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Outside Edge's Theatre for Recovery: Re-Shaping Influence and the Addict Identity

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This article examines performative strategies that help to prevent relapse into addiction by re-shaping influence and identity. Relapse is a major obstacle in recovery from substance misuse – illustrating starkly that the recovered remain under the influence of their drug of choice even in its absence. Performative strategies offer unique forms of support in tackling this problem. One leading proponent of such an approach is theatre for recovery group Outside Edge. Founded in London in 1998, the company's Theatre Skills Progression Program (TSP) evolved to help people in recovery develop an artistic practice – often from scratch. The core of TSP is weekly workshop groups for company members at different levels of experience, leading to performing in treatment centres. Outside Edge therefore provides a rich source of material to explore and uncover the mechanisms by which performative strategies might support recovery. This investigation draws on my long-term engagement with the company (2009-2017) as research adviser and trustee.

Investigating Outside Edge's work and development also produces insights into the recovery process itself. Their practice has evolved over time to address the psychological and ethical demands of working with people in active addiction. The reading I offer here focuses on two main questions related to this. How might theatre practice intervene positively in addict subjectivities? And how can the provocative quality of theatre for recovery help meet the challenges of re-making identity? These

questions are especially pertinent due to the provocation Outside Edge's theatre often makes. Indeed, company founder Phil Fox called their work 'a denial of denial' (Reynolds and Zontou 2011: 170). Fox sought to confront the problem of addiction, and exploded the idea of anonymous recovery by insisting on performances of recovery. At Outside Edge, the recovered perform to the recovering and risk engagement with influence to escape it. Examining these dynamics produces new insights – into the agency of addict identities and their re-shaping into an *influencing* – rather than an *influenced* – mode of subjectivity.

The Influence

Before considering performative strategies and their role in recovery, I would like to focus momentarily upon terms, and the power of influence. I read addiction as a human universal. Everyone possesses a frontal lobe of the brain, and thus harbours the biological latency for addiction. Therefore, despite stigmatising connotations, I use terms like 'addict' and 'addiction' to talk about influence. This is not to single anybody out, but rather to include the broadest possible group in the remit of this discussion.

The human brain causes everybody to experience addictive processes. Usually, they are positive. Food, sex, exercise – these experiences are rewarding, and they are repeated, thus promoting the survival of self and species. 'Destructive addiction' is the flipside of the survival coin, defined by Paul D'Amico as 'A primary, chronic, neuroendocrine disorder of the brain and ... nervous system, having correlates that are behavioural in nature'. Addiction reaches a disease level 'when the threat of perceived

psychobiological tension reaches intolerable levels (functional or physiological)' – in other words, when the drug cannot be lived without (D'Amico 1987, cited in Allen 2009: 1). This 'psychobiological tension' is easily recognisable in the regular craving to eat. Just think about how eating or not eating makes one feel, even how food structures daily life. *MUST. HAVE.* The survival instinct is powerful. And when addiction is recognised as the re-direction of its energy towards self-destruction, the power of its influence can be seen, as well as the necessity of enhanced recovery strategies – such as those that performance can offer.

To read these strategies, one must first understand how the survival instinct can be inverted to focus on toxic substances (like alcohol), and practices (like gambling), which stimulate and eventually redirect the pathways of the human brain's reward system. Theatre scholar Jean-Marie Pradier offers an early example of research connecting the neurophysiology of addiction with the field of performance studies. He discusses the neurophysiology of the 'reward system of the brain'. Stimulating experiences, he writes, produce 'monoamines' and 'morphins' in the reward system; these are 'opiate-like substances [that] have euphoriant properties'. If this process of reward is accompanied or triggered by artificial stimulants, those stimulants come to be perceived as essential for life, and biological dependence is formed (Pradier 1990: 92). This 'disease' model of addiction provides a sharp description of its biology. But the creation of the emotional matrix that is somehow rewarded by artificial stimulation often stems back to childhood. So, while addiction can be universal, there is no totalising account of recovery and its meaning, nor is there a universal treatment.

Recovery starts with stopping – but emotional needs persist long after the drug of choice is removed; recovery can take a lifetime, while relapse takes only seconds.

Recovery, therefore, engages every level of the person, both necessitating and constituting a comprehensive process of personal transformation. However, such transformation is inevitably rooted in, and impacts upon a specific, grounded context. The transformation of the addict requires that they transform their world. Recovery, therefore, enacts an ideological gesture towards society – a gesture that demonstrates the re-claiming of agency – and that consequently has the potential to trigger social transformation. Consequently, the meaning and effects of recovery require greater attention, in its modelling of individual and social strategies of change. Moreover, reading recovery as an ideological gesture suggests that analysing it would, conversely, help to better understand how the addict identity is inscribed.

It is because these gestures are particularly visible in performances of addiction, that the work of Outside Edge provides rich sources for such analysis. In what follows, I argue that their practice reshapes the addict into an influencer, as opposed to one under the influence – and that this empowerment reveals one crucial element of recovery to be the claiming of a critical and politicised mode of agency through performance. This is of particular interest as it is an enhanced form of agency, capable of resisting doubled hegemonic pressures – not only those of social stigmatisation, but also those of relapse. On these terms, ‘addict’ is as much an identity as it is a condition – one where the influence has the power to subsume agency, but also one where recovery displays resistance in a way that suggests it could even be a model for political action.

Influencing

Outside Edge started work in 1998 with *Ordinary People*, a piece created by company founder Phil Fox with life prisoners in Wormwood Scrubs. The following year, Fox launched the company formally, with *Living on the Edge* (1999), Outside Edge's first treatment centre tour. A recovered addict himself, Fox had become convinced of the political efficacy of theatre while training as an actor in the 1980s, and he thus sought to synthesise his experiences of performance and recovery into an applied practice that would help other addicts recover (Reynolds and Zontou 2011). Between 1999 and his untimely death in 2014, Fox strategised and structured the first fully coherent approach to 'theatre for recovery' in the UK, and probably the world.

Over time, Fox developed Outside Edge into what he described as 'a four stage, fully integrated educational self-development' programme, led by a 'theatre skills progression program', or TSP (Fox 2014: 374). TSP enables participants to develop through weekly workshops – from absolute beginner to paid performer – via a process of training, mentoring and regular performances. Outside Edge performers are all in recovery. Thus trained, committed participants work on public performances and treatment centre tours. These core performance activities are supplemented by stand-alone projects, perhaps targeting a specific theatre skill or demographic, and by training for relevant professionals, such as social workers.

In his practice, Fox aimed for provocation – deliberately creating hard-hitting theatre that made addiction the primary focus, rather than treating it as secondary to

other issues such as homelessness or criminality. Company publicity materials show that between 1999-2011 Outside Edge worked with 'over 10,000 people affected by drug and alcohol addiction', through performances that created 'hundreds of hours of paid employment for people in recovery' (Fox 2010: 6). Crucially, by focusing his participants on public performance, Fox did a 180° on a long-standing principle of recovery – the idea of anonymity embedded in recovery since Alcoholics Anonymous was formed (1935). The importance of this simple subversion cannot be overstated; recovery would now be performed.

Augusto Boal's ideas were central in Fox's early practice, connecting with, and informing his reading of addiction as a form of oppression – rather than solely as disease. As I traced the company's public performances between 2009 and 2012, it was clear that the standard pattern of forum theatre¹ – performance followed by replay with interventions and dialectical analysis – worked effectively in the addiction context.² One piece, *Stand Still Look Pretty* (2011), was devised and presented by the drop-in theatre skills progression group – participants with little or no experience of performing. Its protagonist, Jade, has repeatedly missed meetings with her social worker, and is on her last warning before her children are taken into care. She endeavours to stay clean in order to prepare for the next meeting, but circumstances conspire to put her in a situation where a relapse into heroin use becomes inevitable. As much as the drug itself influences her physically, Jade's networks of existing relationships influence her by inviting relapse. She can escape the influence temporarily, but her context presses in and oppresses her too.

Stand Still illustrated powerfully that recovery is much more than just a question of just stopping using; it entails a painful process of extraction or divorce from the influence as it is embedded in relationships and situations, people and places. In the forum itself, a member of the audience – visiting the company for the first time – spoke of the parallel between the work and her own situation, where her children were removed from her completely for six months before being placed in care for three years due to her addiction. ‘This is what happened to me’, she said, before entering the fray. In the six years since joining the theatre skills progression program, and acting professionally in a number of Outside Edge projects, she has received several playwriting commissions, and emerged as an applied theatre practitioner in her own right. Recovery can trigger patterns of transformation beyond the individual, reaching far into the social.

Forum theatre, therefore, requires particular recognition as an efficacious application to the slippery problem of influence. The deep emotional matrix underpinning addiction can receive sophisticated attention through forum theatre’s ability to zoom in on individual struggle, while simultaneously emphasising grounded context. Nevertheless, this requires further attention because Fox’s use of forum aligns closely with Boal’s practices and principles, and may consequently trigger several of the critical problems Helen Nicholson recognises in it. The ‘practices [Boal] advocates’ rely upon a ‘conceptualisation’ of the self as ‘creative’ she writes, but this idealist ‘construction of human nature’ contradicts the materialist emphasis Boal claims for the Theatre of the Oppressed (2005: 116–17). Similarly, Boal’s ‘redemption narrative’

regarding the freedom of the body, Nicholson writes, 'misses - or does not accept - ... a view of selfhood as discursively or culturally constructed'. This emphasis on individualism may actually formulate an 'obstacle' by emphasising 'individual change at the expense of social change' - suggesting that forum's effectiveness relies upon a 'shared experience' of oppression by both performers and audiences (2005: 119). If that is so, it may be that the theatrical experience offered is less significant than the experience of community created by participation, at least in terms of mitigating the power of the influence.

However, Boal did remark that what he offers is 'not a recipe book: it is a method to be used by people, and people are more important than the method'. 'The ideal', he says, 'is dialogue' (Boal, cited in Chatterjee and Schechner 1998: 87, 90). Additionally, Paul Heritage maintains that 'the starting point of forum is the theatricality' of the model; 'for by this means the audience is engaged and brought into the debate' (1994: 29). Moreover, Paul Dwyer writes in his review of Boal's practice that not 'all the answers to the challenge of practising' such theatricality were answered in Boal's initial manifestoes (Dwyer 2004: 156). These remarks affirm the plentiful interstices in forum, and encourage the exploration of its particular efficacy in the addiction context. This is not to deny the power of shared experience. It is likely that, as Douglas Paterson suggests, forum 'works best when everyone in the audience has a direct stake in the issue performed' (1994: 38). Outside Edge uses actors who have overcome addiction to perform in their treatment centre shows - and all of their participants are involved in some stage of recovery.

It is noteworthy, however, that Outside Edge invariably present their work – including their treatment centre shows – to a wider public, and in doing so argue for a broader sense of social responsibility for the problem of addiction, beyond a community of shared experience. Such responsibility is nearly always under erasure, because the model of addiction as disease invites seeing it as grounded in the body, and therefore as a question of individual, rather than social, responsibility. But via public performance, Outside Edge’s actors in recovery present themselves openly as emblems of both individual and social change – tackling reductive perceptions of addict identities, and demonstrating a material recovery through paid work as artists. Through their performances, therefore, they enact influence upon the audience via questions that are not focused on the basis of shared experience, but, rather, on sharing their radically different, experience of society. Through their stigmatisation, isolation and knowledge of influence, the addict is an Other who experiences the liminal borders of society. Through this otherness, addict theatre is licensed to reveal, penetrate and transform that society, opening a reflexive space wherein individuals can apprehend not only their own unconscious patterns of behaviour and/or dependencies, but also recognise and critique the ways in which society supports and sustains influence.

Performer-as-Influence

These potentials derive in part from Outside Edge’s deployment of participants’ subjective reality. Their performers are simultaneously emblems of real personal recovery, and representations of characters in, or affected by, addiction. Thus they

produce what Marvin Carlson calls 'double-codings' in character, creating fragmentation within the largely naturalistic mode of forum that the company used up to around 2012 (1996: 607). This fragmentation is intensified in performance because such material inevitably contains relapse triggers, and thus each Outside Edge performance – while the narrative may be fictional – nevertheless qualifies as 'real life' by dint of its being an active demonstration of actual recovery. This layering of the fictional and the real amplifies the visibility of choice, making the performer readable not only as character but also an emblem of the power and realness of agency in the face of oppression. Ruth Quinn provides a useful account of the success of similar processes as being due to their grounding in a 'return to the real'. By embodying 'relationships of power and resistance', such performances deny the 'dominant cultural image' and instead offer 'a simple acknowledgement of the reality' (2003: 20). These layers of fiction and reality disrupt 'traditional assumptions about the relationship ... between the conventional concept of character, role, and identity' – which Carlson suggests are typical features of performances grounded in autobiography (1996: 599). Paradoxically, this disruption of the mimetic surface of representation gives Outside Edge performances their realism, and this sense of authenticity contributes to their utility in assisting relapse prevention. Perhaps then, Outside Edge's work fits into Nicholson's assessment that the potential to find 'creative ways to think differently *and* act productively in a wider ... context' can 'co-exist in the same piece of forum theatre' (2005: 124–25). Nicholson avers that theatrical forms and structures have meanings in

their own right, and interpellate ideological perspectives. These perspectives can, therefore, be productively disrupted or challenged through experiment with form.

Despite the effective formula that it offers, Fox began to turn away from Boal's Theatre of the Oppressed. This was partly inevitable – having gained results through forum for over a decade, the moment had arrived to identify other performative strategies that could combat the ongoing influence of drugs and assist relapse prevention. But Fox also sensed that the forum play reflected the inevitability of tragic drama, while paralleling the downward spiral of addiction towards rock bottom. For example, Fox created *Cries Unheard* (2010) for Gloucestershire County Council, to train their social workers in harm reduction and child protection.³ At one public performance, a social worker responded in the forum to deny the possibility of meaningful intervention: ‘There is no hope’, he said.

Another example of this potentially negative fatalism was the treatment centre show, *A High Price to Pay* (2011). Megan, the protagonist, having completed treatment for alcoholism, ‘feels confident enough to visit her estranged alcoholic father, Gareth’ (Fox 2010: 6). Gareth, a lawyer, hides his own drink problem from his daughter, and lays waste to both their lives in the process. Initially, Megan makes progress in rebuilding her life and relationship with her father, but he has come to rely upon a parasitical friendship with Eamon, who is threatened by her return, and who works hard behind-the-scenes to undo this progress. Ultimately, he frames her as a gold-digger, and the rebuilt relationship collapses – as does Megan’s recovery. Here, due to the complexity of the relationships, the potential for intervention also seemed low.

The intervention phase of forum undoubtedly has the potential to interrupt influence. It provides an opportunity to reject immutability, to practice agency, and to display recovery. In both the examples above, those in recovery managed to intervene and find ways through – and there was hope – but Fox’s awareness of forum’s difficulties were becoming pronounced. In interview, he remarked that

[I]t’s a fault with forum ... that the shows have to end negatively.... [P]eople at the end of the show think ‘That’s it, that’s it, where’s the hope?’ And you’ve got to then persuade them to engage in the forum. That’s the difficulty of working within treatment centres, because people are in this hopeless situation. (Reynolds and Zontou 2011: 167–68)

Ultimately, these difficulties would be positive in leading Fox to search for equally effective – or better – forms of performative intervention.

Another key moment in Fox’s turn away from forum was his increasing recognition of the potential of deconstructing form in performance. Forum interrupts what Carlson calls the ‘operations of ... dominant symbolic systems’ (1996: 606), for example what Barbara Fuchs characterises deftly as the ‘procrustean’ narrative patterns of Aristotelian drama (Fuchs 2007: 534-5). Narrative patterns are closed structures, and thus operate symbolically to communicate a sense of immutability. Forum intervenes in this by firstly displaying, and then dismantling, narrative. But what if such deconstruction happened in performance itself, rather than after?

In April 2011, while discussing *The Lion's Face* (2010) – a collaboration between The Opera Group and the Institute of Psychiatry that blended the spoken and operatic voice as a metaphor of the disconnect between Alzheimer's sufferers and their carers – Fox reflected upon how far music could be pushed in relation to his own practice. He frequently used song to top-and-tail his forum pieces. But what if the form of the musical could be brought into the service of recovery? After all, the performers would remain doubly coded, even if the intervention phase of forum was sacrificed, and agency would be available and displayed through the subversion of form. And thus *Substance Misuse: The Musical* was born.

Performance-as-Intervention

Substance Misuse was devised that year, and first performed publicly at Oxford House in East London (2011). Its content was not spectacularly complex. It started with an unsolved murder at a factory – and, with everyone a suspect – exploited the potential this created for unravelling relationships and characters through the process of detecting the killer. Yet *Substance Misuse* had a Brechtian style and politics to it – identifying poor labour conditions as a driver of substance misuse. An onstage band clearly declared the form, adding to the feel of Brecht's *The Threepenny Opera* (1928), and structuring a fairly standard pattern of scene-to-song, with musical numbers marking the emotional peaks of the narrative. It is hard to account precisely for the impact. This was punk theatre – adrenaline fuelled, wild and crazy, rough at the edges, utterly confrontational, raw and brilliant. The heightening of emotion made available through

the musical form provided a channel for the emotions of the performers, which, given the layers previously described, were heightened themselves. Harnessing such levels of emotion in performance was a risky strategy; music memory is a powerful emotional trigger that can cause relapses. *Outside Edge* does not routinely use music in its workshops, precisely for this reason. Such risks were mitigated by having the performers write original songs, by the piece's awareness of its own status as pastiche, and by the lyrics – delivered more in direct attack than direct address – dealing unswervingly with substance misuse.

Substance Misuse was a significant step, then, but it compels the interrogation of the nature and ethics of such interventions. Forum, Adrian Jackson suggests, needs the 'seduction' of a quality performance to engage its audience, but it must also create meaningful 'provocation' if it is to stimulate the audience to participate, and create change (2009: 44). If this does not occur voluntarily, and the joker creates participation through pressure, then the ethics of forum are compromised: after all, how productive is it to tackle one oppressive situation by producing another? Performances like *Substance Misuse* contain the potential to create relapse – and may thus constitute an oppressive situation in themselves. As Ian Watson suggests; the 'dual experience of the performer, as his role on the one hand and as the actor on the other' means that there is 'the potential for an actor to experience catharsis separately from his role' (1998: 311). Performing, perhaps inherently, then, carries the potential to trigger relapse. However, *Substance Misuse* created a powerful sense of *communitas* – and the performers would go on to run the work again, at Hoxton Hall the next year.

The company's responsibilities towards its performers were also addressed by replacing the post-performance intervention with members of the ensemble taking turns to present their own personal narrative of recovery to the audience, post-show. Creating transition points like this – checking in or checking out – is one of Outside Edge's standard practices of care, serving to ground the performers post-performance, and simultaneously contextualise the provocation. This practice would subsequently become integrated into the body of Outside Edge performances themselves – with performers licensed to step out of character mid-performance to give witness to recovery in the mode of direct address. This witnessing acts as a safety valve for the individual performer to decompress in performance, and also to produce a similar effect upon the audience if needed. In these moments, the performer acknowledges the influence, transforming it into narrative. This demonstrates the agency of recovery and thus acts as an influence upon all those present.

Within Fox's praxis, staging the hard facts of addiction inevitably produced provocative theatre – and this points to its ethical status. Fox stated that 'part of the power of this drama' was that 'there is no space for denial' – indeed, 'It's a denial of denial' (Reynolds and Zontou 2011: 170). The risks of provocative art are justified as they can break through the individual – and collective – wall of denial, and produce the ethical effect of undoing influence. The Outside Edge performer cannot be 'in denial', because to perform recovery is to enact a double negative – to deny denial. Denying denial links performer, art-form and audience in a performative compact, staging the tension between the individual and the social, between the fictional and the real. On

these terms, effective theatre for recovery strategies are to be found in the intervention phase of forum, musicality and autobiographical witness, as they can be modes of performance that act as ideological gestures, breaking through both individual and audience-social denial, as well as their own surface.

This is not to simply say the ends justify the means – rather, the means remain ethical if the psychological and aesthetic complexities are negotiated. What this negotiation demands in practice is mediation between the denial that is the first barrier to recovery, the denial of the actor's presence that is at the heart of mimetic representation, and the collective, social denial of the problem of addiction. One might, then, include Outside Edge's work in a range of practices that Bruce Wilshire gathers under the term 'paratheatrical' – practices that navigate problematic territory by blurring 'ethical and existential' domains in their fictions and that do significant cultural work if participants' and their contexts are not eclipsed by the fiction itself (1990: 178). Outside Edge's practice is remarkable, therefore in successfully balancing the tension of working with the transformative power of art and acting ethically.

Transforming Influence

Fox continued to experiment and used the results to reinvigorate his forum practice – creating a new piece, *Double Whammy* (2012-13) – for treatment centres, mental health settings, and prisons. Focusing on dual diagnosis – addiction and mental health conditions combined – the company created a 'musical forum' piece, utilising song to a considerable degree, and synthesising old and new. The public performances of *Double*

Whammy (Tara Arts, 2012) demonstrated the validity of this hybrid form, beyond the treatment context. At around the same time, Fox began preparatory work on two new and major public engagement projects, through which to explore yet new modes of performance – and propel his vision for theatre for recovery onto high visibility London stages. Fox passed away in June 2014, however, leaving these projects to be realised in legacy by subsequent artistic directors Cathy Sloan and Susie Miller. Sloan would direct a stage adaptation of Simon Mason’s 2013 autobiography *Too High, Too Far, Too Soon* (Tristan Bates, 2014) – and Miller, *Roxton Stories* (Hoxton Hall, 2015) – a site-specific piece exploring the chequered history of the venue and its environs.

Ultimately, what the overall trajectory of Fox’s project demonstrates is that theatre for recovery is not bound by theatrical form or convention. Rather, it is a field gathered around subjective reality and performative acts of identity construction. The actor performs and is the subject of performance; the actor is placed beyond any possibility of denial and thereby beyond influence. The actor re-claims agency – thereby influencing others to recover, or expand their understanding of addiction. This field is similar in emphasis to what Yuko Kurahashi describes as ‘narrative therapy’ – a process that allows persons to challenge the patterns of oppression in their lives by a re-authoring of experience (2004: 24). This should not, however, limit the efficacy of the practice to the individual. As Keith Humphreys’ narrative analysis of Alcoholics Anonymous members’ storytelling reveals, ‘community narratives and personal stories interact’ (2000: 504). The personal stories addicts tell transform not only themselves, but also work upon the stories others tell about addicts and addiction.

Through such re-authoring, one can interrogate, reshape and reclaim identity – and in doing so, transform both one’s individual autobiography of being under the influence, as well as broader perceptions. The past cannot be changed – but the understanding of it can be deepened. In that depth is the potential for self and social transformation in the present. Theatre for recovery provides an important setting through which to encounter and subsequently transform *the influence*. It shows that wherever or however addiction arises it need not be perpetual, and, indeed, that influence can be transformed into agency.

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¹ See Augusto Boal's *Games for Actors and Non-Actors* (London and New York: Routledge, 1992). Fox regularly used exercises taken directly from Boal's publications.

² Unless otherwise stated, Outside Edge public performances referred to in this article take place at Munster Road, Fulham, the company's base of operations in London.

³ Fox was inspired by Gitta Sereny's 1998 book of the same title, on the life of Mary Bell.