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Directing with Care: The Morality of Contemporary Theatre

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Introduction

For years, the theatre industry has promised directors a blank check when it comes to leading rehearsals and working with actors. As long as a director's creative vision justified their actions, they were encouraged to do whatever was necessary to bring out the best in their performers. Over time, this created a rehearsal culture that often enabled harm and abuse, such as actors made to relive intense trauma or to physically endanger themselves because of a director's staging demands. But with the dedicated work of forward-thinking artists and advocates, that culture is evolving. The expectation is no longer for actors to simply acquiesce but, increasingly, for directors to make healthy creative spaces. Directors are being asked to reject outdated, potentially harmful practices and pay more attention to how they treat their ensembles. This was the case in Chicago, where abuses of power led theatre artists to draft the Chicago Theatre Standards, a groundbreaking document meant to foster mutual respect and protect performers. We have also seen the rise of intimacy choreography as a practice, led by organizations that

"offer workshops and advocate for recognition and incorporation of consent-based practices in professional theatre."[1]

Meanwhile, broad terms and values have been introduced as alternatives to the director-first approach. An oft-referenced goal has been creating 'safe spaces,' defined by Dr. Mary Ann Hunter in "Cultivating the Art of Safe Space" as a space without "danger," a space which excludes "discriminatory activities," or a space where "the people, practices, and relations that exist within a safe space" are comfortable and familiar.[2] Another important milestone has been efforts to dismantle racist practices which have disadvantaged and oppressed artists of color. In 2020, BIPOC theatre creators came together from across the industry to highlight and criticize the overwhelming inequalities on and offstage that privilege white artists over BIPOC artists. Their groundbreaking letter, "We See You, White American Theater," laid bare the hypocritical practices of theatre's predominantly white leadership and demanded institutional changes to protect BIPOC creators. This led to the group releasing their "Principles for Building Anti-Racist Theatre Systems," a core tenet of which is the need to protect BIPOC artists "in white spaces and with white artistic collaborators" by ensuring antiracist policies and "interventionist practices" are implemented at every level of theatre.[3]

This outpouring of research and advocacy has upended the traditional director-actor dynamic in a variety of innovative ways. At the root of these approaches is often a shared commitment to collaborative storytelling and to centering performers' well-being. But more than sharing creative or practical similarities, these related approaches also share a moral framework.

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[1] Lindsey, Natashia, and Emily A. Rollie. "Beyond 'Yes, And…' Consent in the Theatre Arts Curriculum, On-Stage and Off." *Consent*, November 2, 2023, 106–21. https://doi.org/10.4324/9781003365082-10.

[2] Hunter, Mary Ann. "Cultivating the Art of Safe Space". Research in Drama Education: The Journal of Applied Theatre and Performance 13, no. 1 (February 2008), 8.

[3] "Principles for Building Anti-Racist Theater Systems." We See You W.A.T., June 8, 2020. https://www.weseeyouwat.com/.

Given the rise of 'consent-based practices,' the evolution of the traditional director-actor hierarchy, and the widespread embrace of collaboration, a growing norm of 'ethical caring' is the implicit moral framework of today's theatre industry. A moral philosophy first proposed by philosopher and educator Nel Noddings in 1984 and grounded in relationships, it urges us to think of ethics as what we do for people rather than objectively 'good' or 'bad' actions.

In this paper, I will explain the key ideas of care ethics and its value to the director-actor relationship, as well as what we gain by recognizing this umbrella term as the 'new' norm. Then, I will explore how this actually is not a new concept as influential theatre practitioners of the 20th Century, like Viola Spolin and Freddie Hendricks, connected with their performers and encourage their creativity through acts of care. I will also discuss how practitioners Keith Johnstone, Augusto Boal, and Katie Mitchell used their experiences with previous actors to create 'chains of caring' with future ones. Lastly, I will briefly reflect on my efforts to bring ethical caring into my rehearsals. In doing so, I hope directors will see what care can look like in practice and identify tools and techniques that may benefit their work. The variety of tools available to reimagine the traditional structure of rehearsals are not just a question of practicality. They beg the question: how should directors behave? Therefore, these distinct approaches show how theatre is not just undergoing a cultural shift, but a moral one. As this area of theatre scholarship grows and new ideas and techniques are introduced to adapt and respond to existing discourse, my hope is that by recognizing and implementing this framework, artists and scholars will be able to build off each other's ideas in pursuit of better practices.

What is Care?

If directors are to continue embracing actor-first policies, then we need to define what care is. 'Ethical caring' is not morality as it is traditionally understood. There are no absolute maxims and universal rights and wrongs. Instead, it considers moral action as satisfying the needs of someone you care for. In her 1984 book *Caring*, Nel Noddings tells us that care is relational, where connected people seek to "meet the other morally".[4] This way of thinking about ethics is intuitively felt every day, between friends, significant others, and family members. Noddings argues that we see this exchange of concern, compassion, and support so frequently because it is a necessary part of being human. She believes that relationships are "ontologically basic" and that "human encounter and affective response" are defining features of our lives.[5] When people come into contact with each other, especially on a regular basis, they naturally begin to form mutual understanding, respect, and investment.

The key to successfully caring is context. An agent engaged in moral caring considers their partner's life and unique qualities and discerns how they can best support their partner in a given situation. The same is true for successful friendships: sometimes a friend may need a shoulder to cry on and other times they need someone to offer them advice; the best course of action is dictated by circumstance. This means that care, according to Noddings, looks different from person to person and relationship to relationship. This emphasis on relationships has made care the implicit framework of contemporary rehearsals. Few disciplines are as dependent on relationships as theatre. It is no surprise that our industry has intuitively moved towards a care-based morality. For example, in "The Theatre Arts and Care Ethics," Dr. Colette L. Rabin

[4] Noddings, Nel. Caring: *A Feminine Approach to Ethics and Moral Education* (Berkely and Los Angeles: University of California Press, 1984), 4.
[5] Ibid.

conducted a case study of a theatre program at a K-8 grade school. There, teachers use a year-long theatre program and the process of devising a play to teach their students moral caring. Smith observed that "the interdependence necessary for live performance provided students with particular opportunities to begin to learn to care for one another," fostering an "intense cooperative effort" rather than "competition between students"[6].

Of the many relationships that define theatre, the director-actor relationship is one of the most prominent. Still, some directors see care-based techniques as time intensive and creatively unproductive, dismissing them as impractical. However, no one directs in a vacuum. In Robert Knopf's *The Director as Collaborator*, he argues that collaboration has the potential to ignite creative innovation:

> When the ensemble members believe in their contributions, the collaborative process generates greater energy, commitment, and creativity in the total ensemble. Encouraging every member of the ensemble to create a part of the production rather than simply to execute the director's detailed ideas not only engenders goodwill, it also inspires everyone to work toward the same end, frequently breaking down traditional barriers and preventing rifts among director, designers, and actors. In this way, collaborative directing may improve the work environment for the ensemble, and a better environment should help stimulate stronger commitment and better work.[7]

If a director wants to create a vibrant and successful final product, they need performers willing to engage in the process and who want to contribute to that end result. Introducing the framework of care makes a stronger case for those directors who think that good theatre and empathetic directing are unrelated.

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[6] Rabin, Colette L. 2009. "The Theatre Arts and Care Ethics." *Youth Theatre Journal* 23 (2), 132.
[7] Knopf, Robert. *The Director as Collaborator*. 2nd ed. New York and London: Routledge, 2017, 2.

Care cannot be faked; it takes more than just reciting words. It requires a person to meet three expectations through intentional action. First, they must consider the other person's perspective. Second, from that perspective, they must identify that person's needs. Third, a caring person must act to meet those needs as best they can. This three-step process gives directors language they can put into practice to understand and address their actor's well-being: 1) consider your actor's frame of reference; 2) if you were in their shoes, what would you need? and, 3) actively work to meet that need. Though these steps are achievable and demystify the process of caring, they require effort and intention. Many individuals unintentionally omit one of these steps. A director may recognize that an actor is in distress, satisfying step one. Instead of then considering the actors' needs from their point of view, however, the director may jump to problem-solving, working to alleviate their distress without properly understanding what they need. Thus, an actor who just needed a break or needed to move on is plunged into a new exercise, as a director mistakenly sees their mental exhaustion as a creative one.

Why Care Matters as a Framework

Despite many positive steps, our industry has yet to fully embrace actor-centered methodologies. For instance, columnist Moira Donegan notes that many prominent Hollywood stars, including Mikey Madison, Gwyneth Paltrow, and James Corden, have pushed back against intimacy coordinators, with some critics going so far as to deride them "as busybodies and scolds."[8] Meanwhile, directors persist at every level of theatre who rail against overly cautious attitudes towards performers. In her 2022 *Macbitches*, playwright Sophie McIntosh explores the cult of

[8] Donegan, Moira. "Do Intimacy Coordinators Still Have a Place in Hollywood in 2025?" *Elle*, November 25, 2025. https://www.elle.com/culture/movies-tv/a69338144/intimacy-coordinators-hollywood-interview-2025/.

personality around a male director in a university and how he abuses his authority to manipulate the young women in his program.[9]

Of course, Hollywood is not necessarily a bellwether for the theatre industry, nor is one play a statement on the majority of directors; however, these examples remind us that actor-centered practices are not self-evident and deserve a robust defense. By placing these methodologies under the umbrella of care, we allow for a more nuanced discussion and for the possibility that what actors in one community need is not the same for all.

Another challenge in advocating for care-based practices is the plurality of contrasting methodologies. In some cases, two equally viable approaches or values may conflict with each other and render unclear which approach a director should take. For example, the aforementioned idea of 'safe spaces' has been questioned by some in favor of 'brave spaces.' First coined by education specialists Brian Arao and Kristi Clemens, brave spaces "emphasize the need for courage rather than the illusion of safety."[10] While still committed to fostering positive communities where people respect and understand each other, bravery acknowledges that risks will be taken and may cross someone's boundaries. This then presents a learning opportunity for the group and fosters dialogue and personal growth. If a director valuing bravery takes risks they believe will be best for their performers, they may run afoul of safety; yet, if a director backs away from decisions out of concern for safety, they may run afoul of bravery. In other words, not every safe space can also be a brave one. But does this one or the other concept mean that only one of these approaches is 'right'?

[9] McIntosh, Sophie. *Macbitches*. New York, NY: TRW Plays, 2023.
[10] Arao, Brian and Kristi Clemens. "From Safe Spaces to Brave Spaces: A New Way to Frame Dialogue Around Diversity and Social Justice". *The Art of Effective Facilitation*, ed. Lisa M Landreman (Routledge, 2013), 141.

Further complicating this question is criticism of both these terms. In their paper "Focus on Impact, not Intention: Moving from 'Safe' Spaces to Spaces of Acceptable Risk," Professor Laura Rikard and Dr. Amanda Rose Villarreal noted that "the phrasing of 'brave space' implies that persons with marginalized identities will do more additional work" to educate people around them with privilege.[11] In turn, this may further burden artists of color and impede their ability to engage with creative processes. Even guidelines like the Chicago Theatre Standards are vulnerable to these potential grey areas. The Standards offer "communication, safety, respect, and accountability" as the overriding principles; however, how to balance four values of equal merit is not immediately clear.[12] Adhering to safety may warrant a different response to a situation than adhering to communication. Should one of these principles have more weight?

No two people are the same, so care will look different from performer to performer and ensemble to ensemble. This means that artists should be careful if they say that *all* rehearsals should be 'safe spaces' or 'brave spaces' or another variation. Although there can be value to each of these ideas, we may do actors an injustice if we commit to an approach before understanding their needs. Maybe some spaces need to prioritize safety, especially when working with vulnerable artists. Other spaces may need to prioritize bravery, especially when every actor is informed about the process and wants to take risks. Either approach can be right; care just asks that the needs of collaborators are considered without privileging personal perspectives or creative goals. Context is everything.

Lastly, caring directors may struggle to know what tools are available to help them discern, center, and address their performers' needs, thus impeding their adoption of care-based

[11] Rikard, Laura, and Amanda Rose Villarreal. "Focus on Impact, Not Intention: Moving from 'safe' Spaces to Spaces of Acceptable Risk." *Journal of Consent-Based Performance* 2, no. 1 (February 14, 2023), 4.
[12] Myers, Lori, and Laura T Fisher. "About the CTS," December 2017. https://ut.uchicago.edu/about/cts.

practices. This is especially challenging for early career directors who are still finding their voices and learning to lead rehearsals. That is why it is important to introduce directors to models of ethical caring in practice, as I will spend the rest of this paper discussing. By surveying the principles and techniques of select theatre theorists from various backgrounds, styles, and beliefs, I offer directors a diverse array of actor-first approaches they can draw inspiration from.

Spolin and Hendricks: Unlocking Potential Through Care

What makes ethical caring so valuable is also what makes it so challenging to apply: there is no one way to care. Instead of directors finding one style that works whenever they create, directors should make sure they first understand their performers' experiences, their obstacles, and their community. In other words, consider the production process, and the world, through the performers' eyes. Two artists who capture this responsibility and build on the framework of care are Viola Spolin and Freddie Hendricks. Their theories capture the principles of ethical caring and the benefits they found through their approaches. By studying them, directors may find a model of how care, when applied effectively, can unlock a performers' potential.

A theatre director and teacher who got her start working in Chicago's Hull House, Spolin championed the use of structured spontaneity and improvised exercises for actors of all experience levels. In an unpublished article, she argued that "Theater games do not inspire 'proper' moral behavior (good/bad) but rather seek to free each person to feel his or her own true nature, out of which felt, experienced, actual love of neighbor will appear."[13] Even though she

[13] Sills, Paul, "Introduction" in *Improvisation for the Theatre*, Third Edition, ed. Paul Sills (Evanston: Northwestern University Press, 1999), xi.

predates Noddings' theory, their thinking is clearly connected through a shared emphasis on relationships and empathy.

By advocating this approach, she sought to make theatre more accessible, build positive atmospheres, and help performers find their most authentic selves onstage. In the preface to her book *Improvisation for the Theatre*, Spolin makes her focus on care even clearer. She thought that actors must "see themselves and others not as students or teachers but as fellow players" who recognize that "there is no one right or wrong way to solve a problem; there is only one way - the seeking - in which one learns by going through the process itself."[14] This thinking allowed Spolin to upend traditional hierarchies and invite both creativity and respect in her rehearsals and classrooms. Like Noddings' belief in the malleability of care, Spolin's emphasis on problem-solving through 'seeking' encourages openness and understanding. In turn, she found that her performers developed a stronger ensemble when listening and collaboration were more frequent and effective.

Another benefit to this approach is that actors positively respond when they trust their director to support them. Therefore, directors who successfully care must first take steps to build that trust and foster mutual understanding with their actors. This was the goal at the center of Freddie Hendricks' creative process. A director, teacher, and actor, Hendricks founded the Youth Ensemble of Atlanta in 1990 and developed his approach through working with and empowering the city's Black youth. Hendricks recognized that his young actors "[encountered] a certain set of experiences that include discrimination and prejudices" and crafted a method of directing and

[14] Spolin, Viola. *Improvisation for the Theatre*, Third Edition, ed. Paul Sills (Evanston: Northwestern University Press, 1999), iii.

devising that reinforced their talent, beauty, and capability. In other words, he grasped their frame of reference and found a way to provide them the support they needed.[15]

In the first offering from the book *Black Acting Methods*, theatre scholars and former students Sharrell D. Luckett and Tia M. Shaffer recall how Hendricks would "tell students with clearly weak and squeaky voices they could sing," only for them to believe him and continue singing, developing strong voices in the process.[16] At other times, he would shower his young Black actors with effusive praise and remind them of their limitless talent and boundless capacity to create. Because these young artists faced systemic barriers and a society steeped in racism, they needed a teacher like Hendricks to remind them that those obstacles did not define them. Hendricks shows that trust enables care, and care enables artists to grow.

Notably, Spolin might disagree with Hendricks on his approach to praise. She held that theatre educators and directors should avoid language like 'approve' and 'disapprove' because she feared the "need for favorable comment or interpretation by established authority" would hinder a performer's growth.[17] However, Hendricks' ensembles were overwhelmingly young BIPOC artists who lacked access to theatre resources and needed to know that someone believed in their creative potential. In other words, he considered who his actors were, what community he was creating in, and specific ways to build trust that met their needs. These were three actionable steps that any care-centered director should take note of. While Spolin, given the same background, circumstances, and goals as Hendricks, may have come to the same conclusion, this difference, when used appropriately by a director, reinforces the capacity of moral caring to cater

[15] Luckett, Sharrell D., and Tia M. Shaffer. *Black acting methods: Critical approaches*. (Abingdon, Oxon: Routledge, an imprint of the Taylor & Francis Group, 2017), 31.
[16] Luckett and Shaffer, 31.
[17] Spolin, 7.

towards all actors. Different methodologies in contemporary theatre practice should not be a source of confusion or competition, but rather inspiration and strength.

Admittedly, these theories often build upon experiences with younger actors. Though not every director will find themselves in an educational setting, Spolin and Hendricks still offer important insights into the power of care in theatre. The young performers they worked with shared many of the same challenges as more professional performers, with the added obstacle of learning to trust themselves and develop their skills. Therefore, hesitant directors still unsure of ethical caring should note Spolin and Hendricks' examples; if care allowed them to inspire and uplift these students, then it is just as valuable for performers with more experience and a stronger understanding of their own needs. Spolin and Hendricks are also reminders that care is not passive. Directors must take active steps to understand their actors' needs. That is why collaboration and communication are such vibrant features of care-based methodology: they create opportunities for actors to express themselves and their perspectives, which directors can use to meet their unique, individual needs.

Johnstone, Boal, and Mitchell: 'Chains of Caring'

Determining your actors' needs can be difficult. As one might expect, simply asking someone what they need is rarely effective. Katie Mitchell suggests that in auditions, directors should "spend at least 30 minutes with each person…[to] Give them a little more time to relax" and do their best work.[18] While her intent to understand and connect with each actor before they are cast is emblematic of care, most directors, especially those with limited resources, know this is unrealistic. But if directors cannot plan until they know what needs their performers have, then

[18] Mitchell, Katie. *A Director's Craft* (London and New York: Routledge, 2008), 99.

rehearsals may never successfully take off. So how do directors address the needs of their actors/ ensemble while still accomplishing the creative work expected of them?

Noddings says we can 'prepare to care' for people we have not yet met. "Beyond the circles of proximate others are those [we] have not yet encountered" and may someday feel a sense of moral obligation towards, even if that is not today; we are linked to these individuals through "chains of caring."[19] These chains of caring are built from our past interactions with similar groups of people in similar communities or contexts. This also means that although everyone is unique, there are certain needs which many actors relate to just by identifying as such. Noddings refers to this as being "predictable in a global sense" and "unpredictable in detail."[20] Therefore, directors can anticipate what those general needs may be, while still being flexible and responsive to their eventual ensemble and unique actors. This also means that directors should want to learn about the community they are working in/a part of and whether their actors share a similar level of knowledge or background.

For younger directors this can be a bit daunting, as they have fewer experiences to build on. Even more practiced directors will encounter collaborators whose ideas or worldviews are unfamiliar. Luckily, influential theatre theories based in care are often built on personal experiences from working with generations of performers. Looking more closely at artists like Keith Johnstone, Augusto Boal, and Katie Mitchell, their distinct personal experiences and chains of caring helped them to better support their performers in unique ways.

When Keith Johnstone began directing, he relied extensively on his memories as a student and public school teacher. As a young student, he found that the education system dulled his creativity; as a teacher years later, he saw new generations of students suffering from the same

[19] Noddings, 47.
[20] Ibid, 24.

stifling atmosphere. The activities and techniques he explored in his classroom set out to "make the world blaze up again," forming the basis of his approach to theatre.[21]

One general need that Johnstone identified across groups of performers was the freedom to play. Like Spolin, he found that through guided play and structured spontaneity, people reignited their creativity and saw their environment, script, and fellow performers in new and exciting ways. He did recognize that some actors "[remained] in a terrified state," and that pushing them past their limits would be counter to their well-being.[22] But this did not dismiss their need for freedom and agency. Johnstone just found ways to meet them on their levels. By considering actor needs, much like he did with students in a classroom, he found ways to encourage them and build up their confidence. Johnstone's status games and improvised exercises, much of which are found in *Impro: Improvisation for the Theatre*, is a valuable resource for directors trying to diagnose the comfort levels of or supporting different actors who need help channeling their impulses into bold creative choices.

Another care-based theorist whose ideas were vividly defined by past experiences was Augusto Boal. Brazilian director, teacher, and activist, most famous for devising Theatre of the Oppressed, a series of theatrical forms designed to create "spaces of liberty where people can free their memories, emotions, imaginations, thinking of their past, in the present, and where they can invent their future instead of waiting for it."[23] While he studied traditional method acting as a young performer, his life as a political activist and teacher influenced his approach to theatre and its potential to advocate for change. He and his company worked with a wide range of groups including, in his own words, "slums, trade unions, and churches, and with other poor

[21] Johnstone, Keith. *Impro: Improvisation and the Theatre* (London: Methuen Drama, 1979), 13.
[22] Ibid.
[23] Boal, Augusto. *Games for Actors and Non-actors*, Second Edition, trans. Adrian Jackson (London and New York: Routledge, 2002), 5.

people who were using theatre as a means to understand their own problems and to try to find their own solutions."[24]

Boal's work was often devised, experimental, and blurred the boundary between performer and audience. At times he collaborated with professional actors, and at other points he worked with local or amateur companies in other countries. Over time, he found actors communicating a desire to "discover [their] inner selves" through theatre, because they had "fears and frustrations, hopes and desires" to share.[25] What these collaborators needed were tools to honestly express themselves in healthy ways. This led Boal to devise a series of exercises, games, and performances through which people expanded their movement vocabulary, explored real-world problems, and navigated once-painful memories they were willing to share. One of his most notable games was an exercise he called Breaking the Oppression. An actor introduces a moment in their life where they faced a type of oppression and reenacts this moment with another actor. In the second round of the game, "the protagonist does not accept the oppression," followed by "the actors [changing] roles" and playing each other's parts in the third round.[26] Boal discusses how these scenes, used to train performers in Theatre of the Oppressed, led to personal discoveries, deeper connection between players as well as understanding their surrounding circumstances.

Though he never ascribed the word 'care' to his approach, recent scholars such as Dr. Colette Rabin and Dr. Grinell Smith, in "Teaching care ethics: conceptual understandings and stories for learning," have documented a correlation between this kind of technique and the development of empathy in participants:

[24] Boal, 1.
[25] Ibid, 2.
[26] Ibid, 221.

> Along these lines, several researchers have explored dramatizing stories in the classroom. For example, Jones (2002) employed "performance studies" in her literature course for her students to experience cross-cultural role-taking. Through acting out stories and assuming roles in which her students played characters from different cultures, they interrogated stereotypes and unearthed their constructions of self and other.[27]

While Rabin and Smith do not directly reference Boal, this kind of exercise is in line with his teaching philosophy. Not only do many of Boal's games invite performers to express themselves, their views, and lived experiences in a constructive way, they also foster community and collaboration. A director whose actors need help connecting with themselves and their peers, who wants to help bridge cultural divides between performers, or whose work more closely aligns with the goals of Theatre of the Oppressed, may find Boal's *Games for Actors and Non-actors* a useful resource.

Of course, Johnstone and Boal's tools are helpful for some rehearsal settings, but not all. A rehearsal or production may call for more traditional techniques; under these circumstances, directors can still find models of care-based practices. A notable example is director Katie Mitchell's *The Director's Craft*. Though her style is based in Stanislavski's System, the language she uses to define a director's responsibility and her approach with actors evokes the framework of ethical caring. Working primarily with professional actors at well-funded venues, she found that they consistently needed stability and confidence. In rehearsals, she advises directors to "consider the things you can do to reduce" an actor's fear, since a frightened actor "does not take in information well or respond precisely to tasks."[28] While this may seem more clinical, Mitchell's observation is as much about the actor's well-being as it is about the production's

[27] Rabin and Smith, 16.
[28] Mitchell, 133.

success. She recognizes that fear is perfectly natural for an actor; if a director wants to bring out that actor's best, they should create a space without unnecessary fear.

Therefore, to not cause needless angst or uncertainty, she found it helpful to defer to actors' ideas. This includes retracting a note when "an actor strongly disagrees with your feedback."[29] To an old-school director, discussing a note, let alone allowing an actor to disagree with it, would be unheard of. However, because Mitchell is trying to meet her performers' needs, her approach treats actors like collaborators.

Another tool that caring directors may take away from her work is rigorous preparation. To best prepare herself to address her ensemble's needs, she would analyze the script multiple times and in great detail. This included putting together an exhaustive list of facts, questions, and possible, well-researched answers to those questions. She explains that "if something in the text causes you to ask a question, you can be sure that an actor will ask the same question in rehearsals."[30] Even though she would defer to an actor's idea, if they needed help finding a strong impulse or choice, she could offer one. In turn, she found that this would help her create an atmosphere of stability in her rehearsal room. Therefore, if a director finds their actors also need stability and confidence, this is one way they can prepare to care. Although this work is done in private and may never be seen in full by your performers, this too is an act of care.

This may seem like a return to the director-actor hierarchy that progressive theatre artists have been reimagining. However, this approach satisfies the requirements of care: considering the actors' point of view, identifying their needs, and acting to meet those needs. If clear expectations have been set for what the rehearsals will look like and how a director will operate, so long as their decisions are motivated by their actors' well-being, then this too meets or

[29] Mitchell, 130.
[30] Ibid, 15.

surpasses the threshold of care. Remember, there is not just one way to care. Artists like Johnstone, Boal, and Mitchell, whose ideas and perspectives vary significantly, all model care in their own ways. None of them are more or less correct; what matters is context and need. For directors putting care into practice, these artists' time-tested methods are reliable places to start.

Reflecting on Care in Practice

Admittedly, these influential theatre artists may make care seem deceptively straightforward. After all, if Spolin or Hendricks or Mitchell offers a tool, it is because it held up to years of hard work and extensive practical experiences; therefore, we assume it should work for us as well. However, these tools do not capture the trial and error that each of these artists faced in efforts to support performers. I will share two personal experiences with applying care to rehearsal. As an early career director, I have not yet developed extensive chains of caring and have made mistakes and discoveries that others may find helpful in their efforts to grow.

Subordinating my point of view to that of my performers is the most significant challenge I have faced. Some years ago, I had the opportunity to direct *Gloria* by Branden Jacobs-Jenkins. Working with a cast of undergraduate performers in an academic setting, I anticipated that much of our process would involve training their impulses. This was exciting because it meant I could use Spolin and Johnstone's games for spontaneity. I incorporated improvisation into every rehearsal, believing that it would lead those performers to make bold choices. However, several weeks in, and although they were doing a great job, their choices still lived at a similar intensity and energy. I thought I had grasped their needs, but in reality, I made a prediction based on my lived experience and assumptions. While leaning into these exercises in the first few rehearsals was not detrimental, it should have become clear that another method was needed.

Another issue with my approach was my misunderstanding that just borrowing an exercise from a care-based director did not necessarily mean I was caring for my performers. After all, it is not the games alone that led to better rehearsals for Spolin and Johnstone; those games helped them satisfy specific needs that they identified in their performers. In other words, I had no productive intention behind the games I was playing. On a production of *Hamlet*, however, I found I had the opposite problem. I worked with a team of professional performers who held substantial knowledge of Shakespeare and heightened language. The challenge I faced this time was not just elevating their already impressive work but understanding what their needs were in the first place. After all, when things are going well, it may seem as though the performers' needs are already being met, or worse, that they have none. Care is active. A director should be able to articulate what steps they are taking to uplift their performers' well-being with every decision.

I found that one rehearsal policy became particularly useful. I promised my actors early on that if they ever had a question, I would always welcome it. Because the show was more abstract and collaborative, performers began asking questions about staging ideas and character choices. This allowed me to look underneath the questions and better understand how they viewed their characters, what the world felt like to them, and areas where our thinking aligned or did not align. I also began a semi-regular ritual of checking in as a group after rehearsing the show. Borrowing this practice from a previous director I worked with, I would ask everyone to share one thing they were proud of and one they were working on, confused by, or needing help with. While I do not imagine this practice would work with every ensemble, for this particular group of actors, it became a helpful device for me to assess each performers' individual needs.

What worked with *Gloria* would not necessarily have worked with *Hamlet* and vice versa. As people, plays, and circumstances change, our responsibilities as directors evolve. And we change overtime. Committing to one style or method or interpretation without considering these changes prevents us from reaching our own potential.

Conclusion

As artists like Viola Spolin, Freddie Hendricks, Keith Johnstone, Augusto Boal, and Katie Mitchell demonstrate, ethical caring is not just useful and advisable– it is oftentimes a prerequisite to unlocking a performer's full potential. That is why care has long been at the center of revolutionary efforts to prioritize actors and is increasingly being embraced by contemporary theatre artists. With so many new actor-centered practices and methods in circulation, this paper does not wish to dismiss some and champion others. Rather, we need to reframe our thinking and recognize that any approach can be valuable, so long as it meets the conditions of care. Where two approaches differ, the question is not 'Which one is better?' The question we ought to ask is 'Which one is most helpful for this ensemble and these circumstances?'

Of course, some directors may still hold the concern that care is not practical in a fast-paced production environment. When so many theatres have short rehearsal processes and immense pressure to create commercially viable art, care may seem too time intensive. However, after surveying a fraction of care-based theatre theorists, as well as placing contemporary actor-centered methodologies under the umbrella of care, directors should realize that care is not a time investment but a moral and emotional one. Care does not prescribe certain requirements for rehearsals; instead, care ensures that the method by which directors arrive at their decisions is

one that centers the present and specific needs of their performers. No matter how long or short a process, or how large or small a cast, there is no shortage of tools for directors to practice care in each process and with each ensemble. While the work we do and the actors we collaborate with will evolve with time, for the artists we are today and the communities we call home, we should want to care as best we can.

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