

Playing with Pain: A Literature Review of Table-top Role-playing Games in Therapy and their Treatment of Trauma and PTSD

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Abstract

Complex trauma and trauma-aligned disorders such as post-traumatic stress disorder (PTSD) and Complex-PTSD (C-PTSD) have been surrounded by a debate about the treatment guidelines that are often prescribed for their symptoms. One of the treatments that has been researched but seems to be under-utilized is exposure therapy in the form of role-playing games, or RPGs and the many ways of playing in them. Though many treatments have been found to be effective, some alternative interventions have been researched and recommended as well in order to help others with reduced access to mental-health resources. There is evidence that many of the techniques used in RPGs, specifically table-top RPGs like Dungeons and Dragons, can be utilized in a therapeutic setting in order to effectively treat PTSD and complex trauma. Some of these techniques include imaginal exposure, group therapy interaction, emotional regulation skills, and social skill teaching. These skills are helpful in treating the issues that may arise in PTSD and C-PTSD patients.

Keywords: TTRPGs, PTSD, trauma treatment, literature review, role-play

Introduction

Gaming, whether in person or virtually, has been a past-time that many individuals of varying ages engage in. While video games are popular, one gaming system has been rising back to popularity in the past few decades. Dungeons and Dragons, a role-playing game where individuals embody a character that they create, has an estimated 50 million players that gather around a table once a week to tell a story and slay dragons (C., 2022). Due to this gaming experience fosters community, connection and collaboration, individuals in the therapeutic community found Dungeons and Dragons to be a new tool they could implement (Abbott et. al., 2021; Mendoza, 2020; Wilson, 2024).

While the popularity of Dungeons and Dragons rises, another statistic has also been steadily rising; the amount of people in the U.S. that have been diagnosed with a trauma disorder. Trauma disorders like post-traumatic stress disorder (PTSD) or complex-PTSD (C-PTSD) have been noted to be increasing in prevalence (Bisson & Olf, 2021; National Center for PTSD, 2024; Wilson, 2024). According to the National Center for PTSD (2024), almost 13 million people had PTSD this year. Women are also more likely to be diagnosed with PTSD, with a prevalence rate of about 8% (National Center for PTSD, 2024). Although there are many evidence-based practices for this treating diagnosis, access to resources and treatment may be extremely scarce for people seeking help. Even with the advent of tele-health, people still struggle to receive therapeutic help. Symptoms of PTSD and C-PTSD can make people feel isolated, upset, and scared of the future and others, making it increasingly hard to ask for help or work through the traumatic experience (Bisson & Olf, 2021; Bleiberg & Markowitz, 2019; National Center for PTSD, 2024). Although this access issue and interpersonal issue may be hard to work with, the increasing usage of TTRPGs may provide a much-needed solution for the therapeutic community and clients alike (Quinones & Somers, 2024). Through the

imaginal exposure provided by TTRPGs, the interpersonal group setting and a guiding hand from the therapist or game master, Dungeons and Dragons therapy can become an effective and worthwhile alternative for individuals struggling with PTSD and C-PTSD.

Trauma

Trauma is clinically defined as being exposed to an event that is life-threatening or excessively violent (American Psychiatric Association, 2022; World Health Organization, 2022). Examples of traumatic experiences commonly involve war, COVID-19's effects, and domestic violence or abuse in the household. Experiences that are traumatic can occur at any moment, and are extremely unexpected. Traumatic events and occurrences, especially when experienced at younger ages, can have extreme detrimental effects on an individual's life (Quinones & Somers, 2020; Wilson, 2024). In many cases, the symptoms that arise differ, but encompass certain symptoms like dissociation, amnesia, and fear-reponses to certain stimuli out of the context of the traumatic event (Bisson & Olf, 2021). These symptoms typically manifest from the individual feeling "stuck" in the traumatic experience, unable to move on psychologically from what happened. These detrimental effects can manifest as trauma disorders, specifically PTSD and C-PTSD (Kilpatrick, 2005; Quinones & Somers, 2024). Complex traumas usually constitute sexual trauma and abuse, physical trauma, psychological and childhood trauma (Bisson & Olf, 2021; Kilpatrick, 2005; Wilson, 2024). Psychological effects of PTSD are usually individual, while difficulty with emotional regulation and social connectedness are considered a part of the C-PTSD criteria (Wilson, 2024).

In debates within the field on the use and effectiveness of the current treatment guidelines for working with trauma, PTSD and C-PTSD play a crucial part in how these guidelines change and evolve over time (Bisson & Olf, 2021; Kilpatrick, 2005). One of these guidelines for treatment that is currently being utilized is known as the International Society for Traumatic Stress Studies, or ISTSS (Bisson & Olf, 2021; Bleiberg & Markowitz, 2019). These treatment guidelines are formed through a process of compiling and synthesizing data from many randomized controlled trials (RCTs) of treatment for plans for PTSD (Bisson & Olf, 2021). Meta-analyses are conducted, literature is rigorously reviewed, and treatment guidelines are then informed from the data that is pulled and analyzed (Bisson & Olf, 2021). Due to the data being specifically geared towards PTSD treatment, as well as issues with defining properly and limited appropriate research, a meta-analysis in the third edition was not conducted on C-PTSD treatment plans and guides (Bisson & Olf, 2021). Instead, C-PTSD has guidelines being informed by narrative reviews of the current research (Bisson & Olf, 2021). Many treatments for PTSD have been used in the past, the most effective evidence-based ones being the usage of cognitive-behavioral therapy with trauma focus (CBT-TF), eye movement desensitisation and reprocessing (EMDR), exposure therapy (both prolonged and intermittent), and two different types of cognitive therapy (Bisson & Olf, 2021; Bleiberg & Markowitz, 2019; Cox et. al., 2020; Minnen & Foa, 2006). Other treatment guidelines widely used are the terms provided by the American Psychiatric Association, with similar results and recommendations (Bleiberg & Markowitz, 2019). Escapism and self-coping measures have also been studied in the use of treatment or coping with PTSD, where dissociation tends to be a common symptom that can be modified in treatment (Quinones & Somers, 2024). There is also mention in the guidelines of usage of pharmaceutical treatments and their effectiveness in treating PTSD symptoms. Although all the aforementioned therapies seem to be the most effective recommendations, there are still some therapies that are less used that have shown to be effective in working with lessening the impact of PTSD symptoms, like interpersonal therapy (Bleiberg & Markowitz, 2019).

Literature points to prolonged imaginal exposure therapy being one of the first-line treatments for PTSD, and usage seems to yield positive symptom and affective results (Cox et. al., 2020; Minnen & Foa, 2006). There have also been studies observing the therapy's effectiveness with C-PTSD (Cox et. al., 2020). Imaginal exposure therapy, or prolonged exposure therapy, is a therapy that contains two differing stages: prolonged exposure and postexposure processing (Cox et. al., 2020; Minnen & Foa, 2006). Prolonged exposure, which is defined as the repeated recounting of the traumatic event's details to the therapist and oneself, while the postexposure processing is the discussion surrounding the feelings and thoughts that arise from trauma-structure activation, as well as the experience overall of the exposure (Cox et. al., 2020). This form of therapy has its roots in emotional processing theory, with an emphasis on modifying and working with the client's current model of beliefs (Cox et. al., 2020).

Role Playing in Therapy

The activity of role-playing has been used in many modalities of therapy, with some early uses in Gestalt therapy and drama therapy or psychodrama (Abbott, 2021; Wilson, 2023). Historically, role-playing has been used in play and drama therapy in many ways, and has been considered useful in treating trauma (Abbott, 2021; Jacobs, 2002; Mendoza, 2020; Wilson, 2024). In Gestalt therapy, role-play is integrated into treatment with the usage of techniques like the *empty chair* technique and a Rorschach roleplay (Bricklen, 1975; Wilson, 2024). The *empty chair* technique entails taking on the role of a figure, created

from the ground out of need; this figure is then taken on, whether it be a person or something else (Cowen, 2017). This form of role playing integrates many parts of fantasy, and enagages in psychodramatic technique of roleplay in order to aid the client in reaching a higher awareness of themselves and the issues they may be struggling with. Beliefs in Gestalt therapy historically have aligned with the thought that fanatasy characters and settings could be representations of the self, not unlike many psychodynamically aligned theories at the time (Bricklen, 1975; Wilson, 2024). Fantastical elements of storytelling have been utilized in multiple types of role-play for therapuetic usages.

When focusing on psychodrama, this modality was designed with live action role-play (LARPing) in mind (Mendoza, 2020). Role-play's usage in psychodramatic spaces has revolved around the theatrical nature of the role-play, and that its immersive nature will provide a healing closure for patients (Mendoza, 2020). Though role-playing carries connotations of being a part of acting in theatre, there has been evidence showing role-play as being used a ritual for healing and psychological treatment (Jennings, 2024). With specific differences in the type of imaginal role-play, there has been a recent focus on fantasy in the RPG space, while conventional theatre and most play-spaces encourage a more life-like and realistic version of role-playing in children and adults. In drama therapy, one of the most used references to role-play and theatrical technique used in therapeutic spaces is a writer named Moreno (Jennings, 2021; Mendoza, 2020). Moreno believed that LARPing and role-play in therapy were useful techniques, and often argued for their usage to be more widespread in the therapuetic community (Mendoza, 2020).

Role-playing has also been utilized in CBT spaces when working with trauma as a therapy that can be used in tandem with play therapy (Jacobs, 2002). When working with two survivors of sexual abuse that after confiding, their perpatrator committed suicide, Jacobs (2002) observed the empowerment and help that roleplay provided for both of the young patients. The violent and continued nature of this event was a complex trauma for the two children, and treating it with role-play in therapy yielded results showing its effectiveness. While the older of the two took on a teaching role that seemed to help her in making meaning of what happened to her, the younger overcoming trust issues in the process she displayed (Jacobs, 2002).

The usage of role-playing games, or RPGs, has also been studied in both an online and in-person group setting (Mendoza, 2020). Mackay (2001) describes RPGs as "episodic and participatory story-creation system that includes a set of quantified rules that assist a group of players and a gamemaster in determining how their fictional characters' spontaneous interactions are resolved." (as cited in Abbott, 2021, pg. 17). RPGs have been most well-observed in modern literature in the online space, with most RPGs being video games usable by computer, console or VR headset (Alexenian & Davis, 2024; Mendoza, 2021; Wilson, 2024). RPG video games have been prominent in popular culture, providing settings that are rich in storytelling and character creation. These games provide worlds for players to enter, often as an escape from the real world, or to confront problems that seem daunting in a way that feels less frightening. A study conducted by Alexenian and Davis (2024) found that individuals they worked with that suffered from PTSD, anxiety disorders and phobias benefitted from the use of VR avatars in a role-play setting. Utilizing a long-term virtual observation of the participants in their VR world, chat and text log coding and in-depth interviews, the researchers gathered a rich dataset (Alexenian & Davis, 2024). Participants revealed a methodology of contending with their trauma that was not unlike some role-play therapy techniques used in modern therapies, with older participants utilizing a child VR avatar to model and experience a healthy parent and child relationship they may not have experienced beforehand in their life (Alexenian & Davis, 2024). The immersion and structure of these virtual worlds provided a place for "virtual" adoption centers, a space where people could have a model family online they role-played healthy relationships in (Alexenian & Davis, 2024). This same role-playing exposure has been used in table-top role-playing games, where the interactions now take place in person.

TTRPGs and DnD in Therapy

Tabletop role-playing games, or TTRPGs, have been popular within adolescent and emerging adult spaces since their inception, with the most popular game under this umbrella being Dungeons and Dragons (DnD) (Mendoza, 2020). These games are RPGs in a slightly different format, one that utilizes a pen and paper format (though not required) and has an element of improvisation and community to its play-style (Merrick et. al., 2024; Mendoza, 2020; Wilson, 2024). DnD can also be described as a collaborative storytelling experience, where players and their characters interact directly with the Game Master (GM) to create character arcs and compelling moments in the moment (Abbott, 2021). In this game, a player character or a PC creates a character and chooses among some established races, classes, and other characteristics in the game to identify the character. Character creation can vary greatly, with some players choosing to create a very in-depth character with a backstory, special classes, and a specific character voice, while some may use a pre-made set character build. The classes a character may play as fall into one of two categories, mainly differentiated by the style of fighting engaged in: martial or magical. Martial classes consist of the Barbarian, Ranger, Monk and Fighter, all of which are classes that do not utilize magic at all or very little; these classes use conventional physical weapons or their own limbs to fight in the game. Magical classes include Wizards, Warlocks, Paladins, Sorcerers and Clerics, which all utilize mostly magic, if not only magic. All players may choose to give their character

races as well, with races ranging from a regular human race to fantastical creatures that we know of from mythos or those created by Wizards of the Coast, like Orcs or Tieflings. DnD also utilizes a turn-based combat system, in which all players must work together in turns to defeat the enemies that are presented by their GM. Enemies can range from lowly monsters to evil, scheming humans, or even angry gods.

While DnD has quite in-depth and complex character creation mechanics, many other TTRPGs like Pathfinder, Call of Cthulu, or Warhammer have their own versions of character creation that contain similar processes to DnD (Mendoza, 2020). Each of these TTRPGs have their own settings, mechanics, and storylines that exist in their literature, making each a completely unique game for a GM and players

In DnD, players will interact with the GM to create a story in an improvisational performance setting, utilizing the character voices established for certain characters. A GM will set the scene and describe the setting, the non-player characters or NPCs, and the mechanics in order to interact with the fantasy world or setting the GM has either created or is using. Then, utilizing role-play and theatrics, a storyline and adventure is played through. This interpersonal exchange and performance has been popularized through different media, such as podcasts like *The Adventure Zone* and DnD exclusive shows like *Dimension 20* from Dropout. Though DnD has elevated into a content creative platform, it still remains a widely used home game that many people play to this day (Abbott et. al., 2021; Mendoza, 2020). Many mechanics are available to read and understand in various aspects of the game in the handbooks provided by the DnD community and the company Wizards of the Coast, but many players and GMs will *homebrew*, or create their own mechanics inside the game (Merrick et. al., 2024; Mendoza, 2020; Wilson, 2024). Historically, there has been widespread fear-mongering beliefs about the nature of TTRPGs in religious communities in the West (Mendoza, 2020). Due to an incident involving a student death, claims were made about the “satanic” nature of DnD, and media spread messages about the game’s fantastical setting and activities inviting a demonic spirit or aura into a child or the home (Mendoza, 2020). While the stigma has receded from popular view, there still seems to be a small population that is hesitant about DnD and TTRPGs (Abbott et. al., 2019; Mendoza, 2020). Though the “satanic panic” that once surrounded TTRPG spaces has studied and noted as a significant event in its history, there is not much evidence that there is a stigma in practitioner spaces towards the usage or participation in TTRPGs (Mendoza, 2021).

In various pieces of literature, there has been contention about how role-play can be used as either treatment or also interpreted as a piece of escapism (Quinones & Somers, 2024). Some literature on the usage of DnD in therapeutic spaces has observed the TTRPG as a self-treatment or self-medicating strategy, utilizing the stories as a proxy to real-life situations and sometimes enjoying the escapism that the group role-play will enable (Ascheran, 1993; Blackmon, 1994; Mendoza, 2021; Rosslet & Stauffer, 2013). Some major examples of a more complete study done on DnD in therapeutic spaces include Ascherman (1993), Abbot et. al. (2021), Blackmon (1994), and Wilson (2024). These studies utilized different psychotherapies and techniques and emerge from different perspectives in various time periods of psychology.

DnD was studied in therapeutic settings in the early 90’s by two clinicians, Ascherman and Blackmon (Mendoza, 2020). Ascherman (1993) was studying the negative effects that this unknown game may have had on his clients. He remarked on the nature of the game being quite complex and hard to follow (Ascherman, 1993). There was also thought that the game’s nature encouraged escapism, which led him to believe that playing DnD would also encourage violence, resistance to therapy and reinforce maladaptive thoughts (Ascherman, 1993). This thought process was one of the first works to address the use of DnD in therapeutic spaces, with the clients forming a group that played inside of the psychiatric ward from which he worked with his staff. In Ascherman’s specific case, the depth of the game and degree of immersion seemed to come across as negative characteristics, which ends up being at odds with some of the later literature on the observation and use of DnD. Later, Blackmon (1994) had a case study on a client named Fred who Blackmon described as having an “obsessive schizoid” personality, and he detailed how DnD was utilized as a psychodynamic tool to allow Fred’s unconscious to be interpreted and released. Using psychodynamic theory, Blackmon (1994) argued for the usage of the fantastical nature of DnD and the role-playing aspect being projective features that can lead to client progress. Thinking DnD could provide a form and structure to his patient’s unconscious thought, Blackmon (1994) utilized the principle of the “waking dream” and the structure of fairytale storytelling in therapy in order to effectively treat and help Fred with his personality issues. In one example, Blackmon (1994) discussed the motivations behind his character’s actions, which lead to some movement and progress in their therapeutic work.

Rosslet and Stauffer (2013) worked with TTRPGs more in-depth, and utilized it in tandem with Goffman’s social roles and Adlerian play therapy in a weekend RPG camp. Utilizing this model, the target audience for this group therapeutic work was with gifted children that may have underdeveloped socially or emotionally in comparison to their peers (Rosslet and Stauffer, 2013). Concerns about the “mismatch” that displays in many gifted children in the form of the lag in development of social understanding, cues and comfortability became the target behavior. Many gifted children have an acute issue with comparison to their peers, global worry about the world and future, as well as preoccupation with death (Rosslet & Stauffer, 2013). These rumination issues were usually accompanied by excitable emotional status and heightened awareness of feelings, and the combination of so many maladaptive cognitive processes encourage speculation on how it alters the way

children perceive reality (Rosslet & Stauffer, 2013). Many of these children were turning out lonely, insecure, and anxious despite their development intellectually, physically or artistically. Social interaction in the form of play seemed to be the most effective way to increase social skills and have good transference of skills, especially for the age group (Rosslet & Stauffer, 2013). The use of DnD and fantasy was a crucial part for their research on its projective abilities for identity and communication comfort for children (Rosslet & Stauffer, 2013). There is evidence to support that in this framework, fantasy settings and stories have the ability to promote self-awareness and growth in children, and the role-play aspect can have implications for collaborative social skill acquisition (Rosslet & Stauffer, 2013). Freedom expressed in interpretation of the self was an important aspect of the work that encouraged the individuals to engage with themselves and others more fully (Rosslet & Stauffer, 2013).

Abbot et. al. (2021) researched DnD and its connection to social anxiety in 2021, right after the full hit of the COVID-19 pandemic. Due to the quarantine, and other variables in the last decade, social anxiety and loneliness have hit a new high (Abbot et. al., 2021). The researchers proposed a solution in the form of DnD (Abbott et. al., 2021). This proposition seemed to be an answer into the issues currently striking individuals with social connection issues; if they were worried about approaching treatment, the gaming aspect of DnD could be considered relaxing and approachable. The authors also note that most of the research on DnD in therapeutic spaces revolved around adolescents and children, with little to no research on how it has been studied with adults (Abbott et. al., 2021). If there was an issue about the availability or accessibility to treatment or therapy, DnD could be a completely home-made game done with friends online, without ever having to show your face or even buy any supplies. Taking a play therapy framework when looking at DnD, Abbott et. al. discuss the useage and history of the game in therapeutic spaces when treating social connectedness (Abbott et. al., 2021; Adams, 2013; Rosenblad et. al., 2025). There was also a highlight on the collaborative nature of the game, the game being one where the bonds you form with the NPCs that the GM may have created and played in interaction with your character are important (Abbott et. al., 2021; Wilson, 2024). A player will also form bonds with the other players over their own characters interacting together and in certain situations where socially, a person may not feel adept unless they are relaxed and playing. Players bonding together over an experience as involved as this can be a key to helping them form lasting and supportive connections with others (Abbott et. al., 2021).

Abbott et. al. (2021) note the difficulties and lessons learned throughout the process of playing the game, where they strategized to have a GM with experience oversee the actual game itself and a facilitator as a playing character who could monitor and watch the patients more closely and help facilitate interaction between players. One example highlighted from the experience was one where the players' characters had encountered a sand trap, and had to make a swift decision to ensure the safety of their characters. When faced with this decision to be quick and feeling the pressure to make a "right" decision, facilitators and the GM were able to help the process along and found that the players, though initially nervous, were still excited to see what would come next regardless of making a "right" or "wrong" choice (Abbot et. al., 2021). The analysis conducted found that the members of the party that played with the GM found confidence and the ability to confront things they may not have been able to before. There was also an expression of the freedom of being "wrong" when making a mistake, and the judgement-free feeling that followed. Though these skills were being taught and utilized within the safety of the therapeutic group, transference was to be considered. Members of the party told personal recountings of moments they felt empowered and understood how to speak up for themselves, despite having worries or negative thoughts about doing so in the first place (Abbot et. al., 2021). The DnD group had proven to be a good teacher and a stepping stone for the party members in the group, and a learning experience overall for the practitioners and patients both (Abbott et. al., 2021).

More modern research has shown that DnD and TTRPGs can be applied to a therapeutic setting when working specifically with groups that struggle with social anxiety, phobias, social connectedness, autism spectrum disorder (ASD) and depression, including some limited research on its effects on trauma and PTSD (Abbott et. al., 2021; Adams, 2013; Bean & Connell, 2023; Billieux et. al., 2023; Blackmon, 1994; Gifford, 2024; Hand, 2021; Merrick et. al., 2024; Mendoza, 2020; Wilson, 2024). While research on DnD and TTRPGs as treatments for various mental health concerns, most leaning towards a less severe place, there are still many opportunities and works on its' usage in therapy with more severe and involved treatments for complex trauma.

Current Research

When looking at the usage of different types of therapy used to treat PTSD, one of the most recommended and useful therapies seems to be exposure therapy and most variations of it (Bisson & Olff, 2021; Wilson, 2024). Imaginal exposure therapy and relationality from the self to the character can help clients move towards a more rational way of thinking about their traumatic experiences and inform how they should move forward (Wilson, 2024). While imaginal exposure shows evidence of being a useful treatment method, many situational uses of it to treat certain trauma can cause concern from both clinicians and clients (Ruzek et. al., 2014). However, there is evidence that DnD and other TTRPGs can be used to fulfill needs of many individuals with trauma and mental health issues (Adams, 2013; Mendoza, 2020). Specifically, the targeted nature of DnD towards social needs that is already quite prevalent in the therapeutic literature, there are many more ways to find how

RPGs and TTRPGs can be effective in treating other aspects of PTSD symptomology (Adams, 2013; Rosenblad et. al, 2025; Wilson, 2024). There is evidence supporting DnD and TTRPG therapy, and its usefulness as exposure therapy for PTSD, interpersonal help for C-PTSD, and a way of restructuring narratives around the traumatic event experienced (Gutierrez, 2017; Wilson, 2024).

One example of exposure in the form of role-play is the usage of a type of LARPing known as Military simulation, or MilSims. In some cases, MilSims are used in tandem with therapy or as a personal form of therapy for many war veterans struggling with PTSD (Dusseault & Shanks, 2014; Mendoza, 2020). Dusseault and Shanks (2014, pg. 1) state that “the movement of troops among the cacophony of heavy machines provides an immersive sensory environment for exposure therapy.” While there have been concerns expressed from some individuals about actually participating in exposure therapy for PTSD, and some forms of trauma would be extremely unethical to recreate, LARPing and role-playing game experiences like this one have created a safe space for life-like exposure (Bleiberg & Markowitz, 2019; Henrich et. al, 2021; Mendoza, 2021; Wilson, 2024). These large form group exposure therapies with narrative elements sometimes embedded have been found useful by the gamers involved (Dusseault & Shanks, 2014). Imaginal exposure has been cited as one of the first-line treatments, and DnD has been argued as a way to involve exposure therapy in a new way with individuals who might have reservations about the process of exposure therapy. The exposure of sensitive and formerly traumatic information in a TTRPG session, where the environment can be controlled and safe, can enable a lot of personal and group therapeutic work to occur.

Wilson (2024) argues that through transtheoretical therapies and utilizing pieces of many trauma-related models, DnD storytelling, role-play and game mechanics can serve as different therapeutic aspects of the game in treating trauma. Looking at the trauma treatment models we currently work within, there are arguments that roleplaying games can line up actively with many of the techniques already being used. When looking at the efficacy of individuals actually using DnD to process or understand their own traumatic experiences, Wilson (2024) utilizes observation, survey and interview to study the participants experiences. By also applying multiple social and learning theories to the information parsed from their participants, Wilson (2024) is able to understand a fuller picture of the efficacy of treatment. In the research detailed, the synthesis of the information and total analysis shows that in a combination of “stress reduction, cognitive processes, internal dynamics, social influences, and immersive gameplay”, players are able to find and use effective and diverse coping strategies (Wilson, 2024, pg.183). There are arguments made to state that the fantastical nature of DnD and fantasy stories in general are relaxing for patients when needing to confront something painful or uncomfortable in nature (Blackmon, 1994; Wilson, 2024). This method of bringing unconscious material to the surface can prove a powerful tool, and sets the stage for other uses of DnD in different theoretical applications. The data extracted from participants were all anecdotal, qualitative stories on the role DnD played for many people. In the case for many of the participants, themes of Therapeutic Exploration, Coping and Stress Reduction, Escapism and Emotional Depth emerged from the literature (Wilson, 2024). Within each of the stories provided on working through a traumatic experience, encountering the help and interconnectedness of the party and acceptance from players. There was also an element of stress management, with alleviation of stress and usage of exposure to similar troubling events being vanquished in the stories they told being a coping mechanism that helped many participants feel accomplished and less stressed while in their new world (Wilson, 2024). However, with this data being purely qualitative in nature, the author may struggle to find generalizable evidence based support for treatment of other complex traumas.

Quinones and Somers (2024) provide more to the full picture on the treatment of PTSD and trauma with TTRPGs. They speak about the social connectedness and usages of TTRPG in therapy, while offering a view into the most recent studies done on gaming and PTSD symptoms reduction. They give an example with a person named Golgotha, a man who grew up surrounded by violence and trauma who suffered from many psychological disorders and physical issues (Quinones & Somers, 2024). At the beginning of treatment, Golgotha was extremely violent and aggressive, the next minute silent. He had been previously playing DnD with his father and some staff at the residential home he was placed in, but when the players quit the campaign, Golgotha lost his social connections to others and a means of control and routine in his life (Quinones & Somers, 2024). However, by re-implementing DnD into the current work he was doing in therapy, the clinicians saw steady improvement in his condition (Quinones & Somers, 2024). An emphasis on the need to understand and work with a client where they are metnally and emotionally is a piece of therapeutic work in which DnD can be quite flexible, being not only a game that has malleable rules and settings but can be switched to a home-made game quickly and easily. The authors end this chapter with a call for more studies on this subject, to enable this type of TTRPG therapy to become a methodology used more often in the field (Quinones & Somers, 2024).

Future Direction

The literature that currently exists on the usage of table-top role-playing games as treatment for PTSD is scarce in full experimental design regarding PTSD specifically. There is, however, a plethora of qualitative work done by many researchers in dissertation work, full article journals and case studies. Though this research is helpful and rich in data supporting people’s perceptions of DnD in therapeutic spaces, all of this work is completely qualitative, and none utilize a control group or are able

to make claims of a causal relationship. Research done in the field has only evaluated the thoughts from case studies or qualitatively analyzed the feelings of the experience, and lack a formal way to claim efficacy in treatment. There has also been no specific focus on PTSD or C-PTSD alone; often, works will include other mental illness measures or diagnoses; some of the most common ones are depression, anxiety, and bipolar disorder (Abbott et. al., 2021; Mendoza, 2020; Wilson, 2024). Unfortunately, this may not paint a full picture of exactly how DnD and TTRPGs could be utilized in a therapeutic scope for treating trauma and stand up to regular imaginal exposure therapy or narrative therapy practices alone (Minnen & Foa, 2006). Though the literature may be lacking in much quantitative and generalizable information, this work on perception and qualitative data can become a jumping point for many researchers. Conducting a formal test over a period of treatment time, while utilizing guidelines of therapeutic role-playing games in a study up against imaginal exposure or other evidence-based practices like EMDR may be a research study that will shed light on the efficacy of this treatment modality. Key questions arise in just how effective this level of imaginal exposure combined with fantasy may provide, how we can improve or work upon the game to make it more useful for many types of trauma treatment, and how we can standardize TTRPG gaming in the therapy space.

Conclusion

The nature of TTRPGs and role-play is one that lends itself to creativity, self-discovery and one that emphasizes our natural social nature as human beings (Abbott et. al., 2021; Merrick et. al., 2024). This game has been used in many therapeutic settings, specifically ones involving treating social anxiety and other mental health issues on psychological support (Abbott et. al., 2021; Blackmon, 1994; Bean & Connell, 2023; Mendoza, 2020; Wilson, 2024). While the nature of this work on PTSD and trauma is limited, the core tenets of the game can heavily impact and help individuals with trauma through a framework that encourages group support, imaginal exposure, and generates discussion around issues that may need a voice through fantasy.

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