulsion to while away precious life seeking to stop time. It also takes a toll on those in the so-called professions (healthcare, funeral industry, etc.) of dying, death, and loss (McClatchy & King, 2015). In short, our relationship with modern dying and death, and subsequently loss is, for the most part, fuelled by fear and distance. But, as mentioned, it has not always been this way.

The death shift

So, when did the relationship with death become a disempowered one? British anthropologist Gorer (1955), in his seminal article "The Pornography of Death," offers reasonable arguments for when and why the topic of death became a taboo subject. Gorer suggests a paradigm shift in which prudery (referring to Anglo-Saxon societies) regarding

pornography is replaced by an equally voracious priggishness about death: "whereas copulation has become more and more 'mentionable,' death has become more and more 'unmentionable' as a natural process" (p. 50). He suggests that this could be the result of shifts in religious beliefs and the reduction of what he calls natural deaths due to improved preventative medicine and greater public health measures, stating that what people no longer regularly see they find unseemly to discuss. This gradual shift offers possible explanations for the rise of death anxiety in Western societies, and subsequent strategies that arise to counter it.

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In addition, Reisler (1977) suggested decades ago that the taboos concerning death combined with technological change creates a gap in factual knowledge about death. The nature of technological change that is now rapid and pervasive, as well as taking new platforms and language patterns (Gibbs et al., 2015), reinforces this notion, urgently highlighting a need to address its role in relation to mortality. Put simply, humans fear what is unrecognisable, so they find the ways and means to avoid and/or rebrand experiences; therefore, as death drops off the radar of most people, the chasm continues to grow. The themes of death anxiety and its counterpart, death awareness, surface frequently and provide platforms for much of the scholarship surrounding the need for both formal and informal death education in myriad settings.

Death anxiety

In his book *The Denial of Death* (1973), Becker titled the first chapter "The Terror of Death," exploring myriad social and individual reasons why human beings fear death. Becker (1973) juxtaposed that while the fear of death "must be present behind all normal functioning" (p. 16), it must also be suppressed; otherwise, humans "should be unable to function" (p. 17). In one sense, this repression is a positive thing: "fear means self-preservation" (p. 17) and promotes the continuance of life. In another sense, however, it keeps communication out of the mainstream, creating a highly defensive societal response to an increasingly taboo subject (Kübler-Ross, 1969). Becker's work influenced many authors, including Pyszczynski et al. (2015) who, in *The Worm at the Core*, introduced the Terror Management Theory based on Becker's suggestion that most human actions are undertaken primarily to ignore or evade death.

And therein lies the problem: the need for conversations surrounding death and dying is paramount to affording everyone involved in these processes, from patient to circle of

care, as positive an experience as is possible. The irony is that these discussions should constitute a

very natural part of human existence because of its universal applicability. Gawande (2014) reminds his readers that "death may be the enemy, but it is also the natural order of things" (p. 8), implying it is counterintuitive to ignore. He claims that as a junior doctor he knew these truths abstractly but failed to understand them in a concrete sense. By not affording ourselves these conversations around a subject that runs the gamut from mildly unpleasant to downright verboten, there is the risk of stunting growth in myriad ways. Imara (1975) believed that even in the death and dying processes there is room for development, so it is feasible that this growth process could begin from the outset of life, as dying and death are processes set in motion from the moment of birth – "dying is a precondition of living" (p. 148). And, if anxiety surrounding death and dying is a universal human condition (Becker, 1973), there are two common shared experiences: mortality and fear, to varying degrees, of mortality. While "mortality can be a treacherous subject" (Gawande, 2014, p. 9), there is empowerment to be experienced in openly addressing it. Cue the death educators. **Death awareness**

Pine (1977) contends that early death educators came to death education because of personal and professional interests in death-related fields; demographically, most of these educators were males between the ages of 25 and 40, directly affiliated with universities, and not medical doctors. The reason for death education's multidisciplinary and fragmentary scope at the outset is due to these early educators and their empirical research bases that derived not from the study of death itself but from death-related topics that reflected their scholastic motivations. Among them is Feifel (1959), psychologist, thanatologist, and author of the seminal work *The Meaning of Death*, considered by many to be the first modern death educator (Cupit, 2013; Wass, 2004). Feifel felt that the 'death awareness movement' could be understood to be synonymous with 'death education' and insisted that death education benefits everyone, including children (Wass, 2004). Another was sociologist Eliot, who wrote

in the 1930s about the importance of addressing bereavement and grief, especially within social research (Pine, 1977). Psychiatrist Lindemann, writing a decade later, was one of the first to publish using a case study that explored issues suggested by Eliot; as a result, many

of the theories regarding grief, bereavement, and mourning at the end of the 1970s were believed to have emerged because of Lindemann's original work (Pine, 1977). Of note was his insistence that grief is "a normal and identifiable syndrome" and that grief "has the potential to be resolved" (p. 60). This is of note as later scholars, such as the five-stage model created by Kübler-Ross (1969), prescribed stages or steps of the grief and bereavement experience, which has proved contentious theory (see Doka, 1989; Wass, 2004). It is also of interest as it is now acceptable that while acute grief can realise an end, there is evidence that grief is an ongoing process that changes rather than fully resolves (Rando, 1991). Gebhart, writing in the 1920s, was the first voice of critique of the American funeral industry generally, and funeral directors (Pine, 1977). His book questioned the necessity of funereal practices outside the realm of the home, calling for a return to more cost-effective family-operated death rituals (Pine, 1977). Regardless, the industrialised death industry continues to be a robust feature of American existence, with the 1950s producing several projects dedicated to enhancing the death education of American funeral directors (Pine, 1977).

The pioneers

Wass (2003) identifies the pioneers of death education as stemming from scholarship in the 1960s and 1970s. Seminal authors emerge on the scene, such as Kübler-Ross (1969; 1983), who "brought the study of death out beyond the boundaries of academia and into the realm of health care workers and the lay public" (Doka, 2003, pp. 51-52), as well as Leviton (1972) and Knott (1979) who created specific goals, curriculum design, methods of instruction, and assessment strategies regarding death education in formal school settings

(Wass, 2003). While the impetus for death education seems to be a popular option in these academic circles, it lost its general appeal after this period, and by 1990 less than 10% of elementary schools in the United States incorporated the study of dying, death, and loss into their curricula (Wass, 2003).

The Death Awareness and Modern Hospice Movements

The Death Awareness Movement, a network of individuals, organisations, and groups from myriad sectors, includes scholars and professionals, the not-for-profit organisation for grief, The Compassionate Friends (http://tcfcanada.net/), and professional associations such as the Association for Death Education and Counseling (https://adec.org/Main/ADEC_Main /HomepageContentArea2.aspx) (Doka, 2003). It was this movement, seeing its rise to

popularity in the latter part of the 20th century, that challenged individuals to acknowledge their own mortality with the underlying premise that doing so is essential for a meaningful life (Wass, 2003). Most hospices and palliative care units identify with the mission of the Death Awareness Movement, as would many funeral service organisations (Doka, 2003). Primarily a social movement, it did set the tone for academic publications still very much in circulation today, such as *OMEGA The Journal of Death and Dying*, started in 1970 by Richard Kalish and Robert Kastenbaum, and *Death Education* (now *Death Studies*) created by Hannelore Wass in 1977 (Doka, 2003).

It was during these decades that the Modern Hospice Movement took hold. Under the direction of Dame Cicely Saunders, St. Christopher's Hospice, the first edifice in which the tenets of the hospice approach took place, was created in 1967 (Doka, 2003). The Modern Hospice Movement was felt to be a reaction to several trends: namely, advances in medicine unwaveringly focused on cure seemed to be abandoning those who were no longer responding to treatment; and, hospice resonated with two other prevalent themes – anti-consumerism and a return to nature (Saunders & Kastenbaum, 1997). Hospice, as both a

place and an approach, continues to be a key component of the end-of-life experience for many Canadians (Northcott & Wilson, 2017).

Although the Death Awareness Movement is considered to have had its peak in the 1960s and 1970s, Doka (2003) argues that it is needed today as there is an ageing population becoming a more and more secular society in search of meaning and answers to life's biggest questions. Recently, quests for change in death practices have led to public interest in 'green' burials (http://www.greenburialcanada.ca/), funereal practices that are eco-friendly, and the use of death doulas (https://endoflifedoulaassociation.org/) to assist the dying and the grieving.

Grief as a human experience

Inextricably connected to dying and death is the experience of loss; and, in simplest terms, grief is the response to the loss that occurs. For this dissertation, grief is defined as the unique personal response to loss (Lang & Caplan, 1993). While there is much evidence to suggest that grief can be experienced by all sentient beings (see Finton, 2022; Pierce, 2018; Yeoman, 2018), for the purpose of this dissertation the focus is on grief as a human experience.

Prior to the pandemic, healthy grief was commonly a shared, mutually supportive

experience among family and friends, as well as members of the community (DeSpelder & Strickland, 2015). However, because there were enforced changes, strict isolation to name one, how people died directly affected how people subsequently grieved and the pandemic brought with it increased risks of myriad forms of unhealthy grief.

Other types of grief of note

Along with death-related loss, this study thus includes explorations of types of grief that can be introduced and/or exacerbated as the result of living during a global pandemic.

There are five types of grief of note, in addition to the baseline death-related loss (whether from the virus itself or otherwise):

Table 2 Types of pandemic-related loss

non-death loss	A person can grieve the loss of anything significant to their physical, psychological, spiritual, and interpersonal lives. Throughout a person's life, many non-death losses will occur. Some will feel minor and manageable; other losses, however, may feel devastating and life-altering (see Harris, 2019).
ambiguous loss	Ambiguous loss happens when it is not entirely sure who or what has been lost. It differs from the grief experienced when someone dies as that kind of loss is finite and certain, and it is apparent that pain is a reasonable reaction. Ambiguous loss happens when something or someone profoundly changes or disappears and the feelings can run the gamut between a hope that things will return to normal and a looming sense that the familiarity of life is fading away (see Boss, 2000).
anticipatory grief	Anticipatory grief is grief that occurs before a potential loss. Whenever circumstances lead a person to think that death is a real possibility, they may start to grieve aspects of the loss. Anticipatory grief does not mean that a person will grieve any less; it just may mean they process elements of the loss more slowly

	and/or across pre- and post-loss timelines (see Rando, 1986; 1988).
disenfranchised grief	Disenfranchised grief is when a person feels denied the right to grieve by family, friends, community members, or society in general. When a loss is disenfranchised, it means the grieving person is not getting the support or validation they need; naturally, this means different things to different people. Where one person only needs validation from themselves, another may feel they need the acknowledgement of those closest to them and/or in a wider context. Regardless, the impact of disenfranchised grief is that the

	person experiencing it feels alienated, invalidated, ashamed, weak, etc. (see Doka, 1989).
complicated grief (AKA prolonged grief disorder or PGD)	The term complicated grief is typically applied to those who experience complications with the grieving process that make it difficult to return to the activities of daily living. These complications may include but are not limited to a sense of disbelief regarding the death; anger and bitterness; recurrent, painful emotions at a high intensity; preoccupation with the decedent/manner of the death; and avoidance behaviours (see Jordan et al., 2022; Killikelly & Maercker, 2017; Prigerson et al., 1999; Shear et al., 2005).

Grief as a human experience during a global pandemic

On March 11, 2020, the World Health Organization (WHO) declared a COVID-19 pandemic (Jordan et al., 2022). The pandemic demanded restrictions that markedly altered practices associated with supporting both the dying and the bereaved (Jordan et al., 2022). If a person dies in circumstances that are not only less than ideal but is then grieved in ways that are not

supportive for their care networks (DeSpelder & Strickland, 2015), there is the increased risk for complicated grief (American Psychological Association [APA], 2020 [https://www.apa.org/]). While death-related grief is inherently a part of the pandemic experience (Mayland & Preston, 2020; Wallace et al., 2020), some grief responses are non-death related (e.g., loss of employment, loss of freedom, loss of social supports, etc.), often life-altering, and are not easily discernible as requiring attention (Harris, 2019). When these losses are then exacerbated by a death-related loss, or vice-versa, the usual rites and rituals around dying and death are also either not able to happen or need to occur in novel ways; as a result, the bereaved may face an arduous struggle for healthy grief. In *The New Yorker*, Collins (2020) suggested that people resort to simulacra in these instances – trying to

achieve the original but making do with the copy, to some extent accepting it more readily because of the enforced restrictions surrounding practices.

Personal connections with grief during a global pandemic

As my uncle's ALS progressed, I was living with anticipatory grief (Rando, 1986), knowing the expected trajectory of his disease would comprise the gradual loss of bodily functions and eventual death. However, the unexpected death of my uncle Chris in May of 2020 meant that I faced the enforced pandemic restrictions first hand. His experience in hospital in what quickly became the end of his life was dictated by the protocols firmly in place, inclusive of the policy of one visitor/limited visiting on the ward. When he died in the early hours of the morning after admittance, he was with a healthcare professional, in full PPE. This created a ripple effect of what can be reasonably classified as complicated grief (Harris, 2019; Jordan et al., 2022; Shear et al., 2005), and, if not recognised for its complexities, a form of disenfranchised grief (Doka, 1989). His death also constitutes other forms of disenfranchised grief because there has yet to be a celebration of life or funeral, at which others would potentially lean in to share memories about Chris that are unknown to me, important components of meaning-making and healing processes (Wolfelt, 2003). Individual grief stories merely a drop in the proverbial bucket of what has been coined "a tsunami of grief" (Pearce et al., 2021, p. e046872), it is not surprising that a surge of complicated grief is expected in the wake of the pandemic (Jordan et al., 2022). Failure to meet the bereaved where they are on their grief trajectories sets in motion what the 5th Diagnostic and Statistical Manual of Mental Disorders now labels DSM-5 as Prolonged Grief Disorder (Eisma et al., 2020), symptoms of which are typically elevated when deaths are

unexpected, traditional grief rituals (e.g., being present at the deathbed) are absent (Castle & Phillips, 2003), and social supports are lacking (Lobb et al., 2010). These symptoms are not limited to death-related loss, as the pandemic exacerbated life-related potential stressors such

as unemployment, personal finances, educational experiences, long-term care and residential care supports, and living with the effects, albeit not fatal but life-altering, of the virus itself (Harris, 2019; Jordan et al., 2022). It is not hyperbolic to suggest the need for time- and context-sensitive healthy grief strategies is now.

Dying, death, and loss education

The death education ideal

To ascertain feasible goals, it is useful to look at reasons why and where death education, in its broadest sense, is necessary. As such, the desire to pursue death education gains momentum for two overarching purposes: to prepare healthcare professionals and those in the death-related industries to advance in their field; and, to provide the public with basic knowledge, wisdom, and skills appropriate to deal with death-related problems (Wass, 2003). It is upon the latter group that this dissertation focuses.

From that point, the fundamental goals of death education (Corr & Corr, 2003) can be established. Again, in view of the multidisciplinary and fragmentary state of death education, these goals may be understood as comprising a set but also useful as individually applicable units in varying experiences of dying, death, and loss. Corr and Corr (2003) identify the following five goals of a death education programme, as it seeks to:

1. enrich the personal lives of those to whom it is directed;

2. inform and guide individuals in their transactions with society;

3. prepare individuals for their public roles as citizens [Wass (2003)
   strongly supported this];

4. support individuals in their professional and vocational roles;

5. enhance the ability of individuals to communicate effectively about
   death-related matters. (p. 300)

To these guidelines for a proposed death education exploration, Wass's (1995) suggestion that "death education involves knowing the research, understanding its usefulness, and translating it into educational action" (Cupit, 2013, p. 355) should be acknowledged by both researchers

and educators.

Dying, death, and loss education is also considered most effective if person-centred (Attig, 1992), but it is also contextual (Harris, 2019) and the current, and arguably indefinite (Canadian Grief Alliance, 2022 https://www.canadiangriefalliance.ca/) climate of uncertainty creates a timely and necessary examination of the myriad types of loss. Richardson (2001) suggests that writing is a method of discovery, a way of finding out about oneself and one's world. If grief is a process, not a stage, Richardson shares that what is written about and how it is written about shapes lives, illuminates the bereaved individual in the now and shapes who the bereaved individual will become. And to return to the analogy of putting the mask on oneself first before helping others, it stands to reason that it is not only desirable but essential that one's own grief is understood to then support, guide, accompany, research, etc., the grief experienced by others.

In context

Death education in elementary schools

At the start of the 21st century, death education appears to remain a mainly multidisciplinary and fragmented field. Pine (1977) suggests that "the quality of death education depends upon the educational climate that presently exists" (p. 76); here, it is reasonable to add that the educational climate does not exist in a vacuum and is dependent on many highly influential social, cultural, and political factors. As Kortes-Miller (2019) states, a society invests in what it values. There may not be investment in formal death education for many reasons, namely associated with fear/anxiety, personal or professional disconnects, or even as a direct result of non-existence or sparse curriculum inclusion and subsequent lack of

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teacher preparation. Before they graduate from high school, one child in 20 in the United States will experience the death of a parent (About - Children's Grief Awareness Day). And, for elementary school-aged children, "each death of a parent touches every child who hears of it, triggering fear that a similar fate could befall someone in that child's life" (Stevenson, 1995, p. 97-98).

While death education at the elementary level is a contentious concept worldwide, it nonetheless is implemented in several countries, one at an exemplary level. Teaching about death in Japan was initially implemented by a designated death educator and conveyed through a life-focused lens (Katayama, 2002). Children at a young age embark upon facets of education that include the establishment of healthy identity, learning the value of life,

confronting death, and death figures in the media (Katayama, 2002). This last instance coincides with the rapidly growing exposure of children to death through various forms of media and the even greater need for death education (Engarhos et al., 2013; Moran, n.d.; Schrank, 1972; Talwar, 2011; Wass, 2003). Children, however, appear to be more adept at acceptance of the realities of life, and Japanese children enrolled at the Kansai Gakuin private school in Hyogo not only willingly participated in a summer camp project to kill and prepare chickens for dinner, but highly recommended it to peers, one student claiming that she had gained deep impressions from the programme. It was the students' enthusiasm that kept the program in existence for over a decade. These activities inevitably sparked important conversations about mortality, and hit upon a vital component for success: that the method of teaching about death needs to be an active one. If, as Pallium Canada (2015) bids, the active engagement of pupils responds to Ratner and Song's (2002) insistence that educators consider preparing students for both life and death, surely engagement is best initiated and sustained through active and participatory educative practices, as early as the elementary level (Reisler, 1977).

Death education and theatre

Just as the Japanese curriculum (Katayama, 2002) accentuates the positive in the approach to death education, so, too, did Circle of Wellness (http://www.childrenscentre.ca/cctbf/index.php/about/programs-and-initiatives), promoting an examination of mental wellness and not mental illness. This latter example was understood in two powerful ways: 1) it stressed exploration through theatre of strategies for thriving and not strategies for coping; and, 2) it appeared to reinforce the de-stigmatization of the term 'mental health'. An innovative approach in the United States that is already seeing some positive results, although mainly from within the schools themselves and not in the wider community, is what is termed "a specialized elementary education unit on non-crisis death and dying to explain the basic realities of death in the life cycle" (Edgar & Howard-Hamilton, 1994, p. 38). However, these units are constructed around a pair of teachers: one with a counselling and guidance background and one who is the teacher of a fifth-grade classroom (Edgar & Howard-Hamilton, 1994). This approach bodes well for all participants, as it not only promotes pupil-driven but instructor-guided exploration. It also ensures that examination of complex and emotive themes is done in a safe, inclusive, and supportive space because it is grounded in a manner that the Tragic Events Team is not as it is inclusive of the person to whom the pupils often look for guidance and support: the classroom teacher (Milton, 2004;

Talwar, 2011). In addition, blending death education into the already present mix of curricular subjects taught by the classroom teacher(s) ensures that forays into issues of death are not necessarily seen as add-ons: "Teaching about death should not be as a separate subject but as a natural extension of what is already being taught. It should become an ordinary and everyday part of learning…not, 'We're doing death today!'" (Jackson & Colwell, 2001, p. 322).

While this sentiment rings true in many respects, it does imply that teaching about death should not be "built-up to" (Jackson & Colwell, 2001, p. 322); this is problematic, however, in the early stages of death education implementation as it assumes too much of the classroom teacher as well as their pupils as the disruption to prior learning styles is almost cavernous. However, this ideal is certainly a worthy aspiration, and should be considered a feasible target in long-range planning. It would ultimately also contribute to its becoming less of an 'other' if its title were changed: "Why is it death education? Like, sex education, and driver education? Why does the topic have to have education tacked onto it? This is usually done when something doesn't fit right into the curriculum" (Moran, n.d., p. 12). Again, an ideal, but certainly an interesting query at this point in the implementation process; courses about dying and death at the post-secondary level do not seem to feel the need to add the term 'education' (King-McKenzie, 2011), perhaps indicative of a differing comfort level. It is also to this level of comfort elementary educators can aspire.

Focus

Ontario elementary schools

To date, curriculum instruction pertaining to death remains elusive within Ontario elementary public schools, save few indirect lessons within the Environmental Education and Health and Safety resource guides, as well as within the Social Studies curriculum (Ministry of Education and Training, 2015; 2017; 2018). In addition, children at schools within the separate school board receive compulsory religious education and are instructed about death regarding the death and resurrection of Jesus Christ and the three states of the afterlife: "Heaven, Purgatory, and Hell" (Institute for Catholic Education for the Assembly of Catholic Bishops of Ontario, 2012, p. 108). The only focused and formal death education occurs in reaction to an unexpected or crisis-related death in the school community. And while it is not appropriate to suggest that classes visit poultry slaughterhouses, Kortes-Miller (2014) points

out, "no death education is still death education" (p. 39). This resonates as it hits on something known as the unwritten death curriculum (Doering, 2010; Wass, 2003). It is appropriate, therefore, to identify that death education is occurring in less traditional pedagogical settings, such as on the playground, within the boundaries of religious teachings, through popular culture, and from word-of-mouth interactions (inclusive of what children overhear).

Interestingly, these examples are akin to the sex education curriculum experienced during the 1970s and 1980s in the Ontario elementary public school system, which appeared to have caused more bewilderment and fallaciousness than not. In response to societal advancements and pressures, the Ontario elementary curriculum now includes very progressive and comprehensive sex education expectations inclusive of gender identity and sexual orientation (Ministry of Education and Training, 2015). By contrast, sensibilities about death education have not evolved, for whatever reason, in a similar fashion. If this is the case, does it imply that school-aged children are perhaps also approaching death, including the relationship with their own inevitable demise, in a bewildered and fallacious manner?

So, what is it that can be tangibly achieved using a non-acute death education initiative (as in, not response to a crisis, but the chance to be educated beforehand)? As the current education system in Ontario is strongly focussed on assessment, how might this kind of learning be understood to have any sort of impact? Here a look at Dalrymple (2006) and an applied theatre project with young people in South Africa to understand the wheres and whys of assessment when exploring contentious topics and experiences. Dalrymple, however, reminds that the term 'impact' is not a useful one; impact is something that can only be ascertained at the provincial or national level through surveys (p. 202). Thus, using those guidelines the impact seems immeasurable by the practitioner and/or educator directly involved. To return to language used earlier, perhaps the better term to seek to explore is

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'attitudes' – children's attitudes to dying, death, and loss. While Durlak (2015) suggests that again the impact of death education is inconsistent or not easily ascertained, there is as much positive feedback as there is potentially negative. Durlak's (2015) examination of didactic versus experiential programs implies that the latter have more apparent impact *in situ*. This seems to bode well for an experiential approach through applied theatre, especially in view of the opportunity for participants to "examine and discuss their personal feelings and concerns about death" (p. 245).

Potential reasons death education is not happening

There are many apparent reasons why death education is not happening in Ontario elementary school classrooms. Perhaps most obstructive are the misconceptions still held by many people that children are incapable of fully understanding and processing issues surrounding death, thereby rendering it a counter-productive exercise (Talwar, 2011). Children are often bystanders of death, held at a distance, but come away from these experiences full of questions and even an attempt to respond to them is preferable to not acknowledging their curiosity (Talwar, 2011). At teacher accreditation institutions in Ontario, there is no inclusion of death education in any of the divisions (Talwar, 2011), and this appears to be the case for many teacher-training facilities in the U.S. (Nadworny, 2015). One possible reason for this omission is that because it is not included in the legislated provincial curricula used in Ontario schools, there is neither the requirement nor time for it in teacher-training curricula. However, teachers may encounter on average one or two pupils per academic year who will experience difficulties in coping with the grief process following a death (Postel, 1986), the median higher in some instances (Nadworny, 2015). Ontario and Québec classroom teachers surveyed as to why death education was not addressed in even an ad-hoc manner revealed that as professionals in the field they are not comfortable with implementing death education in their own learning spaces, and responses given suggest they

feel ill-prepared or are struggling with their own issues of death anxiety (Engarhos et al., 2013; Milton, 2004; Nadworny, 2015; Talwar, 2011).

There are also the viewpoints of the people responsible for the child on the periphery of the educational system to consider; some parents and guardians feel that children should be shielded from death experiences (Moran, n.d.), or that these issues are better broached in the home or other non-traditional educational space (Edgar & Howard-Hamilton, 1994). However, there are others who readily admit struggling, whether actively grieving or for other reasons, and welcome support (Brooten & Youngblut, 2017; Engarhos et al., 2013). And death education motivated by the wrong factors is, again, potentially as detrimental as no death education. In 1994, the American Broadcasting Corporation (ABC) program "20/20" aired a lengthy segment on death education and its place in American schools; their reportage revealed ill-prepared or anxiety-ridden teachers doing more harm than good (Morin, n.d.). It is important to remember that while it is inappropriate to assume that all teachers suffer with some form of death anxiety, the survey of teachers in Ontario and Québec revealed "only

53.7% of teachers surveyed felt qualified to discuss death with children" (Engarhos et al., 2013, p. 127). The same survey, however, identified that "77.6% of teachers reported that the best time to have death education is during the elementary school years" (Engarhos et al., 2013, p. 127), placing them in a juxtaposition of identifying the need but feeling inept or unsupported to tackle it.

There are also the practicalities that leave death education off the legislated curriculum. In a system already burdened with the often-complicated task of adequate subject coverage, there is resistance to the implementation of issues that are not seen as traditionally school-orientated. In addition, classroom teachers often assert that their role seems to permeate more and more into other areas of expertise, feeling already stretched to their limits of their own (Nadworny, 2015). Finally, in a death-denying and death-defying society

(Kastenbaum, 1981), one in which there is the assumption that, with enough time and expertise, all problems, including death, can be solved (Sakiyama, 1996), there surely is no real impetus for the implementation of a curricular topic that reinforces its existence and inevitability. Additionally, there is the adage of not thinking about a topic if it is not in immediate range of experience, or feeling it beyond assumed capabilities of sensitivity in ethnically and culturally diverse communities.

The question of why children need to be taught about death is sometimes difficult to explain. The answer can be found primarily because of rapidly developing medical technology. Today most young parents have experienced few, if any deaths (Edgar & Howard-Hamilton, 1994). In simplest terms, "death is a topic that is easy to ignore or postpone" (Talwar, 2011, p. 113), but still children have questions, and they deserve to have them addressed. And while there is a growing movement in this province to initiate a death education model in schools (Dennis, 2009), there remains a darkness through which pupils who are processing death experiences are navigating, mainly unsupported. Surely the energy channelled into defying and denying death could be fuelled into fighting the fear of it instead?

Addressing the needs

Despite challenges to its inclusion, the need for death education remains vital and a school-setting, reinforcing the familiar while exploring the unfamiliar or unknown (Koocher, n.d.), provides a more than viable option where it can occur. In fact, in many instances, it is believed that the school setting is ideal (DeSpelder & Strickland, 2015; Edgar &

Howard-Hamilton, 1994; Katayama, 2002; King-McKenzie, 2011; Milton, 2004; Moran, n.d.; Paul, 2020). Because death is unavoidable and unpredictable, children are not immune to its realities, and to leave their queries unanswered or, worse still, denied a platform, does them a potentially harmful disservice (Attig, 1992; Koocher, n.d.; Reisler, 1977). The bottom

line, according to Schonfeld (1993), Director of the National Center for School Crisis and Bereavement, is that virtually all children will go through some sort of death process, but that does not mean it is automatically a normalising experience that is easily negotiated. The repercussions from a lack of an implemented death education are direct and indirect, and they set a precedent for the development of negative connotations of death from a young age that serve to fuel the often-oppressive anxiety many experience throughout their lifetime (Conte et al., 1982). Chopik (2017) suggests that while fear may dissipate with age, death anxiety is at its peak in the early stages of life. One reason is that people eventually come to terms with mortality and therefore no longer fear it (Kastenbaum, 2002), but is this an experientially acquired state, or could it be introduced and learned in elementary schools? How wonderful if attempts at overcoming death anxiety could take place from the outset of the life experience. Because fear fuels the anticipation of death, this often becomes a barrier to living, and again many of us choose to exist in the shadow of the spectre of mortality; and, as Kastenbaum suggests, with much anticipatory thought, "there is almost no relationship between what people think they think about death and how they really feel when faced with it" (as cited in Schrank, 1972, p. 132). This position creates a ripple effect; if unable to theoretically discuss mortality, what bearing does that have on the ability to practically navigate processes of death? Again, consider the teacher at odds with death education; a reluctance or refusal to enter into dialogues that are death-orientated means that those within their educational circle are conceivably stunted in these areas, too. Arguably, said teacher is within the bounds of the curriculum in choosing not to discuss it but, in rather hyperbolic terms, "a curriculum that fails to address a topic as important as death and dying is in itself dead" (King-McKenzie, 2011, p. 514). Pallium Canada is a national, non-profit organisation that provides education and practical tools and resources in palliative care across Canada" (https://pallium.ca/about/). It agrees with this death education premise; their Compassionate City Charter includes a

Compassionate School initiative for schools of all levels to motivate development of educational communities that have the knowledge, skills, and resources to support members in the areas of dying and death.

But what is hoped is that this initiative moves beyond a sole policy and guideline realm and into a more proactive and prophylactic approach to death education. This would be in keeping with Vaswani and Paul (2021) who suggest a public health approach that would develop death and grief literacy in children through universal age-appropriate curriculum attention at all stages of education, including early years as well as develop and support bereavement-sensitive policies and practices in the social spaces that children inhabit.

Post-event, there exist myriad guidelines and resources for schools after a death within a school community, and in Thunder Bay, the Lakehead Public School Board employs a Tragic Events Team when a student, a student's parent, or staff member dies (Sakiyama, 1996). The Tragic Events Team is a voluntary group constituting educators employed within the school board sent in to help the students and teachers cope with the loss (Sakiyama, 1996). But, while these teams are acting with the best of intentions, they lack the ability to help normalise how children observe and understand death processes because they reinforce passivity until action is apparently required. In addition, they often plug team members into an environment where there is no inherent trustworthiness; many responders are not from the school in crisis and do not have established relationships with the pupils and staff. As such, there is evidence to suggest that bereavement services used without direct connection and/or support with the school community itself can be ineffective (Currier et al., 2007; Paul, 2020). Finally, the term 'crisis' is used throughout manuals regarding death processes in schools, but again this implies the problematic belief that death only needs to be addressed when it has already happened, or in the event of an unexpected death, perhaps indirectly reinforcing the inherent belief that death is somehow always unexpected. Again, instead of only responding

after the event, Pallium Canada suggests consideration of active engagement in also preparing students for both life and death. In this sense, when inevitable life events occur, tools and strategies are ideally activated, in a timely and compassionate fashion, from within a school community, and facilitated by adults already familiar to the pupils. **Addressing the needs now: Grief literacy**

Clark (2003) is understood to have first used the term grief literacy to suggest that equipping

the public and professionals with knowledge about grief would give them the tools and skills to more readily identify, seek out information and appropriate supports, "and thereby be proactive about avoiding complications from the grieving process" (p. 307). Breen et al. (2022) define grief literacy as an individual's capacity to access, process, and use knowledge regarding the experience of loss. This capacity is seen to be multi-dimensional as it comprises the knowledge to facilitate understanding and reflection, the skills to enable action, as well as the values to inspire compassion and care (Breen et al., 2022). As the term takes on heightened contextual significance and gains momentum in the wake of the pandemic, considering strategies to meet the bereaved where they are, within pre-existing and subsequent COVID-19-inspired parameters, to increase grief literacy rates seems paramount.

It is reasonable that a desired outcome of any death education programme, formal or informal, is increased grief literacy rates (OISE, 2021). While the urgent need to provide robust grief support in the face of a global pandemic is self-evident, what is also vital to consider are the different types of grief that are instigated and/or exacerbated, how widely spread those types of grief experiences, individually and collectively, are, and the pre-existing inequities in society that are reinforced within the parameters of restricted bereavement. In *The Myth of Closure: Ambiguous loss in a time of pandemic and change*, Boss (2021) suggests that pandemic grievers are not seeking closure, but unattainable certainty within the uncertainty that is the residual effect after a pandemic-restricted loss. Freeston et al. (2020)

refer to "the subjective negative emotions experienced in response to the as yet unknown aspects of a given situation" as "uncertainty distress" (p. 5). This ambiguity can surround confirmation that the loved one is actually deceased (as it is unwitnessed by loved ones), that the dying person understood and accepted that their loved ones could not be with them as they died, and that the dying person extended love, and in some cases forgiveness, to those not present in their final moments of life. Unfortunately, this uncertainty distress is at risk of remaining a long-term experience as there is no way to substantiate these needs. This begs the questions as to how to proceed towards healthy grieving, regardless. As such, Boss (2021) suggests that instead of waiting for some semblance of closure that will never materialise, bereaved individuals should search for meaning and purpose in their lives. This rings particularly true as Boss (2021) herself, in the face of the death of her husband during the pandemic, seemed to embrace this tactic herself: "I am knocked down. And I will get up again" (p. 53).

Fitzgerald et al. (2021) share that the pandemic also had adverse effects on children

and adolescents due to the reduced predictability it brought to their lives. As they imply, life is seldom predictable; however, for most children and adolescents there are presumed parameters within which their lives are conducted (schooling, social interactions, familial dynamics, etc.). Their study predicts both short- and long-term grief and mental health challenges due to the COVID-19 pandemic; a reasonable response to this predicament would be a death education program whose objectives included development and/or enhancement of grief literacy rates.

What, then, would a grief literate society look like? Grief always follows loss, but again not always a death-related one. A grief literate society would "recognize and acknowledge grief from non-death losses, and pet deaths, and not rank those losses vis-à-vis human death loss" (Breen et al., 2022, p. 429). This would contribute to equitable practices

around grief, and afford the bereaved space in myriad contexts, and "not only within clinical and institutional contexts" because it "positions it as everyone's responsibility" (p. 2), a sentiment echoed by Paul (2020). Because grief literacy is not an intervention, but "a paradigm shift that addresses explicitly the social contexts influencing how we grieve" (p. 6), this would mean that response to a loss becomes a more normative practice, potentially lessening the isolation and loneliness often described by the bereaved. Finally, a grief literate society would have to be a death literate one, too, as it "necessarily comprises people who are death literate" (pp. 6-7). And while this is understandable, the focus is on grief literacy as it pertains to this dissertation as it aligns with my applied theatre praxis. In addition, while death literacy might be a natural precursor to grief literacy, in a time when immediacy is key it is arguable that strategies to develop and enhance personal and community-wide grief literacy necessarily preclude it.

Praxis

Applied theatre as tool of empowerment

The use of applied theatre is a natural choice for arts educators with specialist training in theatre. But there are myriad reasons why it is applied theatre that is an appropriate, and often ideal, choice for exploring death and grief. A comprehensive definition of applied theatre is: "theatre practices that are applied to educational, institutional and community contexts…usually led by professional theatre-makers and intended to be socially or personally beneficial to all participants" (Nicholson, 2011, p. 241). In addition, its use in explorations of challenging subjects is highlighted: "applied theatre moves to collapse the

classical dichotomy of aesthetic form and content as it defies the distance between the

admirable but essentially useless work of art and the substantial problems of life in the

trenches" (Barone, 2003, p. x). It is this ability to straddle both the aesthetic and educative

pieces that is necessary as pupils embark on a journey to reveal their thoughts and feelings

about death, all the while supported through the elements of applied theatre. Where

mainstream theatre traditionally provides diversion or distraction, offering an escape from the

drudgery of life, applied theatre insists that the spectator take a more active role, traversing

past the proscenium arch and penetrating through its invisible fourth wall meant to keep

actors separate, and in an upper echelon, from spectators (O'Connor & Anderson, 2015). All

applied theatre is participatory and, as such, involves this metaphorical dismantling of this

fourth wall, albeit the most integral in upholding the divide, that constitutes the front portion

of the frame known as the proscenium arch (Knowles, 2014). Within this newly created

space, applied theatre affords an equitable experience from the outset, regardless of status

within the group.

Heathcote insisted that this tool of empowerment be taken a stage further, consistently

informing pupils that she knew less about a subject than they did (as cited in Wagner, 1976);

this abdication of responsibility for subject-specific knowledges ensured that dramatic

investigations stemmed from the children's thoughts and feelings and not from the so-called

'expert' in the room. This strategy, shared by other practitioners of applied theatre,

complemented the underlying objective of proffering opportunities for the learner to become

further empowered through the development of ownership (Jackson, 2011). This is key to

explorations of dying, death, and loss as the questions and experiences should come from the

pupils themselves (Engarhos et al., 2013; Koocher, n.d., Moran, n.d.). To embrace this vital

combination of individuals seeking modes for empowerment and the equitable space in which

it could happen, Boal (2000), one of the foremost practitioners of applied theatre, created the

Theatre of the Oppressed (Boal, 2000) and it involves, in capsulated form and by no means an

exhaustive list, the following: "posing alternatives; healing psychological wounds or barriers;

challenging contemporary discourses; affording learning experiences that help us to teach

others; and, voicing the views of the silent and marginal" (Taylor, 2003, pp. xix-xxvi).

While Theatre of the Oppressed adheres to structured guidelines, its activities could be

manipulated into designs for learning that are age-appropriate and culturally sensitive, that

offer both educative and reflective practice, and are again driven by pupil-identified areas for exploration.

This is where the differences between the terms practice and praxis can be unpacked, to understand why praxis is the more appropriate term for these explorations of dying, death, and loss. There is a tendency to consider scholarship remote from practice, but it is important to acknowledge that it is intimately connected to it (Nicholson, 2011):

> Drama praxis refers to the manipulation of theatreform by educational leaders
> to help participants act, reflect, and transform. At the core of drama praxis is
> the artful interplay between three elements – people, passion and platform.
> (Taylor, 2000, p. 1)

The three 'p' nouns aside, it is the string of verbs that aligns with the desired praxis – to act, reflect, and transform. Praxis, a term developed by the Brazilian educator Freire (2000), means that the participants are actively active and actively transforming, all the while reflecting on the process. This ensures that the process is not only ongoing but also cyclical, in order that it may be effectively reproduced and re-produced. Additionally, praxis maintains that at the heart of a sound education is an ability to help teachers and students reflect and act upon their world, and subsequently transform it into something more worthwhile (Taylor, 2000).

To fully appreciate the third element – platform – a return once more to the created equitable space. Boal gave it a specific name for use in his forms: "platform" (Taylor, 2000, p. 3). Boal (2000) gave his participants a space in which the spectator morphs into the 'spect-actor' – no longer allowed to merely observe the action. The choice of the word is deliberate as it not only denotes a space of action but also a place within which the voices of

the oppressed might be heard (whereas before they remained or were kept silent) (Boal, 1995; 2000). Because no formal theatre space is required, these platforms can be situated anywhere (O'Connor & Anderson, 2015). This again supports the notion that applied theatre offers an often manageable approach. If theatre praxis is "a vehicle not only for experiencing and integrating new aspects of ourselves, but also for expressing suppressed shadow aspects" (Emunah, 1994, p. xv), educators must be prepared for both the positive and negative in situ and respond accordingly. This involves the exploration of individual and collective truths, highlighting the necessity of not accepting one truth as having more value than another, save

those that seek to be counter-productive to our process. In applied theatre, the spect-actor never leaves behind their own self because, as Boal believed, humans "are all theatre and the dramatic pervades (their) lives" (as cited in Donovan, 2005, p. 38).

Next, there is a recognition that there needs to be a language developed to give children the necessary tools to talk about death (Thompson & Payne, 2000), and the "small but important job that the classroom can do is to provide a language for people to understand death" (Moran, n.d., p. 12). This is certainly true in the sense that euphemisms should no longer be employed as they serve to confuse and, in some cases, even promote fear (Edgar & Howard-Hamilton, 1994; Koocher, n.d.; Talwar, 2011). This developed dialect not only bodes well for the explorations themselves as it means a continuity of terminology, especially in the face of myriad representations and constructions, but also for any other instance, curricular or otherwise, in which the pupil is discussing death processes. In simpler terms, the latter means that while studying about Egypt in grade four Social Studies, the pharaoh didn't 'pass away' or 'go for a big sleep in his tomb,' but died. This does not in any way suggest that the subject will be broached in a morbid way (King-McKenzie, 2011); addressing real topics based on children's queries does not immediately beget negativity, nor does it mean field trips that are based solely on aspects of death processes, e.g., funeral homes, cemeteries, city morgue.

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However, it does mean that the language shift contributes to the empowering and ideally transformative experiences as the pupil moves through these topics.

It is important to note the value of this shift in oral language expression; however, the shift must be inclusive of non-verbal expression – the language that the body can produce, and to the same linguistic capacity. Sociologist and psychodramatist Moreno coined the term "act hunger" to recognise that people not only have a need to talk about their thoughts and feelings, but have an inherent drive to also express themselves physically and "employ the full body in facial expression, gesture, and action" (as cited in Blatner, 2007, p. 363). Moreover, with this physical expression, Moreno believed that actively engaging in a situation could lead to its mastery (Blatner, 2007). While much of his work involved adults, he also "saw in children's play that they, too, were hungry for action and realised the potential to apply his theory to the human experience in general" (Blatner, 2007, p. 363). But it is important that this language is not formulated in a response to a set idea that is provided – the motivation for expression must come from within. Albert Schutz states there is a need to be, concerned with helping children to investigate their ideas and feelings, beliefs and attitudes towards the social world of which they are a part

through their own expressive action, and not just with provoking

uncontrolled expressive behaviour as a reaction to a stimulus.

(as cited in Robinson, 1980, p. 157)

As such, it is in the application of these linguistic tools that pupils move from abstract concepts of death to grasp, acknowledge, and even reflect on their reality. Applied theatre provides not the impetus but the portal through which active participation in an exploration can occur, a shift that is considered key to acquisition of healthy attitudes about dying (Talwar, 2011). In keeping with the acquisition of verbal and non-verbal subject-specific language, again applied theatre can afford a platform to the

voiceless (Boal, 2000) as well as make internal voices visible, often revealing to others, and more importantly to ourselves, a different perspective (Donovan, 2005). The language acquisition process is purposefully tangential in nature as it provides access to verbal and non-verbal forms of expression, all the while affording voice to both our inner and outer selves. In moments of spontaneity, this promotes not just new thoughts but new ways of thinking:

There is a powerful relationship between the stage act and the life act.

Drama behaviors also impact on brain and body. The behaviors, roles,

and emotions portrayed become part of one's repertoire, a repertoire that

can be drawn upon in life. It is difficult, and rare, to respond in a new way

to an old situation in life. It is not as difficult to respond in a new way to

the same situation in a dramatic scene. The experience of the new response

in the scene facilitates such a response in real life. (Emunah, 1994, p. xiv)

For investigations into issues surrounding death, this eradication of negative thought processes is, of course, a desired outcome, and speaks once more to the need for an arena that ideally advocates for both educative and reflective praxes that contribute to new individual and collective truths.

It is for these reasons, as Langer (1953) claims that the most compelling arts experiences are always in a state of becoming, that applied theatre would prove to be a viable vehicle for the implementation of a death education program. Boal (1992; 1995; 2000) maintains that his forms are for actors as well as non-actors, which bodes well for contexts in which there is only theatre practitioner involved. Heathcote's call to the practitioner to be less informed than the other participants (Wagner, 1976) is a strategy formulated to keep power imbalances the

least invasive, as is possible. Once the stage is set, the explorations, inward and outward, may begin. As applied theatre practitioner Rohd (1998) deftly puts it: "Theatre

allows us to converse with our souls – to passionately pursue and discover ways of living with ourselves and others. We are all artists and theatre is a language. We have no better way to work together, to learn about each other, to heal, and to grow" (p. xix).

Applied theatre, by its very nature, has always provided possibilities for the examination of life's most complex issues (Donovan, 2005) and, as such, seems more than a viable option in explorations of dying, death, and loss.

Digital stories

Digital stories are typically three-to-five minutes in length and are a combination of photos, movie clips, text, music, and first-person narration. They are also considered powerful tools for creating knowledge on multiple levels, for both the creator and those who experience the story as observers as stories/narratives can entertain, educate, and enthral (Durant & Kortes-Miller, 2023). Digital stories, too, allow for unheard voices to be heard (LaMarre & Rice, 2016), of value as sharing grief/commemoration of the dead, particularly in public domains, continues to carry certain stigma and these stories afford both speaker and listener opportunities to question personal stances and even contribute to catharsis. *Better in than out*, viewed at the outset of this dissertation, is an example of a digital story. **Digital storytelling as an arts-based research method[3]**

Digital storytelling is an arts-based research method that makes space for people to tell their stories that are then translated into a widely shareable multimedia format (Rice & Mündel, 2018). The format, also known as a product, of the digital storytelling process is a digital story. Digital stories are understood to be of particular use in areas of difficult and life-altering human experiences (Alexandra, 2008; Gubrium et al., 2014; Jernigan & Roach, 2021; Johnson & Kendrick, 2016; Laing et al., 2017a; Laing et al., 2017b; LaMarre & Rice, 2016; Lenette et al., 2019; Laing et al., 2019) and, because of this and other contributing

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[3] For the purposes of this dissertation, the focus is on individual and not group/collaborative story creation (often used in participatory action research).

factors, has the potential to be transformative for both creator and observer (Beltrán & Begun, 2014; Boydell et al., 2012; Juppi, 2017; Lenette et al., 2019).

Digital storytelling has its roots in the 1990s, its inception widely attributed to Joe Lambert and the late Dana Atchley, at the Center for Digital Storytelling in Berkeley, CA, who sought to democratise experiences of media creation (https://www.storycenter.org/history). As such, digital storytelling does not require professional equipment and/or technological skills beyond basic competency to use a specific software platform (in the Story Center workshop's case, https://www.wevideo.com/). Digital stories are usually 3-5 minutes in length, have a first-person narrative, and may use still and/or moving images, music, or sound effects to tell a story about a person, event, or issue (Lambert, 2009). There is no fixed curriculum involved in the model of digital storytelling at the Story Center; however, there are seven steps that are suggested to ensure that any digital story is a good digital story, as follows:

Table 3 Seven steps for digital storytelling (Lambert, 2010)

1. Own your insights – clarify what your story is about
2. Own your emotions – articulate the emotional resonance of the story
3. Find the moment – identify the moment of change in your story
4. See your story – determine how you want your audience to see and hear the story
5. Hear your story – find a relaxed, natural tone and pace for your voice-over
6. Assemble your story – consider how the different layers of materials work together
7. Share your story – determine who your audience is and what your purpose is for sharing the story.

This flexibly structured approach can then contribute to an empowering experience for the creator (Juppi, 2017; Wexler et al., 2013), and often a transformative one for both creator and viewer (Alexandra, 2008). In addition, while some digital storytelling workshops involve a purchased software licence to provide the digital storytelling platform to

participants, there is also a less-enhanced version available free of charge (https://www.wevideo.com/).

Traditionally, digital storytelling engages participants in intensive group-based workshops, usually numbering eight to 12, over the course of several days, with facilitators guiding the creative process and troubleshooting the technological aspects (Lal et al., 2015). Some evidence suggests that while the workshop culminates in a product – the

digital story itself – it is the process of creating one that is of more value to the participant (Juppi, 2017). However, in terms of research methodologies, it is understandable that the dissemination of the stories could be integral to the study (deJager et al., 2017), if they are devised with educational purposes in mind.

Digital storytelling workshops at [Story Center](#)

For the purposes of this dissertation, it is necessary to frame the digital storytelling process and production within the parameters that are specific to the Story Center. Here is the six-week digital storytelling schedule at a glance:

THIS WORKSHOP INCLUDES:

- Seven Steps of Digital Storytelling Overview (as above);

- Story Circle Group Process;

- Individual Writing Feedback and Support;

- Overview to Recording Voiceovers;

- Overview to Approaching a Visual Treatment;

- Editing Tutorial in WeVideo;

- Support for Editing;

- And, group Sharing of Draft Stories. ([Story Center DSW](#))

In the vein of researcher subjectivity and transparency, it is of note that while this was an autoethnographically designed study, I did receive script tutorial support from the facilitator

assigned to me, Amy Hill, and technical support from Rani Sanderson, a Story Center facilitator based in Toronto. Amy and I met on Zoom twice during the course of the six-week workshop and she helped me consider how to trim my ideas into a 300-word maximum script for the first-person narrative voiceover. Rani[4] and I met three times, each time discussing in-software tools provided by WeVideo that would help me consider how to enhance the visual and audio representation of my story. At each meeting, both facilitators prefaced their input with the phrase, "If this were my story," before their idea, something we were also told to use in group sharing circles. In this sense, I understand my participation in this workshop to be primarily solo and thereby autonomous.

Digital storytelling and grief

The ability to express emotions that arise from a significant loss is understood to be

fundamental to the mourning process (Krout, 2005). However, giving voice to grief can be profoundly difficult as words alone can seem inadequate to realise the intensity of the loss (Bowman, 1999). However, the way in which words are organised and/or expressed can be useful. For example, storytelling has long been used in grief and bereavement explorations as it provides opportunities for sensemaking (Gilbert, 2002), catharsis (Bosticco & Thompson, 2005), continuing bonds (Valentine, 2008), and meaning-making when processing a loss (Gillies & Neimeyer, 2006; Neimeyer, 1999; Richardson, 2001). The concept of meaning-making is relevant in grief explorations as it is the process by which the bereaved come to understand, navigate, and make sense of their loss (Supriano, 2019). The use of digital storytelling in particular can provide multiple channels of expression that might be more immediate and instinctive than the narrative alone (Dokter, 1995). Digital storytelling

[4] At a recent international conference in Maryland about digital storytelling, I had the privilege and pleasure of an unplanned reunion with several of the workshops' participants, one who travelled from Sydney, Australia, and Rani. The digital storytelling community is not nascent, but remains tightly knit and cohesive, which lends itself well to continued research and practice in the field.

as a multimodal approach enhances these meaning-making processes, potentially realising its expression to a greater degree (Johnson & Kendrick, 2017). In keeping with Bruner (1990) and the idea that narratives are how we bring order to human lives, digital storytelling asks the griever to make creative and multimodal (Yang, 2012) decisions regarding images, sound, and/or music in addition to the narrative, and to keep the story to a fixed time and pace. This provides an order to the storytelling process as individuals navigate the loss that extends beyond the narrative. Digital storytelling as a meaning-making bereavement tool also allows for potential explorations of continuing bonds, addressing unfinished business, benefit finding, and sense making (Rolbiecki et al., 2021). Returning to the notion of catharsis, while digital storytelling itself is not therapy, it is valued as a therapeutic intervention in grief and bereavement work (Bosticco & Thompson, 2005; deJager et al., 2017; Rolbiecki et al., 2019), in its education and practice (Lal et al., 2015), and in its research (Durant & Kortes-Miller, 2023; Gilbert, 2002).

Digital storytelling in an applied theatre praxis

There is also a strong impetus to see digital storytelling within an applied theatre framework. Applied theatre practitioner Alrutz (2015) states that digital storytelling, "as a performance process and medium, invites participants to reflect and archive, as well as (re)vision and construct complex notions of who they are in the world" (p. 14), which makes it a potentially

viable tool in an applied theatre praxis exploring dying, death, and loss. Alrutz also sees the digital story process as a step in an applied theatre praxis, but the digital story process comes after the applied theatre games and exercises take place, becoming a part of an embodied and mediated theatre form (Alrutz, 2015). This later example is evident in the work of the Centre of Learning and Development (Toronto), whose 2019 digital storytelling projects support their goal of community development and empowering individuals through

stories that highlight the triumphs and tribulations of the human experience (tccld.org /programs/digital-storytelling/).

Cue: Ethnotheatre

Ethnotheatre (Saldaña, 2008; 2011) is a word joining the terms ethnography and theatre. Saldaña (2011) suggests that ethnotheatre,

> employs the traditional craft and artistic techniques of theatre or media
> production to mount for an audience a live or mediated performance
> event of research participants' experiences and/or the researcher's
> interpretations of data. (p. 12)

Because the goal of ethnotheatre is to "investigate a particular facet of the human condition for purposes of adapting those observations and insights into a performance medium" (Saldaña, 2011, p. 13), greater numbers of spect-actors are potentially reached. The cycle is repeated and reaches wider and wider audiences, again indicative of the potentialities of my multi-faceted approach to death education. Saldaña (2011) shares that the term ethno*drama* denotes a written play script consisting of dramatised significant sections of narrative collected from, for example, interview transcripts, participant observation field notes, journal entries, and personal memories/experiences. This may be understood in these terms: the ethnotheatrical process and its product, the ethnodrama, are representational and presentational methods of ethnographic fieldwork or autoethnographic reflection. Thus, they constitute, "the most appropriate and effective modalities for communicating observations of cultural, social, or personal life" (2011, p. 15).

Prompt: Autoethnodrama

Denzin (1997) suggests that autoethnodramas use raw tales about human experience that have the potential to move readers/audiences on an emotional level simultaneously encouraging them to connect in a reflective and critical manner. This is echoed by Bagley

(2008) who offers that autoethnodrama is a methodology that brings the data to life but also serves up critical knowing. As an educator, this reflective and critical analysis of the autoethnodrama *Better In Than Out* forms the basis of a subsequent, responsive piece, as well as indicate how I might employ digital storytelling process as a layer in my applied theatre praxis (Alrutz, 2015) of dying, death, and loss education.

Conclusion

Children and adolescents in Ontario are not immune to issues and experiences of dying, death, and loss. However, to date, there is no formal death education in Ontario elementary schools (Ministry of Education and Training, 2015; 2017). K-12 schools have been identified as optimal spaces for death education (DeSpelder & Strickland, 2015; King-McKenzie, 2011; Paul, 2020), and while teachers and school administrators identify the need for dying, death, and loss curricula, they seek support to do so (Engarhos et al., 2013; Nadworny, 2015; Talwar, 2011). Concerns from teachers and school administrators include reluctance to broach conversations about dying, death, and loss with their pupils feeling their lack of expertise about these topics could make an already difficult situation worse.

In early 2020, COVID-19 became a reality for the globe, and introduced another issue into Ontario classrooms. One of the components of its legacy is what Pearce et al. (2021) calls "a tsunami of grief" (p. 1). Death-related grief is an expected part of any pandemic (Maryland & Preston, 2020; Wallace et al., 2020). Less recognised is non-death related grief: grieving loss of employment, freedoms, social supports, expected events, etc. For children and adolescents, this also meant that routines were interrupted as school curricula were delivered online or halted altogether. In addition, the virus put restrictions around usual practices of dying, death, and loss, making them altered and unfamiliar or even verboten. The pandemic instigated these myriad forms of grief experiences and, alongside death-related grief, they too were life-altering, but often not recognised, and subsequently at

risk of not being identified or expressed (APA, 2022; Harris, 2019). If the effects of this tsunami of grief (Pearce et al., 2021) go unchecked, the risk increases exponentially, potentially resulting in what the American Psychological Association (2022) terms "prolonged grief disorder" (Diagnostic Manual of Mental Disorders - DSM-5), where the bereaved remain stuck in their grief (APA, 2022). One of the desired outcomes of this diagnosis is greater public awareness of grief (APA, 2022). Thus, the clarion call sounded by Breen et al. (2022) is for enhanced rates of grief literacy, as grief is "everyone's responsibility" (p. 2).

The goal of this study was to explore digital storytelling as an applied theatre praxis within a framework of dying, death, and loss education to enhance grief literacy. Wass (1995) suggested that a death education programme would be at its most effective if it was committed to knowing the established research, ascertaining its usefulness, and always considering its effective translation into educational action. This literature review highlighted that while there is a need for death education in elementary schools, and there is evidence that there is some programming being attempted, there remains a significant gap in Ontario elementary schools. However, before extensive curricula can be developed and implemented, the context of the global pandemic placed greater emphasis on a more urgent requirement: the need to address pandemic-inspired acute grief experiences in order to support the paradigm shift suggested by Breen et al. (2022). This would entail exploring the social contexts influencing grief, so that grieving becomes "a more normative practice" (p. 6). It would also position grief as the highly unique, personal response to loss, be inclusive of all forms of loss, and contribute to equitable practices around grief so that so-called experts in dying, death, and loss were not solely responsible for delivering supports (Breen et al., 2022).

Chapter 3: Methodology

Introduction

This qualitative study used mixed methods to achieve an autoethnography. In this chapter, I share why an autoethnographic design was an appropriate choice and present the methods, data collection, and reflexive thematic analyses that I used to bring it to fruition. In terms of the reflexive thematic analysis, I include two parts - applying the themes and applying the codes, describing how and why I chose to apply preconceived themes (Carter, 1989) followed by preconceived codes (Saldaña, 2016) to the dataset prior to analysis. The

chapter concludes with a summary of the steps taken.

Research design

If, as Adams et al., (2014) suggest, the stories we tell enable us to live better, then what would an autoethnographic study of my own grieving process reveal about my grieving? Recent publications suggest that I am not alone in this thinking (see Akehurst & Scott, 2021; Gates et al., 2020; Matthews, 2019; Ridgway, 2023; Sardi & Livingston, 2022). And, further, what would be ascertained if I heeded the suggestion made by Ellis (1993) to then invite my reader into my story so that they could reinterpret and reframe their own experiences of loss so that we all could feel a little bit better? Affording another venue for this reinterpretation and reframing in the form of a digital story is especially of value during pandemic-related grief – this, as Ellis suggests, ensures companionship with each other, but most importantly in safe and physically distanced ways.

As Pelias (2019) suggests, the impetus for autoethnographic research most often is agitation; the death of my uncle without the normative grief experiences aligned with it sat uneasily with me both personally and professionally. I was also very curious to develop my understanding, appreciation, and application of autoethnography. Goodall (2000) states that autoethnographies are creative personal narratives shaped out of a writer's experiences that

are addressed to academic and public audiences. But the challenge was to ensure that what I was crafting was not simply memoir or autobiography; it was essential to identify methodological integrity in order that the choice of autoethnography was a sound and ethical one.

Autoethnographers believe that personal experience is enmeshed with political and cultural norms and practices, and they engage in self-reflection (reflexivity) to identify and explore relationships between the self and social life; as such, it is an approach that requires working at the intersection of autobiography and ethnography (Adams et al., 2014). My layered autoethnography focused on my experience of grieving my uncle's death as explored through the medium of digital storytelling, alongside data, analysis, and relevant literature (Hughes & Pennington, 2017). But what it also afforded me, in addition to the more overt exploration of my response to his death, was the opportunity to reveal relationship as members of the LGBTQ+2S communities, and what that signified in how I remembered the past and how I navigate a still-precarious-at-times present as a Lesbian.

Finlay (2021) states that an added element of thematic analysis (Braun & Clarke, 2021) is reflexivity, defining it as "the researcher's critical self-awareness" (p. 107). This means that my role in knowledge production in this study is transparent and held accountable (Finlay, 2021). Finlay suggests that reflexive thematic analysis is not about following the rules or procedures exactly, but reliant on myself as researcher to be "thoughtfully and reflexively engaged with the data and the process" (p. 107).

But how did I ensure that this study held academic integrity and not result simply in autobiography or memoir? Levitt et al. (2017) state that integrity in qualitative research is achieved when research designs and procedures support the research goals. In this study, autoethnography supported the exploration of the methods of autobiography and autoethnodrama in which I was able as both researcher and participant to be wholly and

transparently subjective. This is also the case for grief explorations understood within grief literacy as they are highly personal and unique to the individual (Breen et al., 2022). Autoethnography also respected my approach to inquiry, looking always and, again, subjectively, through an education through transformation lens (Mezirow, 1975; 1978; 1994). Finally, autoethnography as a research design was able to be tailored for the "fundamental characteristics of the subject matter" (as cited in Finlay, 2021, p. 106). Grief explorations cannot be prescribed; they can, however, be directed and facilitated. In this sense, autoethnography positions the study as having opportunities for self-direction and self-facilitation.

Methods

As grief is a highly unique experience for the person, the methods employed for this study had to reflect this. Autobiography was the first method used, to compile the field notes from the workshop's six sessions and my subsequent thoughts and ideas throughout, as well as to create what was to become the first-person narrative for my digital story, known in this study as the working script. Within digital storytelling guidelines, an entire story cannot be told; a story must narrow its focus to a particular event or concept. After the introductory session of the workshop I understood that I wished to create a mosaic of identity-making events from my past that involved my uncle and myself and the chain of events leading up to his demise in May of 2020. As these past events occurred in a time when cameras were solely responsible for photography, and that my uncle was more than a little camera-shy, there is no photographic evidence of our times together. This meant that in order to create a digital story

using still and moving images, I had to deliberately capture the emotions I was experiencing in response to his death. Thus, the images used in the digital story are all representative of topography to which I could attribute my grief. There were two images I could use, however,

of Chris; one was taken when he was a child of about seven and the other was taken at the celebration of life for my father in 2018.

The second method used in this study was autoethnodrama. The completed digital story, *Better In Than Out*, constituted an autoethnodrama (Saldaña, 2005) which inspired a second autoethnodrama I created from analysis of the dataset. This second autoethnodrama is entitled *(this will work well for grief)*, a note taken verbatim from my journal of field notes. Moriarty's (2016) suggestion that "autoethnodrama can encourage an empathetic reading of the research story that would be lost in traditional research analysis" (p. 4) was one of the deciding factors for using this method; the subjectivity of grief exploration demanded that the autobiographical components of this study find a safe but performance-conducive platform from which to go from written page to ready to be staged.

Research tools

Participants

I was the sole participant of this study. While I was in a group of approximately twenty participants during the online workshop with The Story Center, I completed the tasks (journalling field notes and completing a script) alone, save positive feedback from the story circle that was not explicitly directive. I recognise that this commentary was integral to the experience of the workshop, yet I understand it as not shaping but maintaining my artistic decision-making momentum and, arguably, assuaging my active grief as collective viewing reflected back to me how my intense emotional exploration was perceived by others. Within the parameters of the workshop, there was the ability to offer constructive criticism, using the qualifier "If this were my story, I'd…"; however, no such constructive criticism was given to my processes of sharing my verbal story within the story circle or during the reading of the draft of my script. The only changes to the script I made were my own, and were prior to the group reading.

Data collection

The three components of the dataset for analysis were: the field notes I took in and

outside of the six weekly lessons; a first draft of a working script that formed the basis for the first-person narrative used in the digital story; and; the completed digital story. Digital storytelling comprises two categories: process and product (Rossiter & Garcia, 2010). I understand the dataset as two process items, the field notes and the working script, and one product, the completed digital story.

In this analysis, I have opted to theme the dataset before coding, using preconceived themes of grief (Carter, 1989); these themes were chosen because they best represented what I expected to find, but also aligned with what I did to creatively express these themes. I expand on this notion in a later section. In addition, the decision to code after the themes was also purposeful; my reasoning for this is: 1) that the dramaturgical codes (Saldaña, 2016) I applied to the themed data helped understand my motivations (as protagonist of my autoethnodrama, the digital story *Better in than out*, and help subsequently formulate my second autoethnodrama, *(this will work well with grief)*; and, 2) that this dissertation took a deductive rather than inductive approach to coding. Again, this is explained in further detail in a later section in this chapter.

Data analysis

In terms of data collection for the MITACS RTA, I kept a reflexive journal (Appendix C) that constitutes the raw data, or process, of the study, always aware of my overarching goal of ascertaining the transferability of this exercise in these unprecedented bereavement terms so as to better support future research participants and/or students. The other two components of the dataset are: the script, another process component, of the digital story (Appendix D) and the workshop's product – finished digital story.

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Why reflexive thematic analysis?

I chose to use reflexive thematic analysis because Braun and Clarke (2021) suggest it suits questions related to people's experiences, or people's views and perceptions, and this is

very much the case with my self-directed research questions and my perception of needing to learn to grieve within pandemic-inspired parameters. Just as with explorations of loss, there is no one-type-fits-all recipe for reflexive thematic analysis, so I worked within its "accessible guidelines" (p. 329). Braun and Clarke (2021) share that:

> 'Reflexive' TA captures approaches that fully embrace qualitative research values and the subjective skills the researcher brings to the process – a
>
> research team is not required or even desirable for quality. Analysis … is a situated interpretative reflexive process. Coding is open and organic, with no use of any coding framework. Themes should be the final 'outcome' of data coding and iterative theme development. (p. 333)

While researcher subjectivity and the notion of a situated interpretive reflexive process are both embraced in this study, how I chose to code the data was anything but open and organic and themes were not the final outcome. In support of my decision, Braun and Clarke (2021) also offer this:

> We offer qualitative researchers reflexive TA as a flexible 'starting point' for theoretically sensitive and creative research and invite them to make it their own. To do good reflexive TA, choices related to theory, data
>
> orientation and more must be made, articulated and coherently enacted. (p. 343)

With this notion of reflexive thematic analysis as a flexible starting point in mind, I applied pre-existing themes (Carter, 1989) followed by prescriptive codes (Saldaña, 2016) to the dataset.

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Finlay (2021) states that there are four key criteria to evaluate thematic analysis - rigour, resonance, reflexivity, and relevance - suggesting that the four are pieces of the same pie, but able to be sized differently in accordance with the type of research involved. For example, as this is not a scientific study, the criterion rigour is smaller within my study's pie as the slice representing the criterion resonance (Finlay, 2021) as "researchers need to devote care and imagination to the way in which they present, describe, and evidence their findings" (p. 113). This is entirely in keeping with the choice to analyse data driven by autoethnodramatic and autobiographical methods. Also, in keeping with Finlay (2021),

relevance proved a larger slice than rigour as my study contributed to further understanding of the field of dying, death, and loss education and provided applicable and practical ideas for consideration (see Chapter Five).

<u>Why pre-existing themes and pre-existing codes?</u>

Saldaña (2016) states that a code in qualitative research is "most often a word or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or evocative attribute for a portion of language-based or visual data" (p. 4). Charmaz (2001) suggests that coding is an explicative link between collected data and their meaning. This study used autoethnodrama as a method, so Moriarty's (2016) assertion that "performance texts seek to capture multi-voices and lived experiences without coding and framing data" (p. 4) could feasibly have been used to justify not coding. However, dramaturgical coding, according to Saldaña (2016) "approaches naturalistic observations and interview narratives as 'social drama' in its broadest sense" and applies "the terms and conventions of character, play script, and production analysis to qualitative data" (pg. 145). This coding directive appealed to me on two levels because: 1) it felt a comfortable fit for me as I sought to take my observations, feelings, and ideas and mount them in theatrical form to better navigate them; and, 2) it echoed Boal's (2000) belief that theatre participants select material for inquiry in order to

frame, shape, script, and/or perform stories of problems in their own lives. This was reinforced by Fuller and Goriunova (2014) who assert that codes are significant phrases that "make meaning" and "are something that happens that make something [else] happen" (p. 168). In short, I needed to code in such a way as to make sense of my grief responses in order that the second autoethnodrama happen; to this effect, Saldaña (2011) suggests that dramaturgical coding in qualitative analysis can transform data into "a stage monologue or adaptation into stage dialogue.

In the next section, I describe how I appreciated Carter's (1989) themes of grief as they exist in the gerund form - Being Stopped, Hurting, Missing, etc. - as they complement the nature of grief. If we accept that grief is too finite a term for what we experience in response to a loss, I purport that a more useful term is the gerund form: grieving. Denzin & Lincoln (2003) note that culture is "an ongoing performance, not a noun, a product, or a static thing. Culture is an unfolding production, thereby placing performances and their representations at the center of lived experiences" (p. 328). With this in mind, I have put my

expectations that Carter's (1989) themes of grief will be evident in the dataset on a continuum that culminates in dramaturgical coding, essentially combining the two processes to better interrogate the data and manipulate the findings into theatrical form. <u>Pre-existing themes</u>

I used Carter's (1989) pre-existing themes to theme my dataset (Saldaña, 2016) and pre-existing codes to code my dataset, seeing the two as a continuum towards one outcome - the creation of a second autoethnodrama. There are other possibilities in terms of using pre-existing codes for loss; there are numerous studies (see Milman et al., 2015; Pritchard & Buckle, 2019; Karkar & Burke, 2020; Kawashima & Kawano, 2021) that make use of the meaning of loss codebook (Gillies et al., 2014). However, I have clear reasoning about

applying pre-existing themes to the dataset using Carter's *Core*, *Meta*, and *Contextual* themes.

Firstly, although both studies use narrative inquiry techniques, Carter (1989) is researching through a nursing education lens while Gillies et al., (2014) do so through a clinical psychology lens. I am aware of the recent DSM-5 inclusion of prolonged grief as a mental disorder (American Psychiatry Association, 2023), but as a non-clinician I understand grief literacy through an educational framework or, put more simply, how I am personally able to contribute to the support/navigation of the disorder. Secondly, Carter arrives at five *Core* themes, three *Meta* themes, and one *Contextual* theme, and the core themes - Being Stopped, Hurting, Missing, Holding, and Seeking - are all in the gerund form, which connects directly to my choice of dramaturgical coding (Saldaña, 2016) as the code *subtexts* refers to the participant-actor's unspoken thoughts or impression management (see Figure 6). In addition, I hold the assumption that grief should always be referred to as grieving - the infinite (gerund) form of the verb as it, too, is infinite. Finally, Carter closes the discussion section with a prompt: "The significance of the patient's stories about the past, about who the deceased loved one's had been and how they died, need to be recognized" (p. 358). The recognition of all three of these markers resonated with me as I strove to make meaning of the death of my uncle, the circumstances within which he died, and the loss of identity I was experiencing upon his death.

A stand-alone reason to choose Carter (1989) to theme the data comes from the desire to take a reflective approach to my assumptions about dying, death, and loss using a subjectively selected tool to do so. This allowed me to do a 'checks and balances' exercise

for my professional capacity as a dying, death, and loss educator and ascertain if my expected grief responses coincided with those of Carter's (1989) study. This would contribute to my commitment to best practice.

As the creator of this codebook, I purposefully added another *Contextual* theme - Pandemic - to the list as it, as is the case for Personal history, provided an overarching of the five *Core* themes but also covered the three *Meta* themes.

The themes are as follows:

Table 5 Themes of grief (Carter, 1989, pp. 355-357), with my addition

Theme	Code	Characteristics of bereavement theme
Core		
Being stopped	Bs	Describes the interruption of life's usual flow following the death of a loved one and is characterized by varying types and degrees of inability, frequently stated in terms of "I can't."
Hurting	Hu	Characterized by a cluster of intensely painful emotions.
Missing	M	Describes the acute awareness of all that has been lost.
Holding	H	Selective preservation encompassing the bereaved one's desire to maintain it all, that which was good, from the loved one's lost existence.
Seeking	S	Describes a search for help.
Meta		
Change	c	Describes bereavement's dynamic, change-inducing character.
Expectations	e	Describes a sense of rightness or oughtness that hovers over bereavement.
Inexpressibility	i	Refers to the felt inadequacy of words to describe the experience of personal bereavement.
Contextual		
Personal history	Ph	Theme within which the five core themes are embedded and is essential for understanding bereavement's quality.
Pandemic	*	Theme which repositions and alters, to varying degrees, the nine themes and is essential for understanding this specific bereavement's quality.

These collective themes, which essentially became two series of codes, were used to analyse

all three components of the MITACS study.

<u>Pre-existing codes</u>

      My experience as both applied theatre specialist and dying, death, and loss educator positioned me well to speculate about the themes or concepts I might encounter and the theatrical techniques I could employ to transform said themes into a performance-worthy text. Saldaña (2016) suggests that dramaturgical coding is appropriate as it explores intrapersonal and interpersonal participant experiences and actions, especially those learning toward narrative or arts-based presentational forms (Leavy, 2015). Dramaturgical codes "apply the terms and conventions of character, play script, and production analysis to qualitative data" (Saldaña, 2016, p. 145). They also help the researcher (who, in this study, is myself) understand the "qualities, drives, and motivations of the participant" (p. 146) who, in this study, is also me. Finally, dramaturgical codes are "best applied to self-standing, inclusive vignettes, episodes, or stories in the data record" (p.146), making them a useful choice for this study. The codes are as follows:

Table 6 Dramaturgical codes (Saldaña, 2016, pp. 145-150)

Code	Signifies
OBJ	participant-actor *objectives*, motives in the form of action verbs
CON	*conflicts* or obstacles confronted by the participant-actor which prevent him or her from achieving his or her objectives
TAC	participant-actor *tactics* or strategies to deal with conflicts or obstacles and to achieve his or her objectives
ATT	participant-actor *attitudes* toward the setting, others, and the conflict
EMO	*emotions* experienced by the participant-actor
SUB	*subtexts*, the participant-actor's unspoken thoughts or impression management, usually in the form of gerunds
SUP	*superobjective* - the overall, ultimate goal of the participant in the social drama
PHY	participant-actor *physical actions*, the body's movements, gestures, appearances, conditioning, clothing, use of space, etc.
VER	*verbal* aspects of the participant-actor's voice: tone, articulation, fluency, volume, vocabulary, etc.

      Saldaña (2005) shares that the resulting text, or autoethnodrama, will most likely be a monologue, as was the case with my digital story (first-person narrator). But for this second

autoethnodrama, my instincts told me that I wanted to create, at the very least, a duologue, where there are two characters, or even a scene of several 'selves' (self at the time of death, self at the time of workshop, etc.) and other characters as foils to these selves. Saldaña (2011) suggests that this is possible as "one-person autoethnodramas sometimes include the solo actor portraying multiple roles when significant characters enter the story" (p. 24). Saldaña (2005) also argues, however, that the researcher's onstage presence and/or commentary could detract from rather than enhance the participant's stories, so that I understood that while my uncle Chris could be another role, I need to be wary of my 'selves' as constituting multiple roles instead of a single role. Saldaña (2005) counters his own thinking here with the idea that the voice of the researcher might be necessary to advance the plot or provide "pieces of evidentiary data for the audience" (p. 19). This conundrum led me to reflect on theatrical conventions I have used in the past, namely *deus ex machina* (not appropriate in this instance as in real life no one can ever come back from the dead) and the use of an omniscient chorus. Saldaña (2011) includes what he terms a choral exchange, and shares how it is used in Gray and Sinding's (2002) ethnodrama about metastatic breast cancer. He describes the technique of the choral exchange as "a nonrealistic, presentational mode in which multiple actors /characters speak both individually and collectively, sometimes in overlapping ways" (Saldaña, 2011, p. 109). This was useful for my purposes as its cacophonic nature and diversity of perspectives mirrors what I understand to be the messiness of grief. I also understood that the Chorus could represent any judgemental voices that I had within my own head, a theatrical nod to Boal's (1995) The Cop in the Head, again providing a reflection of my character in grief. Saldaña (2011) asks the reader to "think of choral exchange as a form of vocal collage that provides a heightened sense of omniscient insight about the characters or

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issues for audiences" (p. 109), reinforcing its potential for both emotional connection and knowledge transfer.

Conclusion

This qualitative study used mixed methods to achieve an autoethnography. The dataset consisted of three items: field notes from the MITACS workshop, a working script of the first-person narrative for the digital story, and the digital story itself. Methods of data collection were autobiography/narratives and autoethnodrama. I used reflexive thematic analysis as it is a recursive process that allowed me to move back and forth between the

different phases of the study, engaging and re-engaging with the data; however, I chose to apply preconceived themes (Carter, 1989) to the dataset and then apply codes in order to ascertain my motivations in the first autoethnodrama, the digital story, and consider motivations for characters I conceived for the second autoethnodrama, *(this will work well for grief)*.

Chapter 4: Findings and interpretations

<u>PART A: Findings</u>

Introduction

For this chapter I present and describe relevant and value-adding findings from my data analysis processes to understand what I learned from my MITACS study about dying, death, and loss education and how I might apply what I learned in my own applied theatre praxis in support of others' explorations. I took these findings, weaved them together, and devised a second autoethnodrama entitled *(this will work well for grief)* ([Appendix G](#)), a title that was used verbatim from the field notes' data.

There are three components of the dataset – field notes (process), script (process), and digital story (product) – all resulting from the MITACS study. The components are presented in the order they were started and/or completed: field notes, script, digital story. While the field notes were created by myself and in isolation, they also contain information regarding the ideas and concepts shared by others in my workshop; these are reported to be wholly transparent about the presence of others in the workshop. The first section describes and presents how the three components were themed using Carter's (1989) themes: five *Core*, three *Meta*, and one *Contextual*. In addition to these nine themes, I added another *Contextual* theme of my own devising – Pandemic – as it provided an enveloping of the five *Core* themes but also covered the three *Meta* themes. The second section describes and presents how the three components were coded using Saldaña's (2016) dramaturgical codes. The themes and codes assigned to the three components were applicable, in varying degrees of regularity and appropriateness, to almost every piece of datum. I selected for this chapter two relevant and value-adding examples from each component to represent each theme and code, except for the code ***superobjective*** as it implies one example. I have also included any findings that I did

not expect or that did not present in a manner I had anticipated. The three components in

their analysed forms are included in [Appendices.](#)

       This chapter also contains my personal responses to the data analysis, at times *in situ* in PART A and at others in PARTs B and C, in order to devise the second autoethnodrama. I did this in an effort to make meaningful connections when they felt organic and less prescribed between my overall research aim, guiding questions, and what the data revealed to me as both participant and researcher.

Applying the themes

    Using the collected themes as a framework, I looked through the reflexive journal of field notes (Appendix C) three times. The first time I did a reading without annotation. The second time I highlighted the field notes that were directly pertaining to the process of digital story creation (and not, for example, an email of a colleague or information regarding how the workshop was being conducted). I then compiled the highlighted information and chose two examples from the list to represent each theme. These applied themes are as follows:

Table 7 Applied themes: Field notes

Bs	"Context"; "Better out than in" - Griefcast (UK) Scottish guest shared her mum's mantra
Hu	"Brevity"; "Grateful"
M	"Who am I now?"; Figure 1.
H	"Making connections"; "Finding a moment"
S	"No one learns or creates or produces in a vacuum"; "Where does the grief go?"
c	"Sense of now"; "Navigate"

e	Figure 1; "The tyranny of the happy ending"
i	"Show, don't tell"; "Appearances become the language of a lived life"
Ph	"Context"; "What images, if any, come to mind for key moments?"
*	Figure 1; "Tegan & Sara - Where does the good go?"

Figure 1 Venn diagram: Field notes
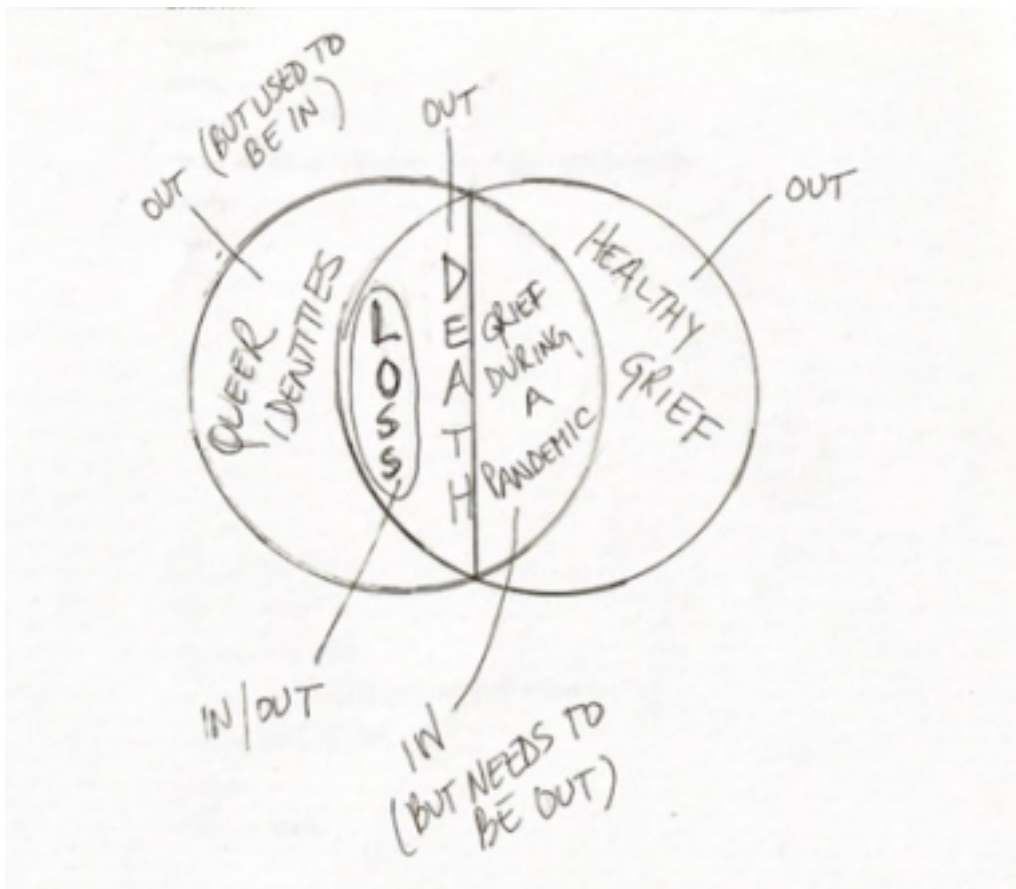
The field notes contained all of Carter's (1989) themes, as well as the one I added myself – Pandemic. There was some replication of the field note phrases I chose, especially of Figure 1.; the use of the terms "out" and "in," in various combinations, featured heavily in this diagram. Figure 1. had two circles in the format of a Venn diagram, with a split in the middle section. I included the phrases "healthy grief" and "queer identities" in the outer parts

of the circles, and the two segments within the middle section held the terms "loss", "death",

and the phrase "grief during a pandemic." Figure 1. was one of the first notes in my field notes and represents what I perceived as the two sides of the two clear objectives of the digital story process: 1) to strive to find ways to experience healthy grief in an otherwise unhealthy space, namely a pandemic-restricted one; and, 2) to come to terms that afforded clarity about my identity as a Lesbian now that the death of my uncle, namely a beacon on my queer path, had died. This diagram helped me play with the two key words: in and out. Pandemic restrictions were enforcing the public to be in more than out; these terms in this formation triggered feelings in me of a time when I felt there was a similar enforcement - an internalised homophobic response to the societal pressures surrounding me. Chris afforded me hope in the form of himself, a gay man living happily, thriving, amidst the circumstances in my own world that suggested myriad opinions to the contrary. The amalgamation of our time together then was able to be identified as being more out than in, referencing the proverbial closet and the liberation I experienced when out in social spaces with him. Creating this diagram had me asking if I, too, was at risk of being 'lost' because of the loss of him in corporal form, and this played on my psyche in a way that made me feel oppressed once again, hurtling me back into my formative queer years.

 I had written the phrase "Use of questions" in my notebook, and the sections preceding and after this phrase held many questions: "Who am I now? Why this story? Why this story now? Who is this for? Why are you wanting to tell this story? What's your viewing context? What images, if any, come to mind for key moments? Is a digital story ever finished? What does grief look like? Where does grief go? Tegan & Sara - Where does the good go?" It occurred to me early on in the process that if I did not know the answer to the question asking how to grieve in pandemic-restricted spaces, the way forward presented itself during the workshop with the strategy of continuing to ask questions. These questions formed

the framework of my digital story. As shared above, the death of the beacon in my life I identified as Chris caused a ripple effect in my own life: was my identity in jeopardy? It certainly felt as if it were, and my subsequent response was the need to learn how to grieve what were quickly becoming multiple, connected losses. The workshop asked us to consider why the story that we wished to tell was the story that needed telling. I answered this question with the question about for whom the story was - and this time I could answer: the story was for me, the me in the present, the me that needed Chris in the past as a guide, and the me that could not move forward with my grief until I rectified my stunted grief processes. Finally, I

asked myself the underlying question: Where does the grief go? This question had an unwritten last section - Where does the grief go if it doesn't get explored? My concern was that my unexplored grief would take down into the mire any happiness, any strength, any conviction I had once felt because of my relationship with and to Chris. This sparked the lyrical question asked by Tegan & Sara: Where does the good go? Where would my good go?

I created in the field notes a section about technical and craft-related aspects that the facilitators shared with us: "Audience / Purpose / Presentation and Voice / Ambient sound / Music" as well as a list that included terms such as: "repositioning, intersection, vulnerability, interconnectedness, flow, and grace." I had established that I was the chosen audience for my digital story, but yearned, too, to have it shared within the confines of our story circle. The term vulnerability was key as I identified that my grief journey would be only as effective as how raw I was willing to be within the workshop space. The Story Circle provided a highly safe space in which trust was implicit and there was zero tolerance for constructive criticism that threatened to usurp the storyteller's power. Digital stories are first-person narratives because they are only told by those appropriate to share them.

There were also many directive terms in the field notes that suggested how to create a successful digital story: "Brevity, Navigate, Finding a moment, Context, Layers, Show, don't

tell, and Fluidity." Finally, there were phrases that we were told were common to the digital storytelling process: "No one learns or creates or produces in a vacuum, The tyranny of the happy ending, Using the 'you' voice, and KISS - Keep It Simple, Stupid." The reminder that no one creates in a vacuum reinforced that while I was the sole participant of the study, there were other 'soles' whose energy and creativity were contributory. The phrase about the tyranny of the happy ending resonated with me as my 11 years in the United Kingdom had afforded me film and television experiences that differed from those in North America as they proffered endings where things were not tied up nicely with a bow, but left to their own devices. All was not well at the end, and I found it repugnant that my grief story might fall prey to a trite and useless device to make it all pretty and perfect at the end. I also toyed with the notion that there is no ending to grief, prompted by the question asked: Is a digital story ever finished? My immediate response was no. Thus, the thought of an ending to the

story seemed inappropriate and, again, unhelpful.

There were two items in the field notes that stood out because I had not remembered or expected them: "Other side of the desk" and "Death is just another kind of birth." Finally, there was one technical phrase that presented in a manner I did not anticipate: "Blank space is possible (this will work well for grief)." These two phrases pivoted me in places that were not my comfort zone; being on the other side of the desk meant the teacher was now the learner, escalating my vulnerability in this new space of unexplored grief but also of new technological learnings. Death representing another kind of birth caused me a great deal of stress as it harkened back to my youth and the forced Catholicism encompassing the idea of a place the dead go after death to experience an even greater existence.

The script (Appendix D) to provide the first-person narration for the digital story was created at the beginning of the creative process. This version changed only slightly in the final story (product). I chose to use this original version to describe where I was (contextually

/emotionally) around the second week of the six-week workshop. The script is 29 lines in length, and the lines are organised in the following groupings: 1-2; 3-5; 6-8; 9-12; 13; 14-15; 16; 17; 18-19; 20-21; 22; 23-24; 25-26; 27; 28; 29. Overarching themes are Being stopped (Lines 1-29), Seeking (Lines 1-29), Holding (Lines 9-22), Personal history (Lines 1-29), and Pandemic (Lines 1-3,6-8,13,17, 25-29). There were no unexpected themes, nor did anything present in an unanticipated manner. In Table 8, the numbers that precede the line from the script refer to its placement in the script.

Table 8 Applied themes: Script

Theme	Line number	Line from script
Bs	7, 8	I recognise that he has died, I just can't navigate the space in which he died;
	29	And I look forward to finishing the song
Hu	8	Like many, I am lost;
	28	Right now, it's all better in than out.

M	3	He died on May 17th;
	25	There has been no celebration of life
H	18	I remember being close to him before this night, for sure;
	21	And when we were out, we were out
S	9, 10	When I came out to him in the 80s, at an age often called tender, he had pre-empted me by coming out himself;
	24	And I turned to my wife and asked, is this it? Is he going out?
c	3, 4	And although his death was unexpected, it was more anticipated than most;
	27	So, we sit in limbo, in myriad ways, awaiting bereavement amidst our grieving, in myriad ways
e	4, 5	Optimism tends to do that to a person;
	25, 26	Right now, celebrations of life are on hold, in myriad ways