

# Drama therapy in reduction of vicarious trauma psychology essay



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Drama therapy is defined as an intentional and systematic application of drama/ theater processes, products, and associations towards achieving therapeutic goals of symptom relief, emotional and physical integration and individual/personal growth. Therefore, the goals of drama therapy are established from psychotherapy and the tools to achieve these goals are derived from theater

Children use drama as therapy spontaneously, with no outside direction or pre-imposed structure. Dramatic play is the child's method of: symbolically expressing and resolving internal conflict; assimilating reality; ...releasing pent-up emotions; learning to control potentially destructive impulses through fantasy; expressing unaccepted parts of the self; exploring problems and discovering solutions; expressing hopes and wishes;...and developing a sense of identity (cited in Emunah, 1994, p. 4).

These fundamental dramatic play functions in children's lives are also relevant to everybody regardless of age towards building psychological growth and change. These plays " help client to tell his or her story to solve a problem, achieve catharsis, extend the depth and breadth of inner experiences, understand the meaning of images, and strengthen the ability to observe personal roles while increasing flexibility between roles" (Emunah, 1994) The experience by psychotherapists of failure of traditional verbal therapy to confront and work through client discomfort led to the evolving of drama therapy. The balance of verbal and non-verbal elements of play therapy together with its language of metaphor enables individual to work effectively within a therapeutic session.

Trauma experiences that have been proved to be toxic to peoples' life can be recapitulated to workers who are supposed to be helping the traumatized clients. This has detrimental impact on the clients and also can lead to demoralization of help givers and wastage of resources. It can also lead to the belief that the clients receiving the help are the cause of the problem and that the client's condition is hopeless and they cannot be assisted or helped. This transfer of trauma from the client to the care giver is known as vicarious traumatization (Kellermann, 1992). Vicarious trauma is inevitable while dealing with clients who have suffered major losses or suffered terrible events. It cannot be avoided but can be modified or reduced through drama therapy (Jones, 1996).

## **Vicarious Traumatization**

Vicarious traumatization also known as secondary traumatization is the impacts of working with clients who have experienced trauma through the narration of their story about the experiences. It is called secondary because the person affected by the trauma has no direct link with the event that led to the trauma but experiences the trauma indirectly through their client (Andersen et al, 2000). A good example is of workers helping the refugees. Since the refugees have suffered major losses and life-shattering events, those working with refugee such as teachers, medical doctors, and immigration workers among others will be subject to vicarious traumatization and its impacts. Vicarious traumatization is usually a slow, cumulative process that takes place in the course of hearing many stories of loss and pain (Emunah, 1994 & Axline, 1947). This makes it difficult to detect its impacts on the care givers lives. In most cases the care givers do not realize

that they are suffering from vicarious traumatization until when it is too late and they have burned out. The impact of vicarious traumatization like the impacts of trauma itself is serious and can be permanent. It interferes with the care givers/workers ability to do their work effectively and this highlights the need to recognize, monitor, and minimize the effects of vicarious traumatization on workers lives (Kellermann, 1992).

## **Understanding Vicarious Traumatization and Its Impacts**

As defined above, vicarious traumatization is the experience of trauma related stress that is often caused by working closely with trauma victims. Trauma in definition is any experience involving serious threat personal harm or harm to others and excessive negative emotions like fear, helplessness, rage, and grief. These experiences can happen at any time of the life of individuals who have gone major losses or suffered terrible occurrences for instance in a refugee life it can occur during resettlement process or any other phase of a refugee life (Jones, 1996).

It is not possible to hear stories of tragic losses, human brutal harassments, gross injustice, and needless suffering and remain unaffected by such stories by workers who encounter human suffering on daily basis. The only way to remain unaffected is only by choosing to be numb by blocking our senses but this most often leads to ineffectiveness in service delivery and can also lead to depression and other associated problems(Jones, 1996). The fact is that we are changed by the nature of our work usually in ways we do not want. For example a volunteer who is optimistic on him/herself towards helping refugee may change drastically and become increasingly cynical and

discouraged because of the unique stress emanating from his/her job (Andersen et al, 2000).

Vicarious traumatization can take various forms which are determined by an individual and the work environment. The fact that people response to stress are different, there is no single symptom or set of signs that provide absolute evidence of vicarious traumatization or an exhaustive list showing all the signs and symptoms. Nevertheless, many of the impacts of vicarious traumatization are similar to the impacts of the trauma itself. Some of the signs and symptoms of vicarious traumatization include; fatigue, depression, withdrawal from other or from activities, loss of trust, demoralization, cynicism, disillusionment, lack of sleep, loss of sense of humor, lack of emotional control and strong emotional reactions to minor occurrences, and difficulty , making decision among other symptoms (Kellermann, 1992).

Like water flowing over a rock in a stream, on daily basis nothing seems to be happening to the rock but several years later, have of the rock will be worn out. Similarly, vicarious traumatization is cumulative and on a day-to-day basis, we may hardly realize that we are experiencing stress. Eventually the vicarious traumatization wears us down and if not dealt with, it leaves us in an exhausted position. Once in this exhausted position we are unable to think clearly, make rational judgments, listen carefully, or even help others effectively (Jones, 1996). In addition, attributes such as cynicism, disillusionment, despair among others becomes part of our permanent identities (Carey, 1990). These are serious and damaging impacts.

Fortunately, such impacts can be reduced by taking an active role of

reducing such stresses that are associated with working closely with trauma  
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survivors. The first step towards addressing vicarious traumatization is to accept that such trauma does exist and have an understanding of the contributing factors of vicarious traumatization (Sue, 1994).

## **Management of Vicarious Traumatization through Drama Therapy**

Some researchers argue that dramatic activities do encourage a removal from the reality which is an escapist way of being, relating to others, and relating to the world. Others argue that theatre and life are totally different states and if they do relate, it is only within the confines of a theatre with its formal demarcation of performance and audience areas. Some argument view adult dramatization as being regressive returning to the experience of the child in play. Nevertheless, some scholars argue that drama and living are virtually connected. As Evreinov wrote " theater is a human impulse necessary to health living (cited in Jones, 1996). Drama therapy acknowledges that a part of this want and impulse can be employed in the maintenance of health and coping with emotional and psychological problems (De Dominico, 1988 & Gil, 1994). The creation of world of fictions, play world, and the creative process itself does not need only to be seen in the perspective of an unhelpful retreat from the reality but rather be seen as an important part of living in the world. Creativity in drama therapy has a healing, life-affirming aspect. The fantasies and the artistic daydreams help in conquering the painful limits of existence. They also help in dealing with our basic conflicts (Carey, 2006).

Over the past two decades, acknowledgement of drama as a therapy has changed and this has led to the emergence of drama therapy as practiced <https://assignbuster.com/drama-therapy-in-reduction-of-vicarious-trauma-psychology-essay/>

today. These changes have two main aspects as observed by Jones that "... drama therapy session can deal with primary processes involved in the client's change rather than being adjunct to other ways of working, such as psychotherapy...that the root of this process is in the drama. Drama therapy is not viewed by those who support it as a psychotherapy group containing dramatic activities but rather the drama process contains the therapy itself (Jones, 1996).

## **Drama therapy techniques**

Various elements of drama therapy combined together make drama therapy effective. These elements explain the way in which drama processes are therapeutic. These elements are not specific to any drama technique but their focus is on fundamental processes within all drama therapy. The key areas of drama and theatre which are of essence to drama therapist includes; the process of entry into playing as a character, entry into dramatic state, dramatic communication, relationship between the dramatic frame and real life frame, performance processes, and the audience together with the process of witnessing in theatre. These drama elements are essential in developing the healing power of drama and theatre and out of them there emerges series of dramatic processes which are crucial towards making drama therapy effective (Carey, 2006, Sue, 1994).

The first core drama process is dramatic projection. Wilshire in his work *Role Playing and Identity* describes the relationship between stage space and audience in a way that help us to see how drama projection relates to drama therapy. He observes that "...the constant attractions and the needs for

theatre is that we see ourselves 'writ large'" (Wilshire, 1982 cited in Emunah, <https://assignbuster.com/drama-therapy-in-reduction-of-vicarious-trauma-psychology-essay/>)

1994). According to this observation, seeing ourselves the way we are leads toward changing oneself according to the way we understand or see ourselves which may include a change in our perspective. In addition, as an audience, we may identify with some of characters on the stage through motivation, experience or attitude. This may also be accompanied with projection of our own motivations, feelings and experience according to the direction provided by the actor. Drama content and action witnessed by the audience can lead to a shift of their relationship with the projected feelings during or after the performance. In turn, this may affect the way the audience understand and feel about part of themselves that have been engaged with the projection (Sue, 1997). This projection and identification with the drama scene are not only to the clients that could be suffering from trauma experiences but also to the therapist who from the traditional verbal expression may be a subject to vicarious traumatization because they are actively involved as an actor or audience and also the way the client expresses his or her inner feelings through acting has lesser vicarious traumatization impacts. Though some theory such as classic Freud sees projection and identification as a defensive process, the drama therapy sees it as an important process that develops important relationship between inner emotions and external forms and presences (Weber et al, 2005 & Carey, 2006).

The other core process of drama therapy is the therapeutic performance process. This process includes need identification, rehearsal, showing, and disengagement. There are two impacts within this process. The process enables the client to find expression for the material to be worked on and the



working means with the material. During rehearsal and showing, client can shift their relationship to personal material by playing different role in the enactment or by directing alternative ways of the play. The focus here is to explore the content displayed by the client (Emunah, 1994). Clients and therapists may become role player or an audience member for a while. Taking these roles may be therapeutic for both the clients and the therapist for it provides an opportunity for a change in the link with the material or shift in perspective concerning the expressed material. The client and therapist involvement with the medium of drama through acting may allow them to experience their own creativity. Eventually they may be able to bring this creativity to bear upon the problem being focused within the action. This creativity may necessitate a change as the client and the therapist is able to address the problematic material from various perspectives (Sue, 1994). For instance, outside drama therapy session, a client or therapist may be stuck with a problem but they may feel capable of finding the solution through creatively engaging and experimenting new alternatives in the drama (Miller, 1994).

Empathy and distancing which are other processes within drama are often two opposing powers within theatre and drama therapy. But it would be beneficial if we see both as part of any reaction that result from a dramatic phenomenon either in a theatre or therapy. One may be established more strongly than the other but it is irrational to describe a response as being completely distanced or empathized. Empathy and distancing are associated to mediation and the ways in which an individual interact with others and happenings in life. As Landy observes, " healthy functioning requires a

balance of feeling and thought" (Landy, 1986, 98 cited in Emunah, 1994 ).

Empathy creates a bond between the actor and the audience. It is determined by the capabilities of the audience to identify with and engage their emotions with the character. It can also be evident within the character themselves through the role they are acting with. On the other hand, distancing is where the character does not allow total transformation on the stage into the character he is acting (Miller, 1994).

Empathy development in dramatic activities is therapeutic in itself. For instance clients may have a problem of establishing relationship due to lack of abilities to empathize with other. Empathetic responses during therapy sessions encourage the client to empathize with others outside the drama therapy. On the other hand, distancing encourages participation that is more focused towards thought, reflection and perspective. This means that the client function as a reader to the material without being disengaged from the material but involved with it from a different angle (Allen, 1988). This helps the client to develop perspective on themselves or an event. The degree of response, of empathy and distancing within an action can be used as an instrument in the assessment of client's relationship with the material they present (Emunah, 1994).

Drama representation is described as the means chosen to express material within a drama session. Two particular elements common within drama practice are personification and impersonation. Personification is representing a person quality using objects dramatically. Impersonation on the other hand refers to role playing of an imaginary person (Miller, 1994).

These two elements provide the client or the therapist a given focus of  
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expression and exploration of problems and concerns. It enables the client to have a taste of what it is to be another (Emunah, 1994). This links the process of developing empathy and eventually developing the ways a client interacts with others. It can also help in the process of viewing a problematic circumstance from the point of view of another person. Participation of fictional material through personification and impersonations can develop opportunities to change and explore the concern in a new direction. This fictional world enables client explorations which the client might deny in the normal life circumstances.

Play activities which is another process in drama therapy is described as the expressive language in the therapeutic sessions. In early stages, a play usually contains games and warm up activities. A state of playfulness is developed and the client enters into a special playing state. This playful session has a link with reality. The links are exhibited by a more creative, flexible attitude towards action, impacts and held ideas. This allows the client to adopt a playful, experimenting direction towards themselves and their life encounters (Miller, 1994).

. This makes play to be seen as part of an expressive continuum using specific language such object play, toys, and games among others which is seen as part of how the client explores material in drama therapy (Weber et al, 2005)..

## **Conclusion**

In many occasions, work in drama therapy involves a direct dramatic representation of reality for instance playing a role of real life event or an

improvised experience. At other time it is indirect relationship with real life event. Many activities give a number of various types of connection simultaneously. For example a realistic role play of relationship between a client and her mother, exploring unaddressed problem may have various importance. To the client presenting material, to the other actors and audience, the relationship, may symbolize a struggle between self and personified by the mother and daughter (Miller, 1994).. The process of being involved in drama activities and the potential creativity of enactment can bring transformation in a person's life. This is as result of transformation of identity- the artist in the client is established within drama therapy. The development of dramatic products, the participation in dramatic process can result to a combination of thinking, feeling and creativity (Sue, 1994). This combination has a potential to transform different aspects of client's way of understanding and responding to themselves and the world. The interactions which the client forms in the drama therapy can be transformative experience. Past interactions, events and ways of addressing them cab be brought into the current drama therapy and be reworked within the drama.