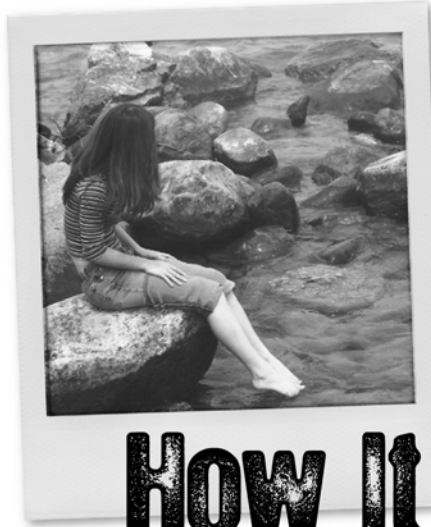


# TARRAGON THEATRE



## How It Works

Written and Directed by Daniel MacIvor

## STUDY GUIDE

**Starring: Tom Barnett, Caroline Gillis, Fiona Hight, Bethany Jillard**

**Set and Lighting Design by Kim Purtell**

**Costume Design by Shawn Kerwin**

**Stage Managed by Robert Harding**

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Tarragon Theatre

## East of Berlin Study Guide

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Tarragon's Education and Outreach department supports and fosters a strong relationship between, teachers, students and professional theatre artists. As such, if there is further information that you would like about the production or more ideas about pre-show and post-show activities, please don't hesitate to contact us.

We are very pleased to be presenting the Toronto premier of Daniel MacIvor's newest play *How It Works*. Daniel was a member of our Playwrights Unit in our 1987-88 season and we are delighted to welcome him back.

Set in Halifax, Nova Scotia, the play looks at the struggles of a father and daughter. She is making her way into adulthood and he is searching for new love after a painful divorce. They both find their salvation in Christine, a woman who understands each of their pain and "works" to bring the pieces of their family back together. With gentle humour and touching warmth, this is MacIvor's work at its insightful best.

In this study guide you will gain a further understanding of what has gone into creating this production, as well as information and questions to apply to discussions and activities with your class.

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# *How It Works*

Written and Directed by Daniel MacIvor

***“As far as I can figure, the way that it works is this: everyone has something that happened to them. The thing that we carry. And you can see it in people if you look.” - Christine***

Al (Tom Barnett) is a newly-divorced cop with a nineteen year old daughter. He meets the plucky Christine (Caroline Gillis) through an online dating service, and they wind up sharing drinks at Al’s favourite pub, The Duck. There is instant chemistry between the two of them, and they begin a relationship.

Unfortunately for Al and his ex-wife, Donna (Fiona Hight), their daughter Brooke (Bethany Jillard) is experimenting with chemistry of her own. Since high school, Brooke has used street drugs – unique blends of readily available household chemicals – to escape the painful experiences of her adolescence.

Al and Donna have tried everything to help her overcome her habit, but even rehab and several stints in police custody have failed to dampen Brooke’s single-minded pursuit of the drug-induced high.

After a very unorthodox meeting with the troubled girl, the unassuming Christine hatches her own a plan for Brooke’s rehabilitation, setting out to do what medicine and the law could not.

Al is intrigued. A shot of tequila later, Donna too is ready to give Christine her blessing to “take Brooke on” – even though no one but Christine knows exactly what that means. What we do know is that Christine – a small town girl from Lower West Jeddore – should not be underestimated. Like all of us, she has experienced her share of pain, and knows a thing or two about healing yourself and beginning again.

The *How It Works* Study Guide was written and contributed to by:  
Andrew Lamb, Director of Education and Outreach  
Amanda Kennedy, Marketing and Outreach Associate  
Andrea Romaldi, Literary Manager  
Kim Purtell, Set and Lighting Designer  
Bethany Jillard, Actress  
Cylla von Tiedemann, Photography  
Sebastian Marziali, Education and Outreach Co-op Student

## About The Playwright – Daniel MacIvor

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Daniel MacIvor was born in Cape Breton, Nova Scotia in 1962. He is a stalwart of the Canadian theatre scene, having written and directed numerous award-winning productions including “See Bob Run”, “Wild Abandon”, “2-2-Tango”, “This Is A Play”, “The Soldier Dreams”, “You Are Here”, “How It Works” and “A Beautiful View”. With long time collaborator Daniel Brooks, he created the solo performances “House”, “Here Lies Henry”, “Monster” and “Cul-de-sac”. Daniel’s play “Never Swim Alone” won the award for overall excellence at the New York Fringe in 1998 and in 2002, he won a GLAAD Award and a Village Voice Obie Award for his play “In On It”, which was presented at PS 122. His play “Marion Bridge” received its off-Broadway premiere in New York in October of 2005. From 1987-2007, he was Artistic Director of da da kamera, a respected international theatre touring company that has brought his work to Australia, Israel, Europe, the UK, and extensively throughout Canada and the US.

As a filmmaker, Daniel’s work includes the festival favorite shorts: “Wake Up Jerk Off”, “Margaret Atwood and the Problem With Canada”, “Permission” and “Until I Hear From You”, all of which he wrote and directed. He wrote and starred in the Genie award-winning short film “The Fairy Who Didn’t Want to be a Fairy Anymore”, co-wrote and starred in “House” (based on his own play and directed by Laurie Lynd) and co-wrote and co-directed “Parade” (with Brad Fraser). Daniel’s first feature film, “Past Perfect”, premiered at the 2002 Toronto International Film Festival, along with his screenplay adaptation of his play “Marion Bridge” (directed by Wiebke von Carolsfeld) which won the CITY TV Best First Feature Award. His second feature film, “Wilby Wonderful” premiered at the Toronto International Film Festival in 2004 and went on to screen at festivals around the world, including the San Sebastian Film Festival in Spain where it was in competition. Daniel co-wrote and starred in Amnon Buchbinder’s “Whole New Thing” for which Daniel won Best Screenplay and Best Performance by an Actor at the Atlantic Film Festival.

As an actor, Daniel has appeared in his own films, Thom Fitzgerald’s “Beefcake”, Don McKellar’s CBC series “Twitch City”, and Jeremy Podeswa’s film “The Five Senses”, for which he was nominated for a Genie Award for Best Performance by an Actor.

Daniel recently completed workshopping a new play, *His Greatness*, at the Stratford Festival in Ontario and is developing a new play called *Communion*.

## Portrait of a Theatre Artist – Bethany Jillard

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**Bethany Jillard** is making her Tarragon Debut in *How It Works*. Bethany is a graduate of the University College Drama Program at U of T. Some of her work at other theatres include: Factory Theatre's *Tough!*, three seasons with the Driftwood Theatre Group, playing Juliet in Hart House Theatre's production of *Romeo and Juliet*, and travelling to Milan with a group of UCDD alumni and students to perform a Brechtian cabaret at the Piccolo Teatro di Milano. To keep herself busy and out of trouble, Bethany choreographs and dances with the U of T based dance company *Silhouettes* and works with an American History teacher in Ajax to integrate dance into his curriculum. Bethany's upcoming projects include *A Man of No Importance* with Acting Upstage and performing in Theatre Panik's *My Name Is Rachel Corrie*.

### Interview with Bethany Jillard

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#### ***How did you first become interested in acting?***

I grew up performing really. My mom was a singer and a drama teacher and so right from the beginning I was kind of immersed in that world. From a very young age I was into gymnastics and dance and then eventually I found my way into the community theatre scene. My first real role onstage was in a high school production of "Annie" - I was nine years old and played Molly... I loved it. In terms of becoming interested in acting as a professional career, I didn't really consider it until much later. I was in my first year of university at the University of Guelph studying Animal Biology with every intention of becoming a veterinarian when I had the first taste of what my life would be like without theatre present in it. And I couldn't accept that - I was on the road to pursuing a very responsible profession that I would likely have done well in at the cost of leaving behind what I was truly passionate about in my life. I finished that year and then switched into the acting program at U of T and haven't looked back since.

#### ***How did you prepare for the role of Brooke?***

My process is basically the same regardless of the role. I read the play over and over and over and over again. I try to just read without assuming anything so I start to feel the story emerge as a whole and I try to get to know the characters through the text rather than through my vision of what I think they should be like. By the time rehearsals for "How It Works" started I basically just knew the play really well and had an idea of how my character interacted with others in that world. Throughout rehearsals I find it easiest not to over think the work before I come in. I make sure I'm familiar with the scene and that I have some ideas to offer once we get up on our feet, but for the most part discoveries and decisions come while I'm in rehearsal. Of course there are always instances where research before rehearsal is a necessity in order to deal with something specific about the character's circumstances. For example, when preparing for some of the scenes in "How It Works" I needed to find some understanding of drug addiction, of how it becomes an absolute necessity in Brooke's life while she is hiding from past traumas.

## Interview with Bethany Jillard (continued)

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### ***What is your favourite part of the process and what is your least favourite part?***

I love the read through when you don't know anything and you get to hear the play come alive for the first time and it's all fresh and uncharted and thrilling. I love the first day you get up on your feet in the rehearsal hall and it's kind of scary to start and I never really know what I'm doing, but once I get into the swing of a scene things start to make sense. I love figuring things out with the director, receiving that little piece of direction that suddenly makes a whole scene click and I love watching other actors work and that moment when you first feel a sense of real connection and relationship with someone else onstage. I love finally getting into a space and seeing the set for real and all the lights and how much those key pieces enhance the world of the play. I love the first run through with tech - it's actually frightening because I feel like I don't know anything anymore and at the same time it's totally exciting to experience the play again for the first time and feel the theatrical designs descend on that world and bring it to life, inviting an audience to share in the story. Of course I love the run - I love looking back on closing and remembering where I was at opening and being amazed again and again how much a piece grows throughout performances.

My least favourite part of the process is actually easier to describe. For me, there's always a hump about midway through rehearsals, where the excitement of the first discoveries has faded and the fresh ideas have been worked, and after taking huge steps towards the development of the performance, a plateau is reached. And it takes time and work to break through to the next level - but while stuck on that plateau things always feel a little tough to me. Nothing feels quite 'right' anymore and things that made sense before start to feel awkward as they get over thought or as the choices shift in order to accommodate new discoveries and decisions. Every time I get to this point I have to remind myself "this happens every time, and it's part of my process" and eventually something drops in and things make sense again and a whole new realm of possibilities opens up and the excitement continues.

### ***Do you have an interesting story from the rehearsal hall you would like to share?***

Really, it was all amazing and fun and interesting. I think the most wonderful thing about our team in the rehearsal hall was that we laughed all the time. This production grew out of a rehearsal process that truly involved "play".

### ***What advice do you have for students interested in pursuing a career in acting?***

Take initiative. Don't wait for information and opportunities and understanding to fall into your lap - go out there and figure out what you want and how you can take steps everyday toward making it happen. See lots of theatre and watch lots of movies. You can learn a lot by observing and being immersed in the world. Never forget how much you love acting. It's not an easy profession even when you are working - it's really important to keep alive the joy you feel with acting at every stage and not get buried under pressure, fear of failure or any other pitfall.



### ***How long have you collaborated with Daniel and what have been some of your highlights?***

Daniel and I have worked together for seven and a half years. The first show I made with him was *In On It* in 2000. On the first day we read the script and then we recycled it, meaning we threw it away. Then we spent the next four weeks creating a completely different show. The highlight for me from that experience was learning to throw away a great idea for the possibility of a better idea. I think that that is how I've moved forward with design. Aside from *In On It*, my favourite experience was making *A Beautiful View*, because it truly shows all of Daniel's generosity, love and compassion.

### ***How have you found *How It Works* to be different to designing Daniel's shows in the past?***

Under the umbrella of da da kamera (Daniel's company of 20 years that he closed in June 2007), we would start with lights and sound in rehearsal on the first day. At that point there was often not even a script. So all elements of the show would develop at the same time and would have a direct effect on each other. The design was completely integrated from the beginning of the process. With *How It Works* we've followed the traditional theatre model, but I feel the end result is just as strong because of our working history.

### ***This production takes place in various locations including: a living room, a police station, two different bars, a bedroom and a theatre. How did you go about designing the set and lights to make this clear for the audience?***

When Daniel first gave me the script he said, "Think about platforms". Having three different platforms on stage allow for distinct locations. The furniture that we have chosen is simplistic, has clean lines and very little personality. By adding a table cloth or taking away a chair we can easily change the location. Also, because the design is not naturalistic it invites the audience to stretch their imagination.

### ***What sets the flashback sequences apart from the rest of the play in your design?***

In the second act of the play we actually transform the set, by taking away a platform and moving another. What it does is allow for the living room to expand into the living room and basement. The flashbacks are significantly different with the lighting with Brooke in primary focus and the other character in shadow because it is Brooke's memory. Colour temperature is also very different in the scenes that take place in the present compared to the flashbacks.

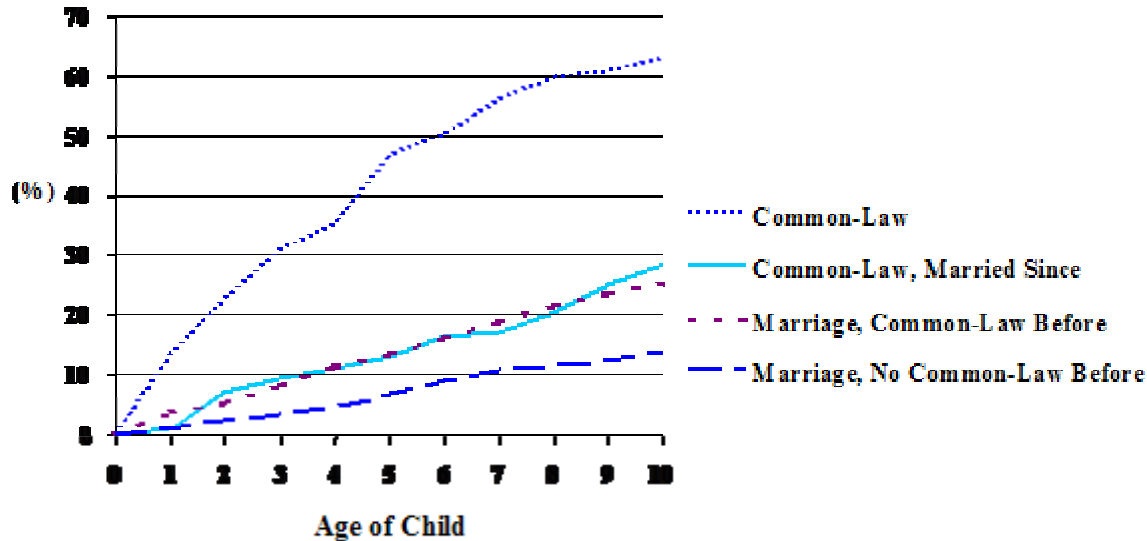
### ***What should students keep in mind about your design when they are watching the play?***

Because the set design is not naturalistic, neither is the lighting design. The floor and the door are the most important parts of the design. By keeping the lights cut to the floor and having many different colours, we can transform the look of a scene very easily – but not naturalistically. Look at the use of light on the door and how it relates to the story.

## Children and Divorce

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Canadian Children Born in a Two-Parent Family Who Have Experienced Their Parents' Separation, According to Type of Parents' Union, 1983-1984 Cohorts-NLSCY 1994-1995



Excerpt taken from: [http://www.justice.gc.ca/en/ps/sup/pub/selstats2000/f10\\_3.html](http://www.justice.gc.ca/en/ps/sup/pub/selstats2000/f10_3.html)

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### Statistics about Children and Divorce

- Half of all American children will witness the breakup of a parent's marriage. Of these, close to half will also see the breakup of a parent's second marriage.
- Among the millions of children who have seen their parents divorce, one of every 10 will also live through three or more parental marriage breakups.
- Teenagers in single-parent families and in blended families are three times more likely to need psychological help within a given year. Compared to children from homes disrupted by death, children from divorced homes have more psychological problems.
- Seventy percent of long-term prison inmates grew up in broken homes.

Excerpt taken from: <http://www.marriage-success-secrets.com/statistics-about-children-and-divorce.html>

### Definition

Sexual abuse and exploitation of children and youth occurs when an older child, adolescent or adult takes advantage of a younger child or youth for sexual purposes, including for participation in prostitution, pornographic performances and in the production of pornography. Sexual abuse and exploitation is perpetrated on children of all ages, from infancy to adolescence.

Sexual activity includes all sexual contact ranging from sexual touching to sexual intercourse. Except for a narrow close in age exception, all **sexual activity with a child under the age of 14 is a criminal offence**, regardless of the child's consent. **Youth between the ages of 14 and 17 also cannot legally consent to sexual activity with a person in a position of trust or authority or with whom the youth is in a relationship of dependency.** In such cases, sexual activity with 14 to 17 year olds is a criminal offence, notwithstanding their consent.

### Extent of sexual abuse and exploitation

In 2002, 8,800 sexual assaults against children and youth were reported to a subset of 94 police departments in Canada. This included 2,863 sexual assaults against children and youth by family members. According to the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) — the first national study of the incidence of child abuse and neglect reported to and investigated by child welfare authorities in Canada — sexual abuse was the primary reason for investigation in 10% of all child maltreatment referrals to social services agencies in 1998. Thirty-eight percent of these cases were substantiated.

### Who is Sexually Abused?

The Ontario Health Survey Supplement, carried out between 1990 and 1991, reported that 4.3% of males and 12.8% of females reported any unwanted sexual acts before their 17<sup>th</sup> birthday, and 3.9% of males and 11.1% of females in this sample reported severe sexual abuse. Previously, the Badgley Report used broader definitions of child sexual abuse and reported higher prevalence rates. In that study, 31% of boys and 54% of girls under the age of 21 reported sexual abuse, and 8.2% of boys and 17.6% of girls reported severe sexual abuse.

The Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) studied investigations by child welfare service providers in 1998. As its title suggests, this study deals only with child abuse and neglect reported to child welfare authorities. Some reports of sexual abuse are investigated by police without any involvement of child welfare service providers, and these statistics are not reflected in the study. Among substantiated cases of sexual abuse against children under the age of 16 reported in the CIS, 69% of the victims were girls and 31% were boys.

Some evidence suggests that girls and boys are at similar risk of being sexually abused before puberty. However, adolescent (and adult) females are at greater risk of sexual abuse than adolescent (and adult) males. Therefore, there may be more female than male adult survivors of child sexual abuse.

### **Who are the Abusers?**

The report of the CIS states that, among substantiated sexual abuse cases, non-parental relatives represented the largest group of alleged perpetrators (44%), followed by biological fathers (8%), stepfathers (8%), other acquaintances (8%) and babysitters (7%). A child's friends (peers) and family friends were each identified as the alleged perpetrator in 5% of substantiated cases. Teachers were identified in 4% of cases, and other professionals, strangers and a parent's boyfriend/girl-friend were each identified in 2% of cases. In 5% of substantiated sexual abuse cases, mothers were identified as the alleged perpetrator (3% biological mothers and 2% step-mothers). It is possible that cases of abuse within the family are under-reported because of the risk of breaking up the family and are, therefore, under-represented in this study. Furthermore, the CIS statistics do not reflect those cases –which may be more severe – that are reported only to police.

### **Coping Skills**

Many survivors develop addictions or compulsive behaviors in an effort to mask their abuse-related emotions. Survivors often experience shame about these coping skills or strategies, which have been used to numb the pain of the abuse.

Excerpt taken from: [http://www.phac-aspc.gc.ca/nctv-cnivf/familyviolence/html/nfntsxagrsexadult\\_e.html](http://www.phac-aspc.gc.ca/nctv-cnivf/familyviolence/html/nfntsxagrsexadult_e.html)

June 21, 2006

By Steve Boga

For The Argus-Courier

For years, meth came in powder form, called speed. It was usually snorted or mixed with water and injected. But then someone created methamphetamine hydrochloride, transparent chunks that look like rock candy. Users typically burn the crystals (thus the name crystal meth) in a small pipe and inhale the vapors. Inhaled meth gets into the bloodstream faster.

### **Short-term effects**

The effects of any drug vary from person to person, depending on a host of genetic and environmental factors. Another variable is that street users often don't know what they're taking. The purity of meth varies, increasing the risk of negative effects and overdose.

Nevertheless, soon after taking meth, many people experience some or all of the following physical and psychological effects:

- feelings of euphoria, excitement, and well-being.
- increased alertness and energy.
- a boost in confidence.
- increased libido.
- talkativeness, abrupt shifts in thought and speech; restlessness; twitching; and itching, picking and scratching.
- tremors of the hands and fingers.
- speeding up of bodily functions, including elevated breathing rate, body temperature, blood pressure, sweating rate and heartbeat.
- nervousness, anxiety, panic attacks and paranoia.
- hallucinations, paranoid delusions and bizarre behavior.

### **Long-term effects**

Long-term use of meth can cause or worsen the following health problems:

- high blood pressure and increased risk of heart-related complications, including heart attack and heart failure.
- malnutrition and rapid weight
- reduced immunity and increased susceptibility to infections.
- depression, anxiety, tension, and paranoia.
- meth smokers damage their lungs.
- meth snorters damage the lining of the nose.
- meth injectors are prone to scarring, abscesses and vein damage. Sharing needles also increases the risk of contracting blood-borne viruses, such as hepatitis B and C, and HIV.

## **Dependence**

Habitual meth users quickly develop a tolerance to the drug. They need more and more of it to get as high as they once did. Physical and/or psychological dependence is not uncommon. For people psychologically dependent on meth, using it becomes more important than any other activities in their life. They crave the drug and find it very difficult to stop using it. The body of someone physically dependent on meth quickly adapts to the drug and gets used to functioning with it. Users who are physically dependent on meth may experience withdrawal symptoms when they suddenly stop taking it.

## **Coming down**

As the meth high wears off, the user may experience symptoms that include tension, depression, radical mood swings, uncontrollable violence, and exhaustion.

## **Withdrawal**

People who stop using meth may experience symptoms that include:

- disorientation.
- exhaustion.
- apathy and an inability to experience pleasure.
- anxiety, irritability and depression.
- meth cravings.

## **Rehab Centres in Toronto**

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Bellwood Health Services Inc  
416-495-0926  
1020 McNicoll Toronto, Toronto, ON

Oasis Addiction Recovery Society  
416-461-7739  
921 Danforth Avenue, Toronto, ON M4J 1L8

Withdrawal Management Centre  
416-461-2010  
985 Danforth Avenue, Toronto, ON M4J 1M1

Living Well Counselling Services  
416-494-6222  
4211 Yonge Street, North York, ON M2P 2A9

Addiction Medicine  
416-490-0499  
4080 Sheppard Avenue East, Scarborough, ON M1S 1S9

## Resources From Rehearsal

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### Guide to Drug Intervention

A guide for families who want to intervene and respond to a loved ones addiction.  
<http://www.drug-rehab.ca/iNTervention.htm>

### My Experience with a Crystal Addict

A personal experience of a watching a loved one become an addict.  
<http://www.westhollywood.com/features/gaydating/gaydating.shtm>

### Canada's Legal Age of Consent to Sexual Activity

From the Library of Parliament this paper outlines the arguments for and against the raising of the Age of Consent laws in Canada.

<http://www.parl.gc.ca/information/library/PRBpubs/prb993-e.htm>

### Bill resurrected to raise consent age

From Oct 19<sup>th</sup> 2007, the article outlines the current bill before Parliament (which was passed in 2006, but was never passed in the Senate) on raising the Age of Consent from 14 to 16.

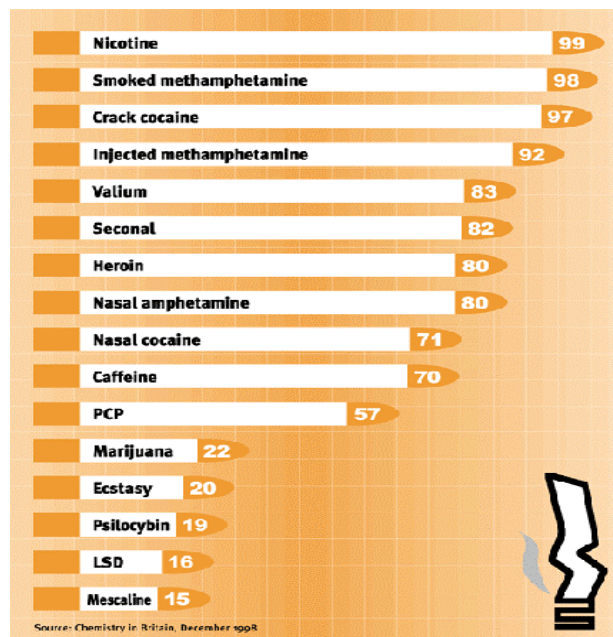
<http://www.thestar.com/News/article/268451>

## How Addictive Is It?

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Taken from *Chemistry in Britain* (December 1998), this chart rates how addictive sixteen common legal and illegal substances are on a scale of 1-100.

Doctors and scientists use different methods to determine the ranking of a drug. This can include looking at how many people develop addictions after first exposure to the substance and the physical changes the drug can make on the human body. Many rankings are compiled using these and other variables.



## Glossary of Terms

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### **Addiction**

Compulsive physiological and psychological need for a habit-forming substance.

### **Cocaine**

Alkaloid drug derived from the leaves of the coca shrub. Cocaine blocks pain sensation and stimulates the central nervous system, producing a sudden increase in heart rate, temperature, and blood pressure. In the brain, it blocks the synaptic reabsorption of certain neurotransmitters (in particular dopamine). The resultant buildup of neurotransmitters causes pleasurable sensations to be passed along the neural pathways over and over again, creating a feeling of profound well-being, self-confidence, and alertness. It is accompanied by lack of hunger. The effect lasts for 10 to 30 minutes, and the user begins to crave more immediately as the neurotransmitter supply is exhausted.

### **Convent**

A society or association of monks, friars, or nuns: now usually used of a society of nuns and the building or buildings occupied by such a society; a monastery or nunnery.

### **Drug**

A chemical substance, such as a narcotic or hallucinogen, that affects the central nervous system, causing changes in behavior and often addiction.

### **Ecstasy**

MDMA is most commonly known today by the street name ecstasy. The primary effects of ecstasy include an increased awareness of the senses, feelings of openness, euphoria, empathy, love, happiness, heightened self-awareness, feeling of mental clarity and an increased appreciation of music and movement. Tactile sensations are enhanced for some users, making physical contact with others more pleasurable. Other side effects, such as jaw clenching and elevated pulse, are common.

### **Hashish**

A resin extracted from the flower clusters and top leaves of the hemp plant, *Cannabis sativa*, and *C. indica*. Hashish, called charas in India, is the most potent grade of cannabis and is obtained from cultivated plants grown in hot, moist climates. Marijuana, a cheaper and less potent substance, is usually obtained from the cut tops of plants grown in cooler climates. Like marijuana, hashish is usually smoked, but in a pipe or water pipe; in North Africa it is also eaten. Hashish is an intoxicant, producing euphoria and exaggerations of sensations. It is an illegal substance in the United States and in Canada, however in Canada it has an accepted medical use.

### **Heroin**

Opiate drug synthesized from morphine (see narcotic). Heroin is a central nervous system depressant that relieves pain and induces sleep. It produces a dreamlike state of warmth and well-being. It may also cause constricted pupils, nausea, and respiratory depression, which in its extremes can result in death. Heroin activates brain regions that produce euphoric sensations and brain regions that produce physical dependence—hence its notorious ability to produce both psychological and physical addiction. Heroin was originally used for pain relief in hospitals.

### **Hydrogen peroxide**

A colourless, heavy, strongly oxidizing liquid,  $H_2O_2$ , capable of reacting explosively with combustibles and used principally in aqueous solution as a mild antiseptic, a bleaching agent, an oxidizing agent, and a laboratory reagent.

**Intervention**

Confronting a person about a problem they have, generally addiction. Most often family arranges for all close friends to come and they talk to the person and try to get them to change.

**Iodine**

A non-metallic halogen element occurring at ordinary temperatures as a grayish-black crystalline solid that sublimates to a dense violet vapor when heated: used in medicine as an antiseptic.

**LSD**

Hallucinogenic drug that intensifies sense perceptions and produces hallucinations, mood changes, and changes in the sense of time. It also can cause restlessness, acute anxiety, and, occasionally, depression.

**Marijuana**

Drug obtained from the flowering tops, stems, and leaves of the hemp plant, *Cannabis sativa*. The effects of marijuana vary with its strength and dosage and with the state of mind of the user. Typically, small doses result in a feeling of well being. The intoxication lasts two to three hours, but accompanying effects on motor control last much longer. High doses can cause tachycardia, paranoia, and delusions.

**Methamphetamine (Crystal Meth)**

The way methamphetamine makes you feel depends on a variety of factors that include, weight, age, how much you've taken, how long you've taken it, the method used to take it in, etc. Methamphetamine produces effects like euphoria and stimulation that are much like cocaine, except the effects last much longer. Methamphetamine is in the brain for longer, (from 6 to 12 hours) which can lead to prolonged stimulant effects and is highly addictive even after one use.

**Muscle relaxant**

A drug that reduces muscle contractility by blocking the transmission of nerve impulses or by decreasing the excitability of the motor end plate or by other actions.

**Opium**

Substance derived by collecting and drying the milky juice in the unripe seedpods of the opium poppy. Opium varies in colour from yellow to dark brown and has a characteristic odour and a bitter taste. Opium and its various constituents exert effects upon the body ranging from analgesia, or insensitivity to pain, to narcosis, or depressed physiological activity leading to stupor. Opium users describe experiencing a feeling of calm and well-being.

**Rehab**

The restoration of someone to a useful place in society. Vindication of a person's character and the re-establishment of that person's reputation, often through removing a substance addiction.

**Rehabilitate**

Restore to effectiveness or normal life by training.

**Sudafed**

Vasoconstrictor (trade names Privine and Sudafed) used in nasal sprays to treat symptoms of nasal congestion and in eye drops to treat eye irritation.

**Valium**

A tranquilizer (trade name Valium) used to relieve anxiety and relaxes muscles; acts by enhancing the inhibitory actions of the neurotransmitter GABA; can also be used as an anticonvulsant drug in cases of nerve agent poisoning.

## **Pre-show Activity 1: Write Your Own Parent/Child Scene**

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Many students now grow up in divorced homes and have more than one set of parents. In fact, of all children born to married parents this year, fifty percent will experience the divorce of their parents before they reach their 18th birthday. Use this writing exercise to have students explore dialogue and the parent/child relationships around them.

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### **All you need:**

Enough copies of EXCERPT #1 for students to share as well as paper and pencils to write.

### **In pairs:**

Have the students each take a role and read the scene out loud as an example.

### **Short discussion:**

Have a discussion about what the students think of the relationship and the situation.

### **Individually or in pairs:**

Have the students write their own scene between a parent, or a parent's girlfriend/boyfriend, and a teenager.

### **Scene sharing:**

Have each group read or present the scene to the rest of the class

**SCENE 2: Al's Living Room**

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**MUSIC continues. AL enters taking off his coat and turning on lights. Central to the living room is a door.**

AL:  
Brooke! Brooke! I have neighbors.

**The MUSIC stops. BROOKE enters in comfortable sleepwear.**

BROOKE:  
You play it that loud.

AL:  
Not at two-thirty.

BROOKE:  
Sorry. How was Miss Looking for Chemistry? Or was it Mrs. Looking for Chemistry.

AL:  
Divorced.

BROOKE:  
And?

AL:  
She was nice. She wasn't your mother, but we've established that I shouldn't be looking for your mother.

BROOKE:  
Right.

AL:  
Because that didn't work.

BROOKE:  
Exactly.

AL:  
And if you don't want something to work it's not going to work.

BROOKE:  
So you liked her.

AL:

I liked her. But listen, I was thinking about you and you know you really need to get out there. You need to meet people. You need to get excited about somebody.

BROOKE:

Are you saying I need to get a boyfriend?

AL:

Or whatever. A girlfriend.

BROOKE:

I'm not a lesbian. Oh my God. I had made up that thing about Debbie Henderson when I was in grade ten.

AL:

But you said-

BROOKE:

I was in grade 10. I was just trying to freak you out. And clearly I succeeded.

AL:

Okay, you know, whatever, I'm just saying, you need to get out there and you meet people and you get out of yourself a little bit, get into someone else, into possibilities.

BROOKE:

Are you drunk?

AL:

A little.

BROOKE:

Can I have some money?

AL:

I'm not that drunk.

BROOKE:

I need to buy some sneakers.

AL:

What did you do all night?

BROOKE:

Talked on the phone.

AL:

To who?

BROOKE:  
Oh my God.

AL:  
That's the deal.

BROOKE:  
Mom.

AL:  
How's your mother?

BROOKE:  
Oh she's Donna. As Donna as ever. I had to talk her out of a face-lift.

AL:  
No way.

BROOKE:  
It wasn't that hard, she didn't really want to do it anyway. She just needed to be told she was beautiful.

AL:  
Good.

BROOKE:  
So I convinced her to go to Mexico instead.

AL:  
Great.

BROOKE:  
It's not like you'll have to pay for it.

AL:  
Oh I'll pay for it, she'll find a way.

BROOKE:  
She wants me to go with her.

AL:  
And that's the way.



**As a class:**

Fan the small deck of cards face down (no aces or royal cards). Have each student take a card from the small deck and keep it a secret. Once they all have one ask them to walk around the room pretending to be that level of status (they can use an occupation, person or role from their list to help).

**Short discussion:**

Stop them and ask for a few students to guess what status number another student was playing. Check in with the other students to see if they agree, and then let the student reveal their number to see how close everyone was.

**The final step:**

Collect the playing cards, shuffle them and fan them face down. Have each student take a card and this time hold it on their forehead facing out (so everyone can see their number except for them). Once they all have one, ask them to walk around the room and treat everyone according to their number.

**Discussion:**

Have a discussion about how status can be given to you. If a famous person walks into a room, they may just think they are medium status but everyone there treats them with high status. Ask the students to explain how they change their status in their everyday lives.

### Pre-show Activity 3: Quick Scrabble

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The game of scrabble is referred to many times in this play and has significance in bringing the family together. Here's a small excerpt from the play:

AL: Not a scrabble person?

CHRISTINE: Oh scrabble's great, people get so mad. I love scrabble.

AL: Oh, you've got a scrabble temper?

CHRISTINE: No I just like to watch. But I bet you've got a scrabble temper.

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#### **All you need:**

Letters from a scrabble set or small pieces of paper with the letters printed on them (not the scrabble board itself). If you can have more than one set, students can play the game in small groups at the same time.

#### **In groups of 3 or 4:**

Players each take 5 pieces to start. The first player to make a word or words (linked as in normal scrabble) with his/her pieces, calls out, "take two" and everyone takes a further two pieces. Each player then tries to make a set of words with the seven pieces, either by building on existing words or starting afresh. Once a player has used all seven pieces, all players take another two pieces and so on until all pieces are taken.

If at any time none is able to use all the letters they have, then by agreement they can all take two extra pieces. The winner is the first player to use up all his/her pieces when there are no more pieces to take.

#### **Next Step:**

Have each group choose three words they have made and present them to the class in tableaux/frozen picture or a short skit using the three words. The rest of the class can try and guess what words they chose.

## Post-show Activity 1: Your Final Scene

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The final scene of the play is Christine's impression of a possible future for the new family. Use this exercise to have your students write their own ending for the play and/or the future of Brooke's family.

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### All you need:

Paper and pencils for each student

### Individually or in pairs:

Have the students write their own ending to the play. This can be a happy ending or not, whatever they think could be the final scene.

### Scene sharing:

Have each group read or present the scene to the rest of the class

## Post-show Activity 2: Irony Activity

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**Irony** The use of words to convey a meaning that is the opposite of its literal meaning: *the irony of her reply, "How nice!" when I said I had to work all weekend.*

BROOKE: And so he taught me how to clean out a wallet with one hand, when I'm a little kid, as a magic trick, and then I grow up and I clean out his wallet with one hand.

### AL laughs.

BROOKE: That's "irony".

AL: That's ironic.

DONNA: So not "rain on your wedding day"?

BROOKE: No! That's just bad luck.

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### All you need:

Paper and pencils for each student

### Brainstorm:

Have your students explore the idea of irony by brainstorming different scenarios or examples of irony.

### Writing:

Have the students choose one or more examples from their list and write a one page scene between two people. This can be the characters discussing or experiencing the irony.

### Sharing:

In pairs, have the students share these scenes with the rest of the class

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Tarragon Theatre

Tarragon Theatre Study Guide for *How It Works* by Daniel MacIvor