

# Creating an ADHD World

An Exploration of Directing and Producing *Distracted* by Lisa Loomer

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## ABSTRACT

As a student in both Theatre and Speech Language Hearing Sciences, discovering the ways my two fields overlap is fascinating to me. One of the most significant overlaps I have discovered is to explore the way that plays deal with disorders. For example, what is the role of a theatrical production in portraying a disorder, and what is the most effective way to do this? These questions were the central focus when I produced and directed my own production of *Distracted* by Lisa Loomer. The play explores nearly every perspective on Attention Deficit Hyperactivity Disorder, and in my production, even attempts to give the audience the sensation of having ADHD. I have included an archival video of my production of the play. The following paper will analyze my artistic choices and break down the process of directing and producing this play.

## OVERVIEW

My production of *Distracted* took place in the Acting Studio of the University of Colorado at Boulder Theatre Department on Wednesday October 12<sup>th</sup> through Sunday October 16<sup>th</sup>. I directed and produced the show as a part of the university's 509 program. The 509 program is a part of the CU Theatre season each year that gives undergraduate students a chance to try mounting a full production of a play. Originally, 509 shows had a budget of \$50 and 9 lights (hence the name 509), but for my production I was fortunate to have access to 20 lights. I did, however, use a budget of only \$50 to put on my production (almost all of which went to food props). Additionally, the department granted me access to a wide variety of furniture pieces, props, and a projector that I was able to use for free.

I began my artistic process by first deciding on what play to produce and direct. I took a directing class in the fall of 2015 that made me realize I was interested in directing a show, but I did not decide to produce and direct *Distracted* until January 2016. In order to determine what play to produce and direct, I began reading a wide variety of plays from playwrights that I knew I liked. I especially read a number of plays by A.R. Gurney and Theresa Rebeck. One afternoon as I was reading *The Dining Room* by A.R. Gurney, my mind kept drifting back to a production I had seen in high school of *Distracted* by Lisa Loomer. I am not sure what reminded me of *Distracted*, but as soon as it came to my mind I knew that I wanted to direct it as a 509 production.

Once I decided on *Distracted*, I wrote a formal proposal to the CU Boulder Theatre Department Season Planning Committee. I submitted my proposal on January 11<sup>th</sup> 2016. My proposal outlined the parameters of my production including a casting

breakdown, technical needs, and my initial concept. At this point I had a basic idea of what my concept was, but I did not thoroughly develop this concept until the summer of 2016. The season planning committee approved my proposal on February 2<sup>nd</sup> 2016. I then made promotional materials for the show including a graphic that encompassed the essence of the show and a short blurb about the production. I completed and submitted these promotional materials by April 20<sup>th</sup>. Over the summer I researched ADHD and learned as much as I could about the play. Auditions were on September 3<sup>rd</sup>, I cast the show on September 4<sup>th</sup>, and we had a read through on September 6<sup>th</sup>. Rehearsals began on September 12<sup>th</sup> and continued until the play opened on October 12<sup>th</sup>. Rehearsals happened every Monday through Friday from 6:30-10:30 and on Sundays from 12-4. In this write-up I will move chronologically through my process of directing and producing

*Distracted*. The following is a timeline of the events leading to my production:

January 11<sup>th</sup> 2016- **Proposal**

February 2<sup>nd</sup> 2016- Approval of Proposal

April 20<sup>th</sup> 2016- **Promotional Materials**

Summer 2016- **Background Research** and **Play Analysis**

September 3<sup>rd</sup> 2016- Auditions

September 4<sup>th</sup> 2016- **Casting**

September 6<sup>th</sup> 2016- First Read Through

September 12<sup>th</sup>—October 11<sup>th</sup> 2016- **Rehearsals/ Direction**

October 8<sup>th</sup> and 9<sup>th</sup>- Addition of **Technical/Design Elements**/Technical Rehearsal

October 12<sup>th</sup> 2016- Opening Night (**Program Design** and **Audience Responses**)

In the following write-up I will discuss the bolded items above in detail.

## PROPOSAL

The following 5 pages are the formal proposal I submitted to the Season Planning Committee in order to propose producing and directing *Distracted* by Lisa Loomer as a university commissioned, 509 production. Many of my specific needs changed during the rehearsal process, so the proposal is not an entirely accurate portrayal of the final product, but the basic, overarching concept is still present in this first proposal. The most interesting aspect of looking back at the proposal now is to see my thoughts at the beginning of the process compared to now that the production is over.

**Season Planning 509 Application & Proposal**

University of Colorado Boulder- Department of Theatre & Dance

**Applicant Name:** (William) Kristofer Buxton

**Proposed Play/Show:** *Distracted*

**Author's Name:** Lisa Loomer

**Brief Plot Summary:**

The plot of *Distracted* centers on a mother and father (called only Mama and Dad throughout the show) as they cope with their son Jesse's rowdy behavior in school. After struggling through the hoops of modern medicine, the doctor diagnoses Jesse with ADHD (Attention-deficit/hyperactivity disorder) and from this point forward Mama has to sift through a superabundance of information from the internet, specialists, and neighbors and make some very difficult decisions about Jesse's future. Out of desperation, Mama puts Jesse on Ritalin, but Jesse struggles with the side effects. Dad refuses to believe that ADHD even exists, claiming that in the modern world everyone spends his or her life equally as distracted as Jesse. As the story builds, Dad threatens to divorce Mama for putting their son on drugs. Mama and Dad try everything, but in the end Mama comes to the conclusion that the best way to deal with her son's ADHD is to give him her attention. Interestingly, this final scene is the son's only appearance in the play. Overall the play tells this dramatic story in a very comedic way.

### **Approach/ Concept:**

At the heart of *Distracted* is the fundamental question of how to deal with ADHD in an ADHD world. For my vision of the script I would like to emphasize the information overload of the modern world and give the audience the sensation of having ADHD. The way the script is written plays perfectly to the idea of a short attention span. The play is fast paced and always shifting from one subject to the next. It even breaks some of the conventions of theatre in order to overload the audience. For instance, throughout the script Mama keeps asking the various actors onstage with her to change character mid-scene in order to help her tell the story. I love the idea of forcing the audience to keep up with the fast pace of the script.

Additionally, the script talks a lot about the distractions of technology including references to Shazam, iPhones, and television. I am brainstorming ways of integrating technology into the play. I think it would be interesting to give the audience the option of being able to be on their phones during the show and turn their ringers on loud. The show poses the question “how often do you actually stop, drop your phone, and pay attention to those around you?” By giving audience members the option of looking at their phone or paying attention to the show, I bring the idea of being distracted to a more personal level and pose a fascinating inquiry about human behavior and the nature of theatregoers. I would love to even design an interactive online journey that audience members can take throughout the show on their phones. During this journey I will have them research ADHD alongside Mama and go through the journey with her. If I do decide to play around with the audience interaction elements, I would love to write an honors thesis on the experience and based on interviews with audience members. Even if I do not choose

to integrate audience cell phone use, I plan to overwhelm the audience members with technology and give them choices of what to watch. In a perfect world I would love to use either a projector or a TV screen onstage which sometimes goes along with the story and sometimes distracts the audience. The only time this screen would be turned off is in the final scene of the play, when Mama actually pays attention to Jesse.

I believe that my concept is perfect for the intimate space of a 509, because it is experimental and utilizes the smallness of the space to create a distracted, ADHD environment. Also, this show will be perfect for me to hone my skills as a director because of the way it blends comedy and drama as well as realism and abstract elements. The abstract elements of the script will allow me to use my imagination and find captivating, unconventional ways of telling the story. It will also be valuable to learn how to coach the actors to play multiple roles and to uncover the funny and sad moments in the script. For actors this is a great piece, because it presents characters with both comedic and dramatic levels and gives some actors the chance to figure out how to play multiple characters. Also, the play deals with issues that are relevant in the lives of college students including cutting, drugs, and technology.

**Cast/Ensemble:** 1 Man, 1 woman, 1 child (The child has only one scene onstage, but occasional lines from offstage throughout the script. The script says he is 9, but I could see him being as old as 14. If there are any college actors that can even remotely pull off this age, I will use them), and 6 gender neutral roles (originally these are written as 2 men and 4 women, but I believe that gender doesn't matter for these characters)

**Production Information: (Based on present thoughts)**

**Period and/or Style of Production:** Contemporary

**Basic Costume Requirements:** 8 base layer costumes. These base layer costumes are very simple. All characters will wear either normal street clothes or slightly dressier clothes for the doctors.

Additionally, 2 of the characters play 4 characters each, but the changes are so fast that I would differentiate the characters with simple additions of accessories such as a pair of glasses for the teacher and a scarf for the waitress etc.

**Basic Scenic Requirements:** At minimum I will need a table and two chairs. In a perfect world, I would love to have either a television or projection screen to establish the locale and serve as an additional distracting stimulus for the audience.

**Number of Sets/Locales:** There are 5 different locales, however, I would establish these with different images on the television or projection screen, therefore there will be no additional sets.

PROPOSAL (continued)

**Basic Property/Furniture Requirements:** A table, two chairs, 7 shoe boxes, a purse, some Ziploc bags, 2 or 3 pill bottles, a television remote, and (if possible) a television.

**Basic Lighting Needs:** A basic wash will serve my purposes. The lighting could be another way to overwhelm the audience and make them feel like they are part of the ADHD world with more complex lights and lots of colors, but it doesn't have to be.

**Basic Sounds Needs:** I would like to have some music and ambience sounds overlapping to add extra elements for the audience to be overwhelmed by as a part of my environment.

**Please provide any other pertinent information that the Season Planning Committee should know to properly and adequately consider your proposal:** If possible I would love to have the 509 slot in the Spring so that I can audition for *Peter and the Starcatcher*.

## PROMOTIONAL MATERIALS

One of the most important aspects of producing a play is to sell tickets. I created promotional materials with the main goal of persuading the public to come to the show, while still capturing the essence of the play. The first aspect of promoting the play was to write a blurb that would tell people a little bit about the play. The department featured this blurb on the CU Theatre Department website where patrons could reserve tickets.

The following is the blurb I wrote for *Distracted*:

This smartly crafted play blends together comedy and drama as it deals with the various ways that disorders manifest in our lives. The play features a mother and father whose lives are turned upside down when their son Jesse is diagnosed with Attention Deficit Disorder, otherwise known as ADD. Jesse's mom will stop at nothing to find a solution, but the process will test her patience, her marriage, and her sanity. Ultimately, Lisa Loomer's *Distracted* poses the larger question of how to deal with ADD in a distracted, ADD world.

For the purposes of the blurb, I chose to emphasize both the comedy and drama, because I strongly believe both are present in the play and I knew that this would be a potential draw to the play. In my experience, some people seem to prefer comedies and some prefer dramas; therefore clearly stating that both elements are present in the play broadens my audience. I also tried to succinctly summarize the play and emphasize Mama's struggles that drive the play forward.

I chose to use "ADD" instead of "ADHD" to refer to Jesse's disorder in this blurb both because "ADD" is the terminology that the play itself generally uses. Additionally, this is the terminology that people use more colloquially. *Distracted* even references the

popularity of saying ADD rather than ADHD when Mama says, “The proper name is now ADHD... I’m just going to keep saying ADD because that’s what the comedians and the girl behind the checkout counter say” (Loomer 18). I used “ADD” to try to connect with a wider group of people who do not know that the official term is now “ADHD”.

The second aspect of my marketing material was to create a poster or image that captures the essence of my show. This image could be anything I wanted as long as I used only public domain sources to avoid copyright infringement. I have some experience in Photoshop so I began compiling public domain images. Finding public domain photos to use was the most difficult aspect of making promotional materials. To find all the images I needed, I had to use seven different websites and constantly change my search parameters. Ultimately, I made a collage that featured some of the major components of *Distracted*’s plot including pills and cell phones. The following image was my final product:



One of the major themes of *Distracted* is bombardment from technology and media, and so I decided to really emphasize this aspect of the script in my image. The image features a person (presumably mama or Jesse) completely buried by medication and technology. The image hyperbolizes the theme of being overwhelmed by medication and technology, and conveys the comedy and the drama that the script uses so well. I decided to use real images in my artwork rather than paintings or drawings, because I wanted to emphasize the relevance of the artwork in everyday life.

## BACKGROUND RESEARCH

### ADHD Research:

In order to create the ADHD world of *Distracted*, I found that it was important to first research ADHD and understand the characteristics of the disorder. ADHD is an acronym for Attention Deficit Hyperactivity Disorder. ADD and ADHD both refer to the same disorder, but ADHD is the most updated terminology for the disorder. The National Institute of Mental Health defines ADHD as “a brain disorder marked by an ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development.” Throughout my process of *Distracted*, I created the world of the play with this definition in mind, and I will refer to this definition later on in my directing analysis.

Using the National Institute of Mental Health’s website, I quickly learned that ADHD has a long list of potential causes, none of which are fully verified. I went on to search for formal studies on the US National Library of Medicine and National Institutes of Health. One of the studies compiled articles and research from a variety of sources and found that lead poisoning was a potential cause of ADHD, claiming that a “Blood Lead level (BLL) of less than 10µg/dL in children has been attributed to at least one type of ADHD” (Daneshparvar). Another study that was looking for a connection between Nephrotic syndrome and ADHD found that “It is likely that the symptoms of ADHD represent a final common pathway of diverse causes, including genetic, organic and environmental etiologies” (Yousefichaijan). These studies taught me that there are a number of potential causes for ADHD, both environmental and genetic. The play coincides heavily with this research, and the ambiguity surrounding the cause of Jesse’s ADHD is one of the central points of tension in the play. I found it helpful to realize just

how vague studies are about the cause of ADHD in order to help me craft Mama's struggle for uncovering the cause of Jesse's ADHD.

The most pivotal plot point in *Distracted*, even more than finding a cause for Jesse's ADHD, is finding a cure. To help me further understand Mama's journey, I set out to see what information I could find about a cure for ADHD. The results are complex and devastating. The truth is that according to the National Institute of Mental Health, "there is no cure for ADHD, currently available treatments can help reduce symptoms and improve functioning." The only treatment for ADHD only temporarily relieves symptoms, but does not eliminate the disorder. There are a wide variety of treatments to alleviate symptoms of ADHD, but the research on these treatments is highly variable.

I set out to compare various treatments, particularly Ritalin and homeopathy (two of the methods used in the play), to determine which is the most successful in treating symptoms of ADHD. One study I looked at compared results of 38 previous studies and found that methylphenidate (Ritalin) improved in teacher reported results, parent reported results, and objective, behavioral reports, but said that "given the risk of bias in the included studies, and the very low quality of outcomes, the magnitude of the effects is uncertain" (Storebø). This study acknowledged the difficulty of measuring ADHD and the room for bias in such subjective measures. The study also acknowledged side effects of Ritalin. Another study I found looked at 166 children to see the effectiveness of Ritalin over a long period of time. The results showed that the drug eventually became ineffective because of developing a tolerance to the medications (Ross). These studies were both confusing and somewhat contradictory, though both used legitimate scientific approaches.

To look at the effectiveness of homeopathy for treating ADHD, I focused on a study that took forty-three randomly selected subjects that were either given homeopathic remedy or a placebo. The results were the same between the homeopathic remedy and the placebo, therefore proving that homeopathy was not an effective way to treat ADHD (Jacobs). Another study I found, however, compared results of using homeopathy as a part of a larger ADHD treatment plan, and found that homeopathy helped alleviate children's ADHD symptoms (Rojas). Similarly to my research on Ritalin, the results of the studies on homeopathy were highly varied and contradictory.

My main takeaway from all of the research is how complex and overwhelming it is. If I had a child who had ADHD, I have no idea which approach I would use based on the research. ADHD symptoms are hard to measure and many of the results have biases. The wide variety of results helped me understand the information overload that Lisa Loomer emphasizes throughout the play. This research was helpful in giving me a feel of how Mama might have felt as she worked to figure out how to help Jesse. Mama not only has to sift through complex medical terminology, but also has to work her way through the biases and flaws of contemporary research on ADHD.

In addition to looking at scientific studies of ADHD, I also found it helpful to look at some personal perspectives on ADHD. One source that was especially helpful was a YouTube channel called *How to ADHD*. In these videos, a young woman talks about her experience of having ADHD and gives advice to others on what has been helpful for her. The overall style of the videos is quick paced with lots of fast jump cuts between thoughts. These videos also relate to the play by using lighthearted comedy to

deal with sad, traumatic problems. I shared these YouTube videos with my cast to help them understand the experience of having ADHD.

During rehearsals, I also stumbled on a documentary called *Autism: the Musical* that was very helpful in fully understanding Mama's struggles. The film is about a theatre company/camp for children with autism. I would like to stress that I am not suggesting that autism and ADHD are the same disorder, but rather that the experience of having a child with autism can share characteristics with ADHD. In the film there are interviews with many parents of children with autism, and I found a lot of commonalities between the parents in the film and Mama in *Distracted*. One of the mothers in the video said, "Does she have autism? Is she autistic?" And the response I got from the developmental pediatricians at UCLA was 'well I have blonde hair and blue eyes but that doesn't make me Scandinavian' What do I do with this information!? And I was crying!" (*Autism: The Musical*) This particular clip struck me because of the overall confusion, desperation, and passion from the mother. You could really get a feel of both the mother's suffering and sense of humor at the same time. I knew that this mother was exactly like Mama in *Distracted*. I therefore shared it with the actor playing Mama, and she found it useful in understanding her character.

OCD Research:

In addition to dealing with ADHD, *Distracted* also deals with OCD and Depression. To help me better understand these disorders, I did research on The National Institute of Mental Health's website to find basic definitions of these disorders. OCD stands for Obsessive Compulsive Disorder. The National Institute of Mental Health defines OCD as a "common, chronic and long-lasting disorder in which a person has

uncontrollable, reoccurring thoughts (obsessions) and behaviors (compulsions) that he or she feels the urge to repeat over and over.” The character Vera in *Distracted* has OCD, and so I found this definition helpful in wrapping my head around Vera’s motivating factors. Interestingly, many of the character traits that Vera has in the play do not correspond fully with this definition, which proved to be a point of tension between me and the actor playing Vera. I will address this later on in my write-up.

#### Depression Research:

The National Institute of Mental Health defines depression as “a common but serious mood disorder. It causes severe symptoms that affect how you feel, think, and handle daily activities, such as sleeping, eating, or working.” The character Natalie in *Distracted* has depression, so I found this definition helpful in understanding this character in greater depth. In addition to background research, I have many people in my life who have experienced depression that helped me craft the character.

#### Lisa Loomer Research:

Lisa Loomer wrote the script for *Distracted*, and I knew it would be important to learn a little bit about Lisa Loomer before directing the play. According to Jan Breslauer of the Los Angeles Times, Loomer is a Latin American Woman. She started out as an actor, but became a playwright when she became discouraged with how few parts there were for Latin American women. Loomer’s work frequently reflects on parenting including *Distracted* and *Motherhood Out Loud*. I could not find any information that suggests Lisa Loomer has ADHD or has direct experiences with ADHD.

## PLAY ANALYSIS

### Concise Description of the Story:

Mama struggles to know what to do to help her son, Jesse, when the doctor diagnoses him with ADHD. She tries homeopathy, Ritalin, and alternative medicine, and Mama's choices become a big point of tension between Mama and Dad. Eventually she discovers that the best thing to do to help her son is to just give him her attention.

### Given Circumstances:

#### A. Geographical Location:

- a. In the production notes at the beginning of the script, Loomer says, "the audience should feel this is happening in their own city or town." With this note in mind, I decided to set the play in Boulder, Colorado. There is nothing in the text that explicitly isolates the action of the play to one specific geographic location, and I found that Boulder was an ideal setting for the play. Boulder has a wide array of views on medicine, which emphasizes the theme of information overload in the play. In Boulder, there are many traditional medical centers and hospitals as well as alternative medicine facilities. In Boulder, Mama has a lot of different treatment options for Jesse's ADHD, which adds to her confusion and overwhelm.
- b. In addition to Boulder, Mama also goes to Santa Fe, New Mexico toward the end of the script. I had the fortunate experience of going to Santa Fe right before I started rehearsals for *Distracted*, and I instantly understood why Lisa Loomer chose to put the alternative medicine facility in Santa

Fe. While I was in New Mexico, I noticed that Santa Fe felt very isolated and foreign compared to the rest of the country. Every building in Santa Fe is made of the same tan, adobe material making it feel like a completely foreign place. For Mama, this makes Santa Fe especially disorienting and climactic as the last step in her journey.

- B. Climate: The climate of the play is not particularly significant to the plot, however I will very briefly address it here. The play happens over the course of a year, and so the climate fluctuates throughout the play. Overall, the climate is dry and warm in the summer and cold in the winter.
- C. Date: The play happens over the course of a year. At the beginning of the play, Jesse comes to school in the fall and has a new teacher, Mrs. Holly. Mrs. Holly is adamant on having Jesse tested for ADHD, which launches the play in motion. Intermission is winter break, and Mama and Dad take Jesse to the clinic in New Mexico over spring break. The play ends with summer break. This passing of the seasons corresponds nicely with the themes of the play. Winter is when everything really falls apart, and things resolve in the summer.
- D. Economic Environment: Mama and Dad live in a middle to upper class neighborhood. Money does not seem to be major obstacle for Mama's neighbors, Sherry and Vera. Mama and Dad are in the middle class. Mama has enough money for the medication and office visits, but eventually she becomes desperate and asks Dad for money saying, "I need your credit card number to get to a clinic in New Mexico that treats ADD without drugs, and if you do this, I'll never ask

- you for another thing in my life” (Loomer 50). Mama is middle class because she does not seem to obsess over money, but she does have to be aware of it.
- E. Political Environment: The only direct political reference in the script is to President George H.W. Bush when Mama says that the symptoms of ADHD are “poor judgment, trouble learning from experience, risk taking, and conflict seeking” and Dad says, “Okay, fine. Bush has ADD. Hey at least it doesn’t stop you from becoming president” (Loomer 18). For my production, I chose to change this to Donald Trump, because I wanted to update the play to modern day. Also, those characteristics are probably even truer of Donald Trump. These comments seem to oppose Donald Trump, therefore suggesting that Mama and Dad are liberal.
- F. Social Environment:
- a. The social environment centers on the overwhelming amount of technology in today’s society. The script references i-pods, shazam, and zappos.com. I changed “i-pod touch” in the script to “i-phone 7” in order to update the script into contemporary technological vernacular. There are whole scenes in the script like Mama’s final conversation with Natalie that happen over the phone.
  - b. Additionally, the script deals with how society views disorders. Mrs. Holly seems to think of disorder as something that needs to be heavily medicated or cured such as when she tells Mama, “You’re a terrible mother” (Loomer 7) for not putting Jesse on medication. Dad, on the other hand, questions whether or not ADHD even exists. Dad is responding to a

list of characteristics of ADHD when he says “Impulsivity, short attention span, risk taking—getting distracted? Those are symptoms –of childhood! Is childhood a disorder now?” (Loomer 18) Dad represents a more skeptical view of mental disorders.

- G. Religious Environment: Mama constantly repeats the St. Francis Prayer, which is a catholic prayer, but there is no other evidence of her being religious. She uses this prayer as a personal mantra that relaxes her and connects her to God. Mama is spiritual and has connections to Christianity without being blatantly Christian.

Dramatic Action:

- A. Basic Conflict: The doctor’s diagnose Jesse with ADHD, and it affects his performance in school and at home, throwing Mama’s life into disarray.
- B. Previous Action: Mama and Dad have noticed that Jesse is hyper, but they think that he is a normally developing child.
- C. Turning Points:
  - a. Dr. Waller diagnoses Jesse with ADHD
  - b. Mama decides to try Ritalin
  - c. Jesse loses all creativity, and Mama decides to take him off Ritalin and try alternative medicine.
  - d. Mama gives up on trying to fix Jesse’s ADHD and learns to accept and find beauty in Jesse’s ADHD. Several smaller turning points lead to this final discovery:
    - i. The Nurse tells Mama that Jesse is a great kid
    - ii. Dr. Karnes wants to put Jesse in a hyperbaric oxygen chamber

- iii. Sherry reveals that she is struggling with Noah's ADHD
- iv. Natalie leaves for camp, and Mama realizes that she should have given Natalie more attention.

Characters:

A. Mama

- a. Objective: Mama wants to cure Jesse's ADHD.
- b. Obstacles: Doctors and Neighbors overload Mama with information about what the correct treatment is for ADHD. She has to sift through all of this information and make life-altering decisions, while trying to manage Jesse and keep him from misbehaving and getting into trouble. Mama also has to maintain her marriage and keep Dad happy, even though he disagrees with her actions.
- c. Evolution: Mama has a promising career as an interior decorator that she gives up to take care of Jesse. She becomes set on nothing but fixing Jesse's ADHD at all costs and tries Ritalin. She realizes that Ritalin is not working for Jesse, and so in an act of desperation she tries alternative medicine. Eventually, Mama learns to find beauty in Jesse's ADHD and no longer focuses on fixing his ADHD.

B. Dad

- a. Objective: Dad wants to give Jesse a normal life.
- b. Obstacles: Dad's biggest obstacle is that Mama wants to give Jesse Ritalin and makes a big deal about Jesse having ADHD. Dad thinks that for Jesse to have a normal life he should not have drugs.

- c. Evolution: Dad starts the play pretty content with his son's behavior. He fights against Mama's desire to medicate Jesse. When Mama puts Jesse on Ritalin, he threatens to divorce her. Dad reconciles with Mama when he sees that she is making so much of an effort to help their son. Dad achieves his objective when Mama takes Jesse off of Ritalin.

#### C. Jesse

- a. Objective: Jesse wants to please his family.
- b. Obstacles: Jesse has ADHD, and as a result, he acts out in ways that he has difficulty controlling. Jesse's tantrums get in the way of him pleasing his family.
- c. Evolution: Jesse starts the play by obeying Mama's wishes not to come onstage. He tries to be good, but struggles to focus on his objective. Eventually, Jesse talks Mama into letting him come onstage, and he is able to really connect with Mama.

#### D. Mrs. Holly

- a. Objective: Mrs. Holly wants to maintain order in her classroom.
- b. Obstacles: Jesse constantly misbehaves and causes chaos in class.
- c. Evolution: Mrs. Holly decides that the best way to restore order in her classroom is to recommend to Mama that Jesse be tested for ADHD. She insists that Jesse has ADHD and tries to convince Mama to give Jesse Ritalin. She even recommends Jesse to Special Education in order to push Mama into trying Ritalin. When Mama tries Ritalin, Mrs. Holly achieves her goal and gains order in the classroom once more.

E. Dr. Waller

- a. Objective: Dr. Waller wants to mend her broken relationship with her husband.
- b. Obstacles: Mama takes up Dr. Waller's time and attention by pushing her to focus on Jesse's ADHD.
- c. Evolution: Dr. Waller starts out by resenting Mama for using up her time, but Dr. Waller learns to value Mama and finds a sincere interest in Jesse's case.

F. The Nurse

- a. Objective: The nurse wants to comfort Mama and Dad.
- b. Obstacles: Mama and Dad are very depressed and hard on themselves when the nurse meets them.
- c. Evolution: The nurse meets and loves Jesse. She mentions to Mama and Dad that he is a great kid. When Mama and Dad act shocked, the nurse has to explain what makes Jesse great and comfort the struggling parents. She successfully reminds them of their love for Jesse.

G. Dr. Zavala

- a. Objective: Dr. Zavala wants to prove his worth as a new doctor.
- b. Obstacles: Dr. Zavala has to interact with Mama and Mrs. Holly who challenge him and bring personal matters into the methods he was taught to use in medical school.
- c. Evolution: Dr. Zavala starts the play as a very new doctor who has not fully figured out how to work with clients. He eagerly and warmly

approaches Jesse's case, but eventually Mama's reluctance infuriates him. He convinces Mama to put Jesse on Ritalin, and eventually Mama decides to stop taking Jesse to Dr. Zavala.

H. The Waitress/ Waiter (In my production I gender bent the waitress to be a waiter)

- a. Objective: The waiter wants to watch the football game on television.
- b. Obstacles: The waiter has to work as a waiter during the football game he wants to watch.
- c. Evolution: The waiter initially tries to focus on waiting on Mama and Dad in spite of the game on the television, but eventually his desire to watch the game takes over, and he gives up completely on being a good waiter.

I. Carolyn/Carl (In my production I gender bent Carolyn to Carl)

- a. Objective: Carl wants to cure his daughter's autism.
- b. Obstacles: Modern medicine has no cure for autism.
- c. Evolution: Carl takes his daughter to a clinic that uses alternative measures. He has success with alternative medicine and tells Mama about it.

J. Daniel Broader

- a. Objective: Daniel Broader wants to connect with other people.
- b. Obstacles: Daniel does not know how to talk about anything beyond homeopathy.
- c. Evolution: Daniel Broader starts the play lonely and desperate. Mama takes interest in him precisely because she wants to know more about ADHD and homeopathy. Daniel is able to connect with Mama by talking

about the only thing he knows how to talk about, but then Dad gets in the way and Mama stops going to Daniel Broader's office.

#### K. Allergist

- a. Objective: The allergist wants to alert Mama of Jesse's allergies.
- b. Obstacles: The allergist constantly has terrible allergies that keep him from communicating with Mama.
- c. Evolution: Eventually, the allergist overcomes his fits of sneezing to alert Mama to Jesse's dust allergy.

#### L. Dr. Jinks

- a. Objective: Dr. Jinks wants to put Jesse on Ritalin.
- b. Obstacles: Mama and Dad do not want to put Jesse on Ritalin.
- c. Evolution: Dr. Jinks convinces Mama to put Jesse on Ritalin, but then he has terrible side effects. Dr. Jinks tries to persuade Mama to change the dosage and keep trying Ritalin, but Mama ends up ignoring him.

#### M. Dr. Karnes

- a. Objective: Dr. Karnes wants to make money.
- b. Obstacles: Mama and Dad are skeptical of Dr. Karnes' program for curing ADHD.
- c. Evolution: Dr. Karnes convinces Mama and Dad to put Jesse in his program for curing ADHD. Mama and Dad eventually see through Dr. Karnes' act and withdraw Jesse.

#### N. Sherry

- a. Objective: Sherry wants to help her children overcome their disorders.

- b. Obstacles: Noah has persistent ADHD, Natalie does not stop cutting her wrists as a part of her depression, and Mama scrutinizes Sherry for her choices.
- c. Evolution: Sherry pretends to be perfectly happy and confident. She even tries to talk Mama into giving Jesse Ritalin, because that is what she gives her son. Sherry loses her cool in the end of the play and reveals how much she is suffering and how hard she is trying to be a good mother.

#### O. Vera

- a. Objective: Vera wants to connect with others.
- b. Obstacles: Vera's OCD stops her from being able to have physical contact with her neighbors, and her attempts to connect become awkward.
- c. Evolution: Vera tries so hard to connect with Mama and Sherry, but they treat her terribly. Vera watches Mama and Sherry tear their lives apart, and in the end realizes she wants nothing to do with Sherry and Vera after all.

#### P. Natalie

- a. Objective: Natalie wants to talk to someone about her feelings and problems.
- b. Obstacles: Sherry and Mama are too distracted to pay attention to Natalie.
- c. Evolution: Natalie parallels Jesse throughout the play. Natalie regularly meets with Mama and tells her everything. Natalie even gives Mama valuable advice on how to help Jesse. By the end of the play, Mama becomes so focused on Jesse that she ignores Natalie. Natalie is devastated and attempts suicide (this is not directly stated in the script, but I believe

this is what happens). Sherry sends Natalie to a boot camp to try to keep her safe.

#### Language:

The language of *Distracted* fits the ADHD world of the play. Loomer jumps around from one thought to the next very abruptly. For example, Mama will be focused on one task and abruptly jump to something different. One moment that highlights this is when Mama says, “I wonder if I should just sneak in a little work for my one freelance client—but decide to call that doctor about Jesse instead” (Loomer 5). Loomer frequently uses a dash to separate thoughts and to highlight the abrupt beat shifts within the script. As I worked with my actors on the script, I made sure to highlight these abrupt switches.

As a part of communicating the experience of having ADHD, the language of *Distracted* simultaneously attempts to overwhelm the audience with information, while clarifying complex terminology. A key scene to demonstrate this duality is Scene 13, where Dr. Jinks recommends Ritalin to Jesse. One example where the language clarifies complex terminology is when Dr. Jinks talks about the “executive control center,” and Mama compares it to “the government of the brain” (Act 2 page 1). Mama frequently uses straightforward metaphors to help the audience understand complex terminology. In this way the play directly educates the audience about ADHD.

Other moments attempt to overwhelm the audience such as when Dr. Jinks lists the drugs that may be necessary to treat ADHD. In this list he includes Ritalin, Clonidine, and Tenex. Lisa Loomer lists the drugs that may be necessary in order to overwhelm the audience with complex information, without really caring about the audience understanding the details of each drug. This information overload simulates the way that

Mama feels as she receives so much information. The overload of information also adds to the distracting, ADHD environment of the play.

Loomer also brilliantly attempts to overwhelm the audience and clarify important points in the same thought. For example, in scene thirteen, Dr. Jinks lists a variety of statistics saying, “thirty five percent of kids with ADD never finish high school. Forty-five percent of males with ADD are arrested for a felony before the age of sixteen, and fifty to seventy percent of the prison population has some form of ADD” (Loomer 35). This list of statistics educates the audience about ADHD, while simultaneously overloading the audience with complex information. This text paradoxically sets out to educate and confuse the audience at the same time.

Lisa Loomer is very deliberate about when she uses the word “drug” versus “medication.” Mama, for example, refers to Ritalin as a drug in the beginning of the play when she shouts, “In no universe am I putting my child on drugs” (Loomer 16). Mama expresses her negative opinion of Ritalin by referring to it as a drug. The word “drug” has a long list of connotations that connect it to criminals and delinquency. Mama therefore affirms that she sees Ritalin as something associated with criminals. At a major turning point in the play, Mama is talking with Dr. Jinks and says “and these drugs—sorry medications—can cure ADD” (Scene 13, 35). Mama makes a major shift in the way she views Ritalin and no longer refers to it as a drug. Shortly after this scene, Mama puts Jesse on Ritalin. The terminology Mama uses to refer to Ritalin shows her shifting opinion. Other characters, like Dad, always use the word “drug” to refer to Ritalin to show his consistent opposition to it. I was careful to point out this use of terminology to my actors to help them figure out their point of view in each moment.

One of the other fascinating aspects of the language is that Loomer frequently breaks the fourth wall. Mama, for example, constantly acknowledges that she is in a play. One example of this is when Mama says, “I am keeping him offstage because, well... I don’t think the stage is a particularly healthy place for a child” (Loomer 11). Mama’s choice to keep Jesse offstage for the majority of the play demonstrates her inattention toward Jesse. She is so caught up in trying to cure Jesse’s ADHD that she does not even allow him to be a part of his own story. In this moment, Mama claims that she keeps him offstage to help protect him, but it also may have something to do with her being too ashamed to let the audience see him. The beauty of this choice is that it makes Jesse’s entrance at the end especially significant. In the end of the play, it becomes more realistic and slower in pace to show Mama’s new attention and love for Jesse.

## CASTING

I was fortunate to cast the show as a part of the CU Boulder Theatre Department Fall Season. During auditions, students performed a one-minute contemporary monologue and a one-minute Shakespeare monologue. If I saw something in their audition that fit a character from *Distracted*, I called them back. During callbacks, I had the actors read scenes from *Distracted* to see if they fit the parts in the show. At auditions, CU students were auditioning for my show as well as CU Boulder's productions of *Twelfth Night*, *44 Plays for 44 Presidents*, and *Servant of Two Masters*. When we cast the shows, I had to compete with these productions to acquire my cast members, which proved difficult, as we were initially interested in many of the same actors.

For the role of Mama, I chose to cast Nea Haberman. I knew that I would need someone with a lot of skill and experience to play Mama, and Nea was a senior who I believed had a lot of potential. I had only seen her in childish roles before, but I was amazed with how mature she was in callbacks. Nea also stayed at the end of callbacks to read extra scenes, showing me that she would be passionate and committed to the project.

For the role of Dad, I chose to cast Bennett Cross. Bennett was completely new to me, but he was very professional in callbacks. I was impressed with his ability to play both stoicism and dynamic levels at the same time. He also was well prepared for callbacks and very pleasant to work with in rehearsals.

The actor who played Jesse was Sam Cox. As seen in my proposal, I debated a lot about how to cast Jesse. I wanted the final scene to be as realistic as possible. I therefore wanted to find an actor who looked young enough to play a nine-year-old, but I knew that

this was not likely. I seriously debated casting a child in this role, but ultimately I decided that I should avoid taking away roles from students in a production that was put on through the university. Then I realized that a college age girl had the potential to pass for a young boy in appearance and voice. Sam Cox was perfect because she looked young, and with some makeup, was able to look like a boy.

The actor playing Dr. Waller, Mrs. Holly, and Nurse was Liz Williamson. Liz is a dear friend of mine and was the most experienced actor in my show. In the past, I have only seen Liz play serious roles, and I knew it would be a good challenge for her to play these comedic parts. I also knew that Liz would have no problem handling it.

I cast Zack Heygood in the role of Dr. Zavala, Waiter, and Carl, because he very successfully handled the complex language in the callback. Zack was able to find complexities in a seemingly straightforward doctor. I also cast him because I knew that he really wanted my show and that he would be passionate about doing the work.

I cast Alex Rosenthal in the role of Dr. Jinks, Allergist, Daniel Broader, and Dr. Karnes, because in the callback he had terrific comedic timing. Alex also demonstrated an ability to play multiple characters and was very interested in being in my show. Alex proved to be very professional in the rehearsal process, and he was the first one to memorize his lines.

One of my greatest difficulties in working with Alex was finding an honest portrayal of ADHD. Alex played one of the main characters with ADHD in the play. I wanted my production to portray the reality of ADHD while still being entertaining and theatrical. Alex had a general tendency to go too over-the-top when he was playing the character with ADHD. When Alex went too far, it turned into a caricature of the disorder.

Alex and I worked together to balance the high-energy nature of ADHD with the realities of the disorder to craft an honest portrayal of ADHD.

Cassidy Knutzen played the role of Vera. I cast Cassidy because she was an actor that I believed had a lot of potential. In the callback, Cassidy handled the social awkwardness of Vera better than any of the other students. Cassidy also seemed very committed to the project. During rehearsals, however, Cassidy was surprisingly indifferent. She got the work done, but she was unfocused and never went above and beyond. I found out later that Cassidy had decided during the middle of the semester that acting was no longer her main interest. After the show, Cassidy left CU Boulder and began to pursue nursing. Keeping Cassidy engaged in rehearsals was challenging, but ultimately I was happy with Cassidy's performance in the play.

I cast Kayleigh Bizarro in the role of Natalie because she was exactly like her character in real life. Kayleigh handled the role of Natalie very naturally and she brought so much passion to the show. Kayleigh was pleasant in callbacks and rehearsals, and the biggest thing I had to work on was finding beat changes to keep Natalie from sounding one note throughout the show.

Casting Brittney Lafonde in the role of Sherry was my most difficult decision, because so many people had been claimed by other shows. Brittney did not have much experience in acting and I was reluctant to cast her, but she became the only feasible person to cast. In the end, Brittney was one of the greatest joys of the rehearsal process. Brittney made more improvement than anyone else, and I enjoyed coaching her and teaching her the basics of acting.

As one final note, I would like to discuss the relevance of disorders in casting.

As I was casting the show, I allowed the actors to write me notes to provide any additional comments. One of the actors mentioned on a private note to me that they had OCD. I decided to cast this actor because they had a lot of talent and I figured it would be interesting to have an actor with OCD. In *Distracted*, Vera has OCD, and I figured that the actor with OCD could consult me on how to build the character of Vera.

During the rehearsal process, the actor with OCD was never happy with the way that Lisa Loomer portrayed the disorder in the play. Vera is a very socially awkward character, and the actor with OCD insisted that social problems like that are not characteristic of OCD. I struggled to find a balance between feedback from this actor and the content of the play itself. I did not want to offend the actor with my portrayal of OCD, but I could not help the way that Loomer portrayed the character in the play. Eventually, I had to re-think the character and justify the social awkwardness with germaphobia. I came up with the idea that Vera wanted nothing more than to have physical contact with another human being, but every time she tried to touch another person she went into a panic attack. These panic attacks justified Vera's behavior, and satisfied the actor with OCD as an honest portrayal of the disorder.

## DIRECTION

I have never read a play that explores a disorder as thoroughly as this one, and so I knew when I set out to direct the show, I had to figure out how I could connect to the ADHD world of the play. I personally do not have ADHD, but reading the play made me so empathetic toward Mama and Jesse. I wanted the audience to experience this empathy, and so I attempted to give the audience the feeling of having ADHD. To help the audience empathize with Mama, I knew I would have to work hard with my leading actor to find honesty and strength in Mama's journey. Ultimately, the central statement that defined my production was the idea of finding beauty in chaos, or as I liked to say throughout the rehearsal period, a beautiful mess. My directing of *Distracted* therefore focused on simulating the experience of having ADHD, finding the truth and intensity of Mama's journey, and creating beauty out of chaos.

### Simulating ADHD:

In order to simulate ADHD, I knew I first had to do a lot of research on ADHD and its defining factors. As I discussed earlier, The National Institute of Mental Health defines ADHD as “a brain disorder marked by an ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development.” I took a systematic approach to simulating the disorder by breaking down this definition into smaller parts. I found where each component of the definition was present in the play and then explored how I could emphasize it in my direction of the play.

The first component of ADHD's definition is inattention. According to The National Institute of Mental Health, the inattention component of ADHD refers to when “a person wanders off task, lacks persistence, has difficulty sustaining focus, and is

disorganized.” In the script, we initially see this lack of focus in Jesse’s behavior. In the first scene Mama makes eggs for Jesse but then explains that Jesse “changes his mind. He gets Cocoa Crispies, and after he has filled it too high with milk, and spilled it on the floor, he finds a rocket balloon, and, instead of eating, he gets...distracted” (Loomer 2). Jesse constantly switches his focus from one task to another, showing the severity of his inattentive behavior. Mama even connects the title of the play to Jesse’s inattentive behavior by describing him as “distracted.” The word “distracted” is synonymous with the inattention component of ADHD.

As the play continues, the audience sees that inattentive behavior is present not only for Jesse, but also for many other people in Jesse’s world. Mama, for example, demonstrates inattentive behavior in Scene 5 as she is driving home. During this scene, Mama talks on the phone, checks the news, reaches for an American Express bill, and drives all at the same time (Loomer 17). Mama shifts focus rapidly from one task to the next, and as a result, she almost gets in several accidents. Mama is just as guilty of showing symptoms of inattention as Jesse. Lisa Loomer points out that inattention is not only a part of ADHD, but also a part of most people’s everyday lives.

The brilliance of *Distracted* is that inattention not only affects the characters in the script, but also affects the actors playing these characters. In Act 2, Scene 1, the script says that the “Actor Playing Jinks” breaks character and as himself says, “I got to stop. You think I would even remember my fucking lines if it weren’t for Ritalin” (Loomer 37). Loomer breaks the fourth wall and shows that even the actors in the play have problems with inattention. This choice points out that inattentive behavior is not isolated to the world within the play, but also is a major factor in the society of the audience.

In my production of *Distracted*, I chose to add another level of inattention that continues Loomer's breaking of theatrical conventions. I decided to direct the actors to stay onstage for the majority of the show. While the actors were not in their scenes, they were sitting around the perimeter of the stage distracted from the action of the show. Liz Williamson, for example, spent her time coloring in a coloring book. Cassidy Knutzen, spent the show texting and listening to music on her phone. This choice further demonstrated the inattention of the actors and evoked inattentive behavior in the audience. Having the actors working on other tasks served as a distraction for the audience. The audience was able to test the presence of inattention in their own lives by seeing how much the actors on the periphery distracted them from the central focus of the story.

The second component of ADHD is hyperactivity. The National Institute of Mental Health describes the hyperactivity component of ADHD as when a "person seems to move about constantly, including in situations in which it is not appropriate; or excessively fidgets, taps, or talks." One of the major places where Loomer puts hyperactivity into the script is through Mama's descriptions of Jesse. Early on in the play, Mama says that "Jesse gets his pajamas on after doing a little dance in his underwear pretending to be a rapper, and checking the date off in his calendar... and playing earthquake" (Loomer 16). Based on Mama's description, Jesse never seems to stop moving thus demonstrating his hyperactivity. Loomer also puts hyperactivity into the script through stage directions that describe the movement of the characters. In Dr. Waller's office, for example, Loomer says, "Dad's foot starts to shake" (Loomer 24).

Loomer has several moments where she describes the hyperactivity of the characters through descriptions of motion.

As I was directing the play, I gave each character some form of hyperactivity. I worked with each actor on discovering an individualized movement vocabulary or set of over-the-top physical behaviors. One example of this was in my work with Alex Rosenthal as he built the character of Daniel Broader. Alex and I started the process by thinking about Daniel's need for love and attention. We decided that the animal that most closely related to the character was a dog. We then watched videos of dogs moving and crafted Daniel Broader's movements based on these videos. Ultimately, Daniel moved in short bursts with slow actions in between. I made sure that whenever Daniel Broader was onstage he was actively using these motions to emphasize the character's hyperactivity.

In order to simulate hyperactivity, I forced the audience to constantly shift their focus from one side of the stage to the other. The acting studio, where the play occurred, is an intimate space and shockingly wide. The space has flexible seating and so I got to choose how to configure the seats. I chose to use the full width of the space with a few rows of seats along the largest wall. I made sure to use the entire width of the stage as Mama moved from place to place. My blocking used the metaphor of a pinball machine. I wanted Mama's movements to parallel a ball in a pinball machine. I directed her to move rapidly from one side of the stage to the next as she went from place to place. I designated small regions of the stage for each locale. When Mama switched scenes, she would move from one isolated area to another. Mama's constant movement across the width of the stage forced the audience to follow her and physically shift in their seats

every time Mama switched scenes. The result was that the audience was hyperactively moving during the entire show.

The final aspect of ADHD present in *Distracted* is impulsivity. The National Institute of Mental Health defines impulsivity as when “a person makes hasty actions that occur in the moment without first thinking about them and that may have high potential for harm.” In Loomer’s script, Mama demonstrates impulsivity when she abruptly shouts at Jesse, “YOU’RE RUINING MY FUCKING LIFE” (Loomer 29). In this moment, Mama spontaneously swears at her nine-year-old son. Immediately afterward, Mama apologizes to the audience and makes it clear that she does not actually hate Jesse. Mama loses her temper and speaks out on impulse without thinking about the consequence of her words.

In my production of *Distracted*, I emphasized impulsivity by giving the audience the choice of disengaging with the play. For example, during the restaurant scene, I chose to have a football game playing in the background during the entire scene. The audience had to make a split second decision about what they were going to watch. After the show I had several audience members tell me that they impulsively decided to watch the football game instead of the action in this scene. They also said that they regretted this choice, because it caused them to lose track of the play. Just like the institute’s definition of impulsivity, the audience made a hasty decision to watch the football game and then suffered the consequence of being lost in the play. Having the football game playing also connected to the inattention component of ADHD.

Initially, I was going to emphasize impulsivity even more by allowing the audience to make the decision to be on their phones during the show. I even brought this

up in my initial proposal. I decided not to allow cell phone use in the end, because I became too focused on the other components of the show to worry about dealing with cell phones. In hindsight, I regret not trying out my initial concept and allowing cell phone usage.

In addition to creating an ADHD world, I also broke my conventions of simulating ADHD when Jesse went on Ritalin. When Mama chooses to put Jesse on Ritalin in Act 2, Jesse become attentive and no longer shows the symptoms of ADHD. I decided that it would be interesting for the audience to no longer experience my simulation of ADHD at this point, as if they too had gone on Ritalin. To eliminate the components of inattention, I had all of the actors onstage suddenly stop what they were working on and focus on Mama. I eliminated hyperactivity by creating stillness. I put the action during these scenes right at center stage without big movements across the stage. Lastly, I eliminated impulsivity by getting rid of other options for the audience to observe. The result of this scene was a haunting contrast compared to the rest of the play that connected the audience to Jesse's journey of having ADHD and then going on Ritalin.



The actors intently watching Mama during the part of the show where Jesse is on Ritalin

### Mama's Struggles

Mama's journey is the place where I connected the most to the content of the play. I see so much of my own mother in Mama, and Mama's journey parallels my own mother's journey. When I was in middle school, I faced a wide variety of medical problems including asthma, vocal chord dysfunction, vocal nodules, and constant viruses. Similar to Mama, my mom took me to many doctors and specialists, but nobody could pinpoint what exactly was wrong with me. We tried medications and even surgery, but still I was sick. Just like Mama in the play, my mom eventually decided to try alternative medicine. I spent one entire summer going to a chiropractor every day of the week. In *Distracted*, Mama gives up on alternative medicine when they want to put Jesse in a hyperbaric chamber. That summer, I actually went into a hyperbaric chamber several

times. My mom was willing to try anything, and I will be forever grateful to her for all the time and effort she gave in trying to make me feel better. Finding truth and passion in Mama's journey became a central part of my directing process because it was so personal to me.

The main way that I crafted Mama's journey was through acting work with Nea Haberman. I kept working with Nea to find ways that she connected with the material, and I constantly changed her blocking to find what was natural for her. I also shared a lot of my research with Nea. One of the pieces of research that Nea found most useful was the video of *Autism the Musical*. Ultimately, coaching Nea came down to reminding her to constantly fight for her objective of curing Jesse.

In terms of blocking and direction, I helped with Mama's journey by manipulating the other actors onstage with her. The actors that were sitting around the perimeter of the stage for the entire show became a Greek chorus that I used to reflect the pressures of society. In the scene where Jesse goes on Ritalin, for example, I directed the actors to focus in on Mama. A part of this decision was to break my convention of the ADHD world of the play, but this choice also raised the stakes for Mama. In this scene, Mama not only had to deal with Jesse and his loss of personality, but also, she had the constant feeling of being watched and judged by the rest of society. I took this negative attention from society one step further when the fire alarm goes off. The script of the play says that Jesse makes the alarm sound by shouting "ENH-ENH-ENH" (Loomer 40), but I chose to have the entire cast make this sound. The result was a huge wall of shrill sounds that emphasized Mama's overwhelm and guilt.

I also aided in crafting Mama's journey by having each member of the company leave the stage at a certain point near the end of the show. The choice to have the company leave the stage served multiple purposes in my production. For one, it served the purpose of making Mama seem more alone during her most desperate moments at the end of the play. When she returns to the alternative clinic in New Mexico as a final act of desperation, for example, Mama and Dad are the only ones onstage. Mama looks for an actor to play Dr. Karnes as she calls out "Dr. Karnes—Dr. Karnes" (Loomer 49), but everyone has abandoned her. Mama's isolation onstage adds to the lost and desperate emotions she experiences in the end of the play.

Additionally, my choice to have everyone exit helps Mama with her final realization that she needs to pay attention to Jesse. In the script, the final conversation between Natalie and Mama has Natalie coming onstage in a new outfit, but I chose for Natalie to have the conversation from offstage. My reasoning for this was to draw a parallel between Natalie and Jesse (who has been offstage for the entire show). In the script, Mama finds out that Natalie is gone because she neglected her, and this makes her realize that she needs to stop neglecting Jesse. By having Natalie offstage, I emphasized the absence of Natalie and helped motivate Mama's final decision to bring Jesse onstage.

Finally, my decision to have all of the actors in the background exit before the final scene added to the realism of the final moment of the play. As I discussed during the language section, Mama spends a lot of the play breaking the fourth wall and referring directly to the audience. By contrast, I wanted the play end with complete realism as Mama allows Jesse to come onstage. The final moment of the play no longer uses

theatrical conventions, but rather is real life; therefore it was important for me to get rid of the actors in the background.



Mama alone onstage with Jesse at the end of the play

### A Beautiful Mess

Throughout the play, Mama goes through the five stages of grief. According to Dr. Kübler-Ross, the five stages of grief are “denial, anger, bargaining, depression, and acceptance.” As Mama goes through each of the stages of grief, she becomes more and more desperate to cure Jesse’s ADHD. To emphasize Mama’s desperation and progression through the stages of grief, I wanted to create a physical mess onstage. I wanted the mess to be a reminder of all the struggles Mama had endured as well as a force that Mama could interact with as she went through the five stages of grief.

Throughout the play, Mama uses countless tactics to try to treat her son’s ADHD. When each tactic fails, Mama becomes slowly more downtrodden. To emphasize the

weight of each attempt, I decided that the stage should be littered with some object that represented each strategy. For example, when Dr. Zavala suggested a therapy using poker chips, I had all of the actors around the periphery throw poker chips into the space onstage. Similarly, when Mama chose to put Jesse on Ritalin, I had the actors around the periphery throw pill bottles into the space. As items accumulated in the center, the space got messier and messier, adding to Mama's overwhelm and serving as a visual reminder of all the previous attempts.

The way Mama interacted with the mess onstage reflected her stage of grief. The first objects in the mess were a series of books on ADHD. At this point, Mama was in denial of Jesse's ADHD, therefore I made sure that Nea barely acknowledged the books scattered around the stage. When Mama enters the anger stage of grief, however, the stage was more crowded with various items. I directed Nea to kick the items around and throw them around in a fit of rage during this part of the play to reflect her stage of grief. When Mama enters the bargaining stage, I directed Nea to try to clean the mess and organize it. This especially came into play during her conversations with Sherry and Vera who use the mess onstage to criticize Mama. When Mama enters the depression stage, she is at rock bottom. At this point in the play, I directed Nea to sit down in the mess and stop trying to fix it. Mama sees the mess around her as a reminder of her defeat. Then in the final moments of the play, Mama learns to find beauty in the mess around her as she enters the final stage of acceptance. Mama remembers in this final stage that Jesse is more than just a disorder. Mama loves Jesse for his humanity and even comes to find beauty and acceptance in Jesse's disorder. The mess onstage in my production

represented Jesse's disorder and showed Mama's changing perspective on Jesse's ADHD.



Notice the messiness of the stage in the image above after the actors had thrown in books and boxes.

## REHEARSALS

In rehearsals, I crafted my directing concept and applied my ideas about the show to the physical action of the actors onstage. In the following, I will give a broad explanation of what I worked on each week of rehearsals through a rehearsal journal, and then I will insert a rehearsal calendar that explains very briefly what I worked on each day.

Rehearsal Journal:

Week 1:

During the first week of rehearsals, I started by blocking Act 1. Once I had blocked this Act, I did a run through to see how it was coming. Then I did the same with Act 2. By the end of the first week, I had the entire show blocked. At this point, I had not yet come up with the idea of having all of the actors onstage for the entire show. My concept initially centered on creating chaos for Mama as she moved chairs around onstage. I had a configuration of chairs for each locale of the play, and I put Mama in charge of moving the chairs from each configuration. I liked this idea initially, because it put Mama in charge of not only helping Jesse but also in charge of keeping the play going. Throughout this version of the play, Mama struggled keeping up with the scene changes and the set got messier and messier. Then in the end, I wanted Mama to come to accept the mess.

Week 2:

After doing a run through of each act during week 1, I moved on to working trouble spots. I re-blocked several awkward moments, and I began to coach the actors. I ran through the show several times to solidify my blocking and choices. On Friday,

September 23<sup>rd</sup>, my advisor Dr. Cecilia Pang came in to watch a run through and give notes. After talking with Dr. Pang, I realized that I needed to re-block the entire show. The idea of moving chairs from one locale to the next did not achieve my concept of finding beauty in chaos and detracted from the action of the play. Mama never stopped moving chairs long enough to focus on her objective or the heart of the play, and so I decided to cut out all but two of the chairs. At this point, with the help of Dr. Pang, I came up with the idea of having the actors onstage throughout the show. I also came up with the idea of having them throw objects into the mess onstage. On the Sunday after Dr. Pang saw the show, I began applying my new ideas about the play.

Week 3:

During week 3, I re-blocked the entire show to fit my new concept. Some of the basic actions were still present in the updated version, but almost every scene had some large changes. I ran the show after re-blocking on Monday September 26<sup>th</sup>. I noticed huge improvements. I also spent whole chunks of rehearsal doing individual character work with the actors. For each character, I established a movement vocabulary and broke down the text to help them better understand their characters.

Week 4:

I did a run through each night of week 4, followed by giving notes to the actors. In notes, I explained what I needed the actors to change to make the show better. Then on Saturday and Sunday of week 4, we added technical elements to the show.

The following is a sample of what one night of notes looked like:

Notes from September 26<sup>th</sup>:

Nea- More breath on opening prayer

Nea- Good frustration at the beginning

Sam- Really shout “Fucking”, we can’t hear you

All- Acknowledge if a sound cue goes wrong in a performance

Liz- Nice focal points on phone call

Liz- Try dropping the phone and groaning and then shift to a pleasant “yes”

Bennett and Nea- Take a step out on classroom scene, not a straight line

Liz- Bigger on you’re a terrible mother

Zack- “Reserved” needs to be more cautious

Bennett- Frustration needs to come faster

Brittney- Bring your gestures up and out

Bennett- I would love to see hope in you, right now you are all anger and pessimism

Bennett- Be sure not to smile and break character

(There were two more pages of notes from this night, but I think this gives a good enough feel of what notes look like)

Week 5:

During week 5, the show opened and performances began.

## TECHNICAL/DESIGN ELEMENTS:

### Stage Management:

Any mention of *Distracted* would be incomplete without mention of Dillon Colagrosso as my stage manager. Dillon was present from auditions to the very last show. In rehearsals, he would write down blocking, make daily calls, monitor the clock, give actors breaks, and be present for whatever I needed. During the show, Dillon was in charge of overseeing every technical aspect to make sure that the show ran smoothly. Dillon was crucial for making my artistic vision a reality. Occasionally, he even brought forth his own ideas as contributions. Whenever I had an idea, I talked through it with Dillon to make sure that it would work out onstage, and he would help me realize how to execute my ideas.

The following is one example of a Daily Call that Dillon sent:

# **Distracted**

## **Daily Call**

**Tuesday, September 20<sup>th</sup>, 2016**

### **REMINDER: PLEASE LOOK AT LINES!**

When	What	Where	Who
6:30 PM	Character Work	Acting Studio	Brittney Lafond
7:30 PM	Character Work	Acting Studio	Zack Heygood
8:30 PM	Character Work	Acting Studio	Alex Rosenthal
9:00 PM	Scene Work	Acting Studio	Nea Haberman, Alex Rosenthal
10:00 PM	Character Work	Acting Studio	Nea Haberman
10:30pm	End of Rehearsal	Acting Studio	Full Cast

#### Costume Design:

Casey Dean designed the costumes for my show. Thanks to Professor Ted Stark, Casey and I had access to CU Boulder's costume storage where we found all of the show's costumes. My overall concept with costumes was that Mama, Dad, and Jesse were the only fully fleshed out costumes, because they were the only real characters in the play. I always saw this play as Mama telling her own personal story with a hired group of actors. Mama, Dad, and Jesse are not acting in the play, but rather, they are

reliving their story with the help of the Greek Chorus. I wanted these characters to have costumes that were as honest and close to real life as possible. For these three characters, Casey found costumes that would make them look like a realistic mom, dad, and child. Jesse also had a flare of hip hop culture to reflect his love for hip-hop music. Additionally, he had a lot of colors and patterns to reflect his chaotic, ADHD behavior.

For the rest of the ensemble, I wanted them to have a base layer of black clothing that they could wear when they were in neutral around the edges of the stage. The black clothing helped the audience follow when these characters were actively engaging in the play versus when they were sitting neutrally as actors. Then each time they embodied a character and entered the action of the play, I wanted them to have one accessory that signified the essence of the character. For example, Casey chose to give the allergist big, bulky glasses that Alex Rosenthal could put on and remove as he jumped in and out of character. Using only one accessory per character allowed the actors to quickly change from one character to the next.

Additionally, using minimal accessories on a black base emphasized the way that the play looks through Mama's eyes. The audience sees Mama's perspective on the action of the play. The characters' costumes reflect Mama's opinion of each character. Rather than seeing each character in the play as a fully fleshed out human, Mama recognizes one major thing about them, which is reflected by their accessory. The nurse, for example, has only a lab coat because Mama sees her as yet another medical official in Mama and Jesse's journey.

### Lighting Design:

Diego Ortiz was my lighting designer. My main focus on lighting the show was that I wanted the lights to add to the ADHD environment while still helping the audience to focus on the important action of the play. Diego accomplished this by having constant colorful light on the actors in the background and white light on the focus of the scene. The colors added to the ADHD environment by giving the audience a wide array of clashing and distracting colors. The white lights, on the other hand, helped the audience focus on the forward momentum of the story. I made sure that Diego put white light on the central in order to draw the audience's focus.

Also, I wanted there to be a major shift in lighting during the Ritalin scene. Diego accomplished this shift by taking out all color when Jesse was on Ritalin and only having front lighting. The result of this choice was a one-dimensional aesthetic. I loved this moment for lighting because it seemed to reflect Jesse's loss of personality after taking Ritalin. Throughout most of the play, Jesse uses colorful, over-the-top language. After taking Ritalin, he becomes robotic. The lighting reflects the removal of the color from Jesse's mind. Ritalin seems to take away the dimensionality from Jesse's personality as well as removing dimensionality from the action onstage.

### Sound Design:

Dillon Colagrosso, Diego Ortiz, and I worked together on the sound design. Diego found all of the preshow music. I wanted the preshow music to be hip-hop to match Jesse's love of hip-hop in the show. Dillon and I worked together on the sound effects throughout the show. I wanted the sound design to be intrusive to the action

onstage. Dillon and I accomplished this by using sound cues that were overlapping with each other. Playing multiple sounds at once created a wall of sound that confronted the audience and added to the distracting, ADHD environment of the play.

#### Projection Design:

I did the show's projection design. My central focus with projection design was to quickly establish locale. Using projections also allowed me to move quickly from one location to the next. In terms of the aesthetic of projections, I wanted the images to look realistic, but also slightly larger than life to add to the ADHD environment. The result was a series of two-dimensional images such as a painting on a wall or a frontal view of a house. The images were real photos, but I tried to cut them together in a two-dimensional cartoon style. One example of this blending of cartoon and realism was in my split screen projections (see the image below). Some of the action of the play happens in two places at once. For these scenes, I used two different locales with a cartoon line in the middle. The images on each side of the line are fairly realistic, but the line in-between makes it look cartoony. This decision added to the chaos of the play by creating stark contrast between elements of each image.



Additionally, I used projections to create hyperboles and add to the chaos of the play. The best example of this is when Mrs. Holly is talking about her passion for being a teacher. During her speech, I added an American Flag to the background. My choice to add an American flag proved to be a very funny choice, as well being a major shift from the tone of the rest of the play. This shift added to the chaos of the play by taking the audience in a new direction and abruptly bringing them right back to the action of the play when this scene finished.

**PROGRAM:**

One of the first moments of any production is when the audience gets programs for the show. I wanted to make programs that added to the environment of the show, while still providing all of the relevant information. I ultimately decided to make the program to look like a prescription. I chose to make the program a prescription because one of the central questions of *Distracted* is whether or not to medicate Jesse's ADHD. This prescription introduced the audience to the main theme of the production and was a light, whimsy way for the audience to start their journey. The following page is the final program design.



# Distracted

## By Lisa Loomer

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### Prescription:

Stage Manager: Dillon Colagrosso

Costume Design: Casey Dean

Lighting Design: Diego Ortiz

Scenic Design: Casey Dean

Projections Design: Kris Buxton

Sound Design: Dillon Colagrosso & Diego Ortiz

Faculty Advisor: Dr. Cecilia J Pang

Mama: Nea Haberman

Jesse: Samantha Cox

Dad: Bennet Cross

Mrs. Holly/Dr. Waller/Nurse: Elizabeth Williamson

Dr. Zavala/Waiter/Carson: Zachary Heygood

Sherry: Brittney Lafond

Vera: Cassidy Knutzen

Daniel/Allergist/Dr. Jinks/Dr. Karnes: Alex Rosenthal

Natalie: Kayleigh Bizarro

Special Thanks to Kevin Crowe, Donna and Kip  
Buxton, Ted Stark, and Connie Lane

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Date:

10/12/16-10/16/16

Director:

Kris Buxton

#### AUDIENCE RESPONSES:

Initially, I intended to interview audience members about their experience of the show. In the chaos of the production, however, I did not end up conducting formal audience interviews. I did, however, receive feedback from Kelly Jo Eldridge, a representative of the Kennedy Center American College Theatre Festival. She had a number of very positive comments about the show. I have included a recording of her feedback along with this paper. Additionally, I received feedback from several of my colleagues after the show had closed. Elise Collins, a fellow theatre student, wrote a paper about *Distracted* for one of her classes. I have included Elise's essay in the next three pages. I am so pleased with all of the positive feedback I received. The positive audience feedback makes me believe that the show was a success.

Production Response to *Distracted* by Lisa Loomer

By Elise Collins

*Distracted* by Lisa Loomer follows the story of a mother and her husband after their son, Jesse, is diagnosed with ADHD and their journey through investigating all of the possible treatment options. The production, directed by Kris Buxton, was full of wonderful choices throughout, creating a moving piece that effectively conveyed a distinct message about ADHD through an adept use of sets, lights, sounds, costumes, staging, and actors' performances.

The play posed the questions about parenting in the modern world, our own ability to focus under the pressures of constant technological and social stimulation, and how we deal with mental disorders. This was effectively conveyed by the characters breaking the fourth wall and posing the audience questions, having the space filled with clutter and characters continually doing busy work onstage, and by creating complex characters with different valid and well-reasoned perspectives towards mental illness. This forced the audience to confront their own perspectives on the subject as they began to empathize more with some characters rather than others.

Just as the audience directly had to address these difficult questions, the audience had to confront the constant barrage of 'distractions' within the play. Even upon entering the theatre, choppy snippets of television and loud music playing made it difficult to focus upon the space and any conversations one might be having. Even the set was full of distractions. The decision to keep six actors onstage doing busywork for the majority of the show, kept the audiences' eyes engaged even if they became distracted and provided a marvelous parallel for Jesse's mental state (which was starkly

contrasted with their rapt attention as soon as he began taking Ritalin). Each actor had a small pile of props next to their chair and any time one of the characters center stage mentioned or requested something, they would throw the respective object into the middle of the stage until the entire stage was covered with a veritable carpet of detritus – books, pill bottles, shoe boxes, etc. The sound design complimented the distractions within the set and performances by continually interrupting the play (and even the curtain speech) with loud phone sounds. These sounds were obviously effects and didn't come from the phones themselves because they were slightly too loud, which pulled the audience out of the world of the play even more than it would otherwise. The sounds also accentuated the moments where television was projected on the whiteboard in the back of the room, an effective use of the space. The other projections on this board served the production well because they could establish scenery at the push of a button, a necessary element within a play that changed rapidly from moment to moment.

Distinctive costume pieces for each character over actors' blacks additionally facilitated the many shifts of scenery and character. The accent pieces were very well chosen and seemed to reflect aspects of the characters' personalities quite well, especially the numerous doctors played by Alex. The actors' only in blacks continually reminded the audience that they were watching actors playing many different roles on a stage, a nice meta-theatrical touch that helped the actors represent their individuality as different from the character they were playing.

This helped facilitate one of the many poignant moments in the play, when Alex Rosenthal refused to portray a character that criticized the use of ADHD medicine and literally left the theatre. The stage became emptier and emptier as each of the characters

left for different reasons – making the theatre feel lonely and barren in contrast with the pleasant business that pervaded the entire play. Natalie leaving the stage when she left for her special new school for suicidal teens left me angry at Mama for not paying attention and made me intrigued to wonder how many important moments I missed because I was focusing upon the wrong things. Although this emptiness initially felt alienating, the space brightened up once Jesse finally entered the stage. The bright colors of his costume, the energetic music, and the joy of his dancing with his parents' attention provided a spectacular button to the play. One could finally focus on what really mattered and it made all the difference.

Overall, I greatly enjoyed this performance – both the script and the excellent execution of its themes. It asked difficult questions and wonderfully portrayed difficult scenes within a limited space. *Distracted* piqued my curiosity and left me wanting more.

## CONCLUSION:

Directing *Distracted* taught me about all of the factors that go into directing and producing a show. I was able to apply my concept of creating an ADHD world to just about every element of the play from blocking to design elements. I saw the project through from its first conception to the very last performance and enlisted the assistance of over fifteen collaborators.

My biggest takeaway from the project was the importance of collaboration in theatre. I strongly believe that I had the most success when I collaborated with other artists. My favorite moment of the production was the scene where Jesse goes on Ritalin. I believe the success of this scene was largely due to synthesis of many different elements. In this scene, the actors worked together to make the cacophonous sounds of a fire alarm. Each actor took their own approach to making these sounds, some making siren sounds up and down a scale, other repeatedly saying “beep, beep, beep.” The projector had an image of a fire alarm flashing on and off. The periphery of the stage had six actors wearing all black. By contrast, Mama stood alone in the center with a colorful costume to make her seem isolated and separate from the rest of the group. The lighting in this scene was stark, one dimensional, and colorless compared to the vibrant lighting throughout the rest of the show. All of these elements supported one another to create a potent emotional response for the audience. Without the collaboration of so many artists, I would have never been able to build such a powerful moment.

If I had the project to do over, I would play more with letting the audience use technology. In my initial proposal, I considered allowing the audience to use cell phones during the show, but I ultimately shied away from this choice. One of the most pivotal

moments in the show is when Mama realizes she has been neglecting Jesse. If I would have allowed cell phone usage, it could have given the audience a similar realization during the show. In a perfect world, the audience would realize that using their cell phone got in the way of their experience. Just like Mama, they would regret letting technology interfere with their humanity. In hindsight, I am not sure that allowing cell phone use would have been successful, but I wish I had tried it for at least one night.

Overall, audiences responded positively to the production. Every person I talked to seemed to find some way of connecting to the show. I hope to have educated the audience as well as making them empathize with Mama and Jesse. I plan to direct more shows in the future with the knowledge gained from this production.

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