The Practice Of Drama Therapy

Drama Therapy is a subtopic of Applied Practices in theatre, it’s aim is to expedite the process of personal growth and facilitate good mental health or well-being in patients who have experienced trauma or struggle with mental health or their idea of self. According to research by Robert J. Landy (1994), aspects of drama therapy such as acting, dance, rhythm and performance have been used as a therapeutic technique to help people deal with trauma and aid in personal growth since the late eighteenth century, although this was not a professional treatment. The idea of using drama as a therapeutic resource was first formally suggested by Dr J L Moreno in 1946 because he noticed that professional actors felt that they used their personal experiences to inform improvised performance and saw a therapeutic opportunity in this. It wasn’t until the late twentieth century that psychologists, therapists, and practitioners coined the term ‘Drama Therapy’ and professional drama therapists began to use the practice to help their patients. In the following essay research on the topic of drama therapy and its history by research teams will be discussed. The authors are Robert J. Landy, Efrat Kedem-Tahar and Peter Felix-Kellerman, and David Read Johnson and Renee Emunah.

In Robert J. Landy’s book ‘DRAMA THERAPY: Concepts, Theories and Practices’ (1994) — Landy discusses the psychological aspects of dramatherapy and how it relates to other psychotherapies. Landy looks at the way in which drama therapy is often very successful and can be used to promote self healing and positive mental well-being. Landy (1994) argues that drama therapy is very similar to Freud’s model of psychoanalytic psychotherapy. His book details the idea that the verbal and physical nature of expression within drama therapy is very similar to the way in which therapists and psychologists would prompt their clients to describe their experiences. Landy posits that the process of describing difficult events can often induce a dramatic mode rather than a narrative stance, and Landy's experiences have led him to suggest that this engages the client in a psychoanalytic dramatization. Landy suggests that this offers an accurate way to delve into a patient's psychological issues. Psychoanalytic dramatization is defined by Landy (1994) as the way someone undergoing psychoanalysis transforms their dream thoughts into a pictorial or dramatic format which then allows them to participate in the dream by interacting with the drama therapist. This suggests that instead of the patient working through their trauma or problems in their heads they place the character who has caused their trauma on their drama therapist and then confront this person to work out their emotions and work towards mental stability.

Landy furthers his idea that drama therapy is similar to psychoanalysis by introducing the theory that drama therapy helps to unearth unconscious thoughts and unexpressed feelings by creating a dramatised representation of those thoughts and feelings (1994) through movement, sound or visual imagery. The client is then able to harness the power of that imagery to work towards a greater understanding of their issues and how to deal with them. Landy proposes that this technique is a base tool used in most therapy sessions to help a patient overcome trauma or allow them to process their emotions and conform to Freud’s theory of balance between the id, ego and superego (Freud, 1923). Landy appears to consider Freud’s theory to be one of the most powerful means of diagnosing and treating a psychological imbalance. Following this set of psychoanalytic diagnostic techniques, Landy proposes that using drama as a platform to express the patients emotions is among the most successful ways to stimulate self healing and

good mental health within the patient.

Continuing the narrative around different elements of its history, in Efrat Kedem-Tahar and Peter Felix-Kellermann's article, published in 'The Arts in Psychotherapy' journal in 1996, also discusses the similarities between psychodrama and drama therapy, as well as the differences. In this article, Felix-Kellermann and Kedem-Tahar propose that although the two therapies have almost identical creative action methods, psychodrama became more clinical in its approach to the patients as it became more widely used as a group therapy - unlike drama therapy which can be used as a tool for just one patient or a large group due to the nature of experimental theatre and the very specific methods that could be used on the patients. In their discussion on the methods used in psychodrama, the Kedem-Tahar and Felix-Kellermann explain that the therapy uses real-life situations, role reversal, mirroring and externalising the mental process which gives the patients achieve some level of closure and move them towards a better mental state. They then emphasise the contrast between the two therapies by stating that drama therapy uses improvisation, spontaneous theatre and play theatre methods within the therapy. This has led it to be less carefully controlled and without a systematic approach which makes drama therapy more akin to the way a child might naturally play, and is arguably more successful because this helps patients explore their psyches and start their own self-healing process..

However, the theory that psychotherapy is becoming more clinical or controlled and less akin to drama therapy is prevalent in their article as Kedem-Thar and Felix-Kellermann suggest that the natural development of the therapy in a clinical environment was bound to change may have contributed to making psychotherapy more controlled because it is a more impersonal setting which might lead the practitioners to feel like they should act in a more professional and slightly more dispassionate way and adhere to a more formalised and structured environment that drama therapy lacks. Following this, drama therapy is generally considered to be lacking in a systematic coherency of its own because drama therapy is more naturally free-flowing and does not conform to a restricted scheme or apply a particular set of techniques nor does it need a set of techniques appointed by one person. Felix-Kellermann and Kedem-Tahar suggest that this lack of strict rules to follow makes it possible for drama therapy to be successful in a different way to psychotherapy because it is more spontaneous and allows a clearer and more personal exploration of the patients emotions.

Ultimately, the authors of the article suggest that whilst drama therapy and psychodrama share many similarities and few differences, drama therapy is generally considered safer by many. Whilst it could be considered that drama therapy could be seen as more superficial due to its focus on the surface material unlike psychodrama which is a deeper investigation into the psyche and the unconscious thoughts of the patient, both have shown the potential to be equally successful in their outcomes as patients reach a place of mental stability and well-being after their treatments.

Comparably, in David Read Johnson and Renee Emunah's book 'Current Approaches in Drama Therapy' they discuss how drama therapy has developed since it was first suggested as a therapy in 1946 by Dr Moreno into the form of therapy that is used in prisons, hospitals and schools today. They first suggest that Moreno's psychodramatic writings created a strong base for the ideas within drama therapy which is why the two therapies can be considered so similar - however, in the 1960s, a new group of mental health in theatre advocates encountered Moreno's idea of drama therapy and went on to develop his version of drama therapy,

development which continued due in no small part to cultural changes that resulted from the Vietnam War. Johnson and Emunah then discuss how Moreno's desire to have drama therapy recognised as an official therapeutic treatment as well as having his work recognised by other psychiatrists and psychologists in his field led to him developing drama therapy into something that could be considered reminiscent of a psychiatric interview. Johnson and Emunah then detail how, in their opinion, five practitioners helped to create drama therapy as a profession; they name Eleanor Irwin, Marian Lindkvist, Sue Jennings, Richard Courtney and Gertrud Schattner as the people responsible for the development of drama therapy from an idea into a treatment for people who struggle with mental health and their own personal growth. Johnson and Emunah then suggest that in the late 1970s, the lines between drama therapy, psychodrama, psychotherapy and play therapy all became blurred because they shared similar creative actions at the time. These five practitioners then evolved their approach such that psychotherapy and psychodrama had more distinctions from play therapy and drama therapy because they were more clinical in nature. Drama therapy and play therapy were then distinguished from one another by the fact that play therapists had worked to develop more definable techniques that were used regularly in therapy situations, unlike drama therapy which doesn't adhere to a set of techniques or methods. Drama therapy practitioners found that when they used a strict structure, the patients tended not to improve and the objective of improvement to mental health through drama therapy was not reached.

Robert Landy followed up on his earlier work within the edited book 'Expressive Therapies' (Landy, 2005) In 'this updating of his earlier work he discusses how his research into the history of theatre, particularly in the Western world, has led him to identify a set of roles that he feels appear regularly in theatrical works and that exemplify most forms of human behaviour. He further develops his idea by suggesting his method for selecting and incorporating individual roles from within the set for use in therapeutic sessions to help his clients come to terms with dualities in their experience - he gives the example of someone who is both victim and survivor. In a group environment, Landy suggests that all participants can share their experiences of this duality by acting out the roles that reflect it for them. Landy details the eight stages of the process that he feels are necessary to fully realise the potential of drama therapy to help someone struggling with their mental health. The process was developed from his experiences as a drama therapist over the years. Landy discusses the fact that the starting point and initial warming up process for drama therapy and psychodrama remain similar. He suggests that the divergence occurs at the point where in psychodrama, one participant may be nominated to take the lead, other participants becoming supporting players, whereas in drama therapy the entire group can continue to contribute in order to identify common issues amongst them. Landy suggests that by working together to establish which roles are present in a given situation the individuals in the group will be better able to identify the roles present in their own specific experiences and, upon reflection, how to achieve a balance between them. Landy also explores the concept of developmental transformation within drama therapy, a form that considers the process of acting out a situation as a complete form of cathartic therapy, with no requirement for reflection. Landy also refers to the work of David Read Johnson (1988) in developing the Diagnostic Role-Playing Test, and Eleanor Irwin's (1985) development of the Puppet Interview, two diagnostic tools used within the early stages of the drama therapy assessment process.

In summation, this review of the literature traces the path of drama therapy as it developed from psychoanalysis through psychodrama to its current form alongside other active therapies to become a relevant and contemporary part of the suite of tools available to psychologists to help those struggling with mental health difficulties in modern times. The literature speaks to the non-

prescriptive nature of drama therapy, a quality which allows it to adapt easily to work with both groups and individuals to address their experiences.

Bibliography

1. Freud, S. (1923) The Ego and the Id. Vienna: Internationaler Psycho-analytischer Verlag.
2. Irwin, E., (1985). Puppets in therapy: an assessment procedure. American Journal of Psychotherapy, 34(3), 389–400.
3. Johnson, D. R. (1988). The Diagnostic Role-Playing Test. The Arts in Psychotherapy, 15(1), pp. 23–36.
4. Johnson, D.R., Emunah, R., Lewis, P., (ed.) (2009) Current Approaches in Drama Therapy. Springfield, IL: Charles C Thomas.
5. Kedem-Tahar, E. and Felix-Kellermann, P. (1996) ‘Psychodrama and Drama Therapy: A Comparison’, The Arts in Psychotherapy, 1, pp. 27 - 36.
6. Landy, R. (1994) DRAMA THERAPY: Concepts, Theories and Practices. Springfield, IL: Charles C Thomas.
7. Landy, R. (2013) ‘Drama Therapy and Psychodrama’, in Malchiodi, C. (ed.) Expressive Therapies. New York, NY: Guilford Publications, pp. 90 - 117.
8. Moreno, J.L. (1946) Psychodrama: First Volume. New York: Beacon House.