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An Adolescent in Individual Drama Therapy:
Exploring Meaning, Power, and Creativity through Co-Construction and Narrative Therapy Influences.

Amy E. Thomas

A Research Paper

In

The Department

Of

Art Education and Creative Arts Therapies

Presented in Partial Fulfillment of the Requirements
For the degree of Master of Arts
Concordia University
Montreal, Quebec, Canada

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Abstract

An Adolescent in Individual Drama Therapy:
Exploring Meaning, Power, and Creativity through Co-Construction and Narrative Therapy Influences.

Amy E. Thomas

This paper is a documentation of an adolescent's journey in individual Drama Therapy. Narrative therapy and the theories of co-construction have inspired this work clinically and theoretically. The process is documented in a unique way, culminating in a document, a "script", which was co-constructed through our Drama Therapy sessions. The creation of the script contained and supported the clinical therapeutic goals, while empowering and supplying a vehicle for the adolescent to contribute her voice in a process that, traditionally, is dominated by the voice of the researcher. It is my belief that the creation of meaning in a therapeutic process is, in part, through the discourse and interactions between the therapist and the client. It is therefore my intention to attempt to honor this discourse. I hope therefore, that in this paper the voice and spirit of the young woman with whom I have worked is evident. This paper marks the beginning of my research into Drama Therapy and Narrative Therapy.
Acknowledgments

This paper would not be possible without the commitment and care of some fantastic people. Dizzy, the young woman with whom I have worked for the past academic year, whose bravery, creativity, and dedication have made this paper possible. Professor Christine Novy, who challenges both herself, and her students, with new ideas and new, innovative therapeutic practices. Professor Novy’s introduction of Narrative Therapy to our class made a profound impact on my therapeutic orientation. Dr. Stephen Snow, who provided invaluable guidance and support as both my academic advisor for this paper, and a professor of the past two years. Adam Halstead, Nicola Bangham, Marianne Dufour, Shlomi Emulah, along with other classmates, have fed my soul as well as my brain.
Consent Form

This is to state that I voluntarily agree to participate in a program of Drama Therapy process inquiry (case study) lead by Amy E. Thomas of the Creative Arts Therapies Department at Concordia University. The practicum is supervised by Professor Christine Novy and research supervision of Professor Stephen Snow.

The research information will be gathered through our 22 week Drama Therapy sessions which will run from September 1999-April 2000. I understand that I may choose to discontinue participation in this project at any time, which will not affect my access to therapy.

Purpose: The purpose of this research inquiry is to complete requirements by Concordia University for the Creative Art Therapies Graduate program.

Procedures: The format of this research will be a case study. Part of this case study will be created (co-constructed) with the participant which will include the use of; questionnaires, audio and video recordings, poetry, scripts, photography, and other creative media accumulated in the 22-weeks of work.

Conditions of Participation: The participant’s identity and location will be kept confidential; the storage of all creative media generated during this process will be negotiated with the participant; the participant agrees to permit publication of all work (including creative media). Participant will be notified prior to any publication.

I have carefully studied the above and understand this agreement. I freely consent and agree to participate in this exploration.

Name________________________________________

Signature_____________________________________

Guardian’s Name________________________________

Guardian’s Signature___________________________

Date_________________________________________
Introduction

The therapist forms an alliance of equality in which her or his training as an expert is shared with the clients' expertise in their own lives. (Riley, 1997, p. 285)

I have decided to use an experimental, non-traditional format, in an effort to respect the voice of the young woman who is the focus of this paper. I am presenting the accumulated work of a Drama Therapy intervention with a 13-year-old girl in the care of Youth Protection. The intervention took place through my Drama Therapy internship at an adolescent group home over the course of 22 weeks. The first 10 weeks I will present by breaking down the sessions; examining the themes, techniques, and responses from the perspective of the therapist. The second 12 weeks I will present in the form of a "script". This script, created and edited within the process itself, is the documentation of the therapy process. Through this method of documentation, I intend to respect and, therefore, empower the young woman's voice.

My training as a Drama Therapist and as an actress influences my theoretical base as well as the language with which I write this paper. I am aware of the influence my style of presentation will have on the interpretation of the material and of the individual. I also recognize the power I have as a therapist as well as a researcher and, through this paper, have come to terms with the fact that this power is not bad or good, but simply is. However, in accepting the role of the therapist, thus accepting the power and influence I have on people's lives, I am tremendously aware of the ethical responsibilities that come with this power. The influence of Narrative Therapy and co-construction paradigms has also significantly affected both my clinical work and research method, as I shall expand on later.
Constructivists challenge the traditional separation between the knower and the known, arguing that processes inherent in the organism largely determine what is taken to be ‘the real’. The scientist is never independent of the observed world. (McNamee & Gergen, 1992, p.3).

When I first began to brainstorm this paper, I often told people that I wanted to write a paper that accurately depicted the therapeutic style in which I worked, as well as reflect my personal and professional ethics. I knew I needed both a language, and a style, that were compatible with my clinical approach — something that described my work, and addressed the need for harmonization of research and clinical practices in Drama Therapy. Initially, I did not intend to research in a particular style; however, I am now finding myself drawn to narrative, hermeneutic, and social constructionistic approaches. I take the social-constructionist view that meaning is created through discourse, through social interaction, through our past, present and future interactions with our social world. Thus, the creation of meaning in a therapy process is, in part, through the discourse and interactions between the therapist and the client. It is my intention to attempt to honor this discourse and minimize potential abuses of power due to the nature of research writing. For this reason, I hope that the voice of the young woman with whom I worked is as prominent as mine is, throughout this paper.

The client, in essence, does not have a singular ‘true’ story independent of a ‘reader’ to whom she is telling that particular story. Clients unveil the story of their lives in conjunction with a specific reader/therapist, therefore the therapist is always a co-author of the story that is unfolding, with the client(s) as the other co-
author(s). The resulting text is neither the client’s nor the therapists story, but a co-construction of the two (McNamee, & Gergen, 1992 p.73).

I will be working with a definition of therapy that combines the therapeutic aspects of both drama and psychotherapy. This definition is my own, one that emphasizes creativity and functioning to one's fullest capacity. The nature of drama is one that requires the development of co-operation, creativity, teamwork, and that promotes a sense of community. Therapy, in the psychodynamic model, promotes the development of trust and introspection, emphasizing individual or groups potential and its actualization. Drama Therapy, therefore, utilizes aspects of drama to achieve therapeutic results. These therapeutic results are not necessarily individually orientated; they may also be applied to communities. In this paper, I will be working with this definition of therapy relating to an individual adolescent, and have included it so the reader may have a clear understanding of my therapeutic perspective.

While researching and writing this paper, I have often questioned who it is I am addressing. While one answer is that this research is for the completion of my degree, I pushed further, questioning my intentions. This questioning propelled my feelings of responsibility to the individual with who I worked. Originally, I aimed to create a document that would be accessible to all, a document that adolescents and their families, social service providers, as well as Creative Arts Therapists could relate to and draw from. Although this type of document still appeals to me, and I would like to work on one in my future practice, I recognized that I needed to follow the requirements of the department in the completion of the program. Furthermore, I recognized the time involved in to create such a document would be considerably more than I had available to
me in my internship placement. Therefore, write this paper for an intended audience of Drama Therapists, Creative Arts Therapists, and fellow mental health workers. While the purpose of the paper is to document the journey of an adolescent in individual Drama Therapy, it is also to explore the aspects of co-construction and narrative therapy in a Drama Therapy framework.

I have made efforts to ensure the confidentiality of the young woman with who I worked and the locations of her placements. In doing so, pseudonyms are used. The young woman took the opportunity to choose her own pseudonym for the purpose of this paper. I gave her this to promote her sense of ownership and empowerment through documentation process. Immediately upon my request, she decided on the pseudonym, “Ice Angel”. This changed after several weeks to “Dizzy”. She explained that she chose this name because it was sometimes how she felt. I will thus refer to her as “Dizzy” throughout the paper.

Background

Description of Institution

The site for my practicum experience, this academic year, has been an adolescent group home for boys and girls. It is one of the few independently run group homes in the Montreal region. Originally opened over thirty years ago as a shelter for homeless and the needy, the management soon noticed an increasing number of children arriving on its steps, so they decided to develop the home into a residential center for troubled youth, specifically adolescents. There are now two homes, which can accept up to sixteen residents at a time. I will refer to the home as SQ.

From the beginning, the home was affiliated with a fundamentalist Christian Church. The home consists of a three-level hierarchy with a pastor at the top, overseeing most activities and playing the role of “Grandfather” to most of the residents. Second in
command is the Program Director, PD. He is in charge of the clinical aspects of the houses. PD receives referrals for placement from Batshaw Youth Protection and assesses each case before admitting a new resident. PD is also in charge of discharges and transfers, including authorization of back up (higher security crisis unit) for the residents. According to SQ's handbook on rights and responsibilities, PD is responsible for ensuring that the rights of individuals receiving services at SQ are respected and complaints resolved.

The rest of the staff comprises two head staff members (full time) and several part time/shift staffers. All staff members are childcare providers and most have completed or will complete, a university degree in childcare. The staff members are in charge of the day-to-day care of residents including: meals, homework, allowance, and scheduling — they know what is going on “on the floor”. They are there to support residents, hear concerns, and help work things out.

Although this was the site for my internship and where we did the majority of our work, I saw Dizzy in three different settings during our 22 weeks together. These three settings were all under the auspices of the Department of Youth Protection (Batshaw), with each facility operating with mandates of varying security. Because of violent outbursts, the SQ temporarily transferred Dizzy to a high security crisis unit outside of the city, where I saw her three times. The outbursts continued and Dizzy semi-permanently transferred from SQ to a medium-security group home within Batshaw Youth Protection a transfer that prompted the resignation of one of the head staff at SQ — Dizzy’s primary care worker. I was able to see Dizzy three times at her new group home. Since our termination, Dizzy has again transferred again to the crisis unit due to her violent outbursts, later transferring back to the medium-security group home. Please note that throughout this paper Dizzy often refers to the crisis unit as “lock up”.
The referral

According to Higgins, referral for participation in therapeutic work should include the following question: “What is the nature of the difficulties as defined by the different people involved in the referral: the patient, relatives, friends, etc?” (Higgins, 1993, p.17)

The Program Director gave general background information about Dizzy and described, in his opinion, the major difficulties/psychological considerations. The Program Director and I agreed that, from this information and information from other staff, I should informally meet with her. After a meeting with Dizzy, I would then have access to her case file, which would provide a complete legal background and her clinical history.

Taking the referral, I based initial assessment on interviews with caregivers, interviews with Dizzy, and reading legal case files. I wanted to use as many sources of information as possible and I was unable to obtain information from anyone outside the group home. Repeatedly the same themes emerged. According to staff members, Dizzy had several main difficulties including: lack of empathy, issues with aggression and bullying stemming from lack of anger control, and difficulty coping with her mother’s death. My initial assessment included the need to build self-esteem and work through feelings of emotional isolation due to the complex and tragic losses in her life. The staff indicated one of their goals for Dizzy was to develop her relationship with her brother (also living in the group home).

Out of the referral came the initial assessment; out of the assessment grew the goals. Based on the assessments and psychological considerations, goals were set for the Drama Therapy. Goals included: facilitating a positive therapeutic relationship; for Dizzy to experience a safe and creative environment; for Dizzy to creatively explore and
express emotions (specifically anger and frustration); to use Drama media in a way that would promote self-esteem.

**Dizzy's File**

The following is an account of the events of Dizzy's life according to The Department of Youth Protection. Efforts were made to obtain a variety of viewpoints on this account; however, I was unable to contact family members, and Dizzy’s Social Worker, Program Director and Primary Staff all concur with this account. When asked about her past, Dizzy referred only to her mother’s death and that she “moved around a lot” when she was little. I decided further questioning could cause trauma and discomfort and, therefore, ethically decided not to pursue Dizzy’s account of her past at that time.

Dizzy is thirteen years old and, although she lived at SQ (her “permanent placement”) when we met; she is currently not there. Dizzy’s involvement with Youth Protection began at a very early age because her mother was a repeat offender, and was in and out of jail for many years. In between her time in jail, her mother attempted suicide and was heavily involved with drugs. Dizzy has several half and step brothers and sisters, some of whom she has grown up with, and others she has just recently met. Dizzy’s grandmother has been the only consistent family figure in her life as they still have a relationship. I found, upon reading the file, that very little clinical was information provided. The file focused on Dizzy’s family history and her (violent) behavioral history. There were no notes on psychological assessments or evaluations and her admittance to a children’s hospital contained a summary of her history and little information regarding interventions or evaluations. The following is the record of events of her life to date.
In October of 1987, when Dizzy was 10 months old, her mother was sentenced to prison. As a result, Dizzy spent the next three months with her grandmother. At a year old, she transferred to a foster home for 18 months. Dizzy’s placement then extended for another three years due to her mother’s subsequent re-arrest. At the age of six, Dizzy returned home to her mother. After five months, Dizzy and her brother were ordered, by the courts, to a group home for a year, for reasons unknown. After the year, at around age eight, Dizzy moved back in with her grandmother with weekend respite at her group home. Within two months however, the grandmother requested Dizzy return to the group home due to Dizzy’s aggressive and abusive behaviors.

Dizzy then transferred to a children’s hospital where she recounted experiencing sexual abuse at the hands of one of her foster fathers. The hospital recommended Dizzy be placed in highly structured environment and Batshaw Youth Protection agreed she should remain in a rehabilitation center for the next two years. Seven days after this decision, Dizzy’s mother was shot and killed in a drug deal. Dizzy was eight and a half. Dizzy moved to another group home the same month as her mother’s death. After a hospitalization for self-mutilation at the age of ten, Dizzy transferred to another group home. Two years later Dizzy transferred to a community-based adolescent group home (her “permanent placement”), with frequent placements in the crisis unit when she experienced violent outbursts. At the age of 13, Dizzy temporarily transferred to a highly structured adolescent group home with continued use of the crisis unit when she became violent. At the time of writing this paper, Dizzy was in the crisis unit.

Additionally, Dizzy has experienced other losses, which are not detailed in her file. Including: her stepfather’s violent death in another drug-related incident, and her
aunt's AIDS related death. Specific reasons for Dizzy's frequent transfers to various group homes were also not detailed in her file.

**Medications**

Dizzy is currently on the following mediations for health and behavior-related difficulties: Zyprexa, Largactil, Synthroid, Losec, Maalox, Ducosate Sodium, Flovent, Apo-Solvent, Tri-Cyclen. At the time of this paper, Dizzy's medications were currently under review.

**Drama Therapy Sessions (first 10 weeks)**

**Our Meeting: session example #1**

I met Dizzy the first day of my internship. She was sitting alone on the couch in the living room of her group home. Three staff members were behind the office door discussing something that sounded urgent. As my supervisor entered the meeting in the office, I introduced myself to Dizzy. She appeared to be happy to have someone to talk to. We talked about drama and theater and soon discovered that we had both spent the last summer at camps. Dizzy began to speak very quickly, as if she wanted to tell me as much as possible before an interruption took my attention away. She talked briefly about activities and people at camp before turning to subject of ghosts. According to her, the camp she went to was haunted and she proceeded to tell me four ghost stories. Her descriptions were vivid, the plot was chilling, and her storytelling animated and expressive. Of the four ghost stories she told, she claimed to have actually met three of the ghosts. She told me that she believed in spirits and ghosts and wanted to know if I did too. Dizzy was interested in Drama Therapy and telling more stories and agreed to
meet with me the next week. This impromptu storytelling and assessment was to be the start of a 22-week therapeutic relationship.

*Themes of session: life, death, spirituality.*

In the case discussion following the session examples, I have decided to focus on the forms and techniques used in the sessions, as the style with which Dizzy chose to explore herself is just as informative as the content of the explorations. I have made every effort to maintain the integrity of Dizzy’s voice within this paper, working clinically using active questioning and often taking the position of the “not-knowing therapist” (White, 1995). This is my natural style of working and is what would later partially inspire this paper. We used four major forms in the first ten weeks: storytelling, dramatic projection, dramatic play, and poetry, all which organically led us toward the creation of the special project in weeks 11-22. As you will see, Dizzy is naturally drawn to using narrative styles to express herself and explore meaning in her life.

**Session Example #2**

“The story creates distance by framing experience in another time and another place . . . Through the fiction of the story, the client tells the truth about her present circumstances” (Landy, 1993, p.101). We began our work in a non-directive manner. I provided materials, such as toys, crayons, paper, clay, and Dizzy chose her manner of working. Dizzy was immediately attracted to the toys and began a process using dramatic projection and play. I asked Dizzy if she would like to create a “world” using the clay and toys, to which she causally replied she would. Dizzy’s first world she called the ‘Island of Beauty’. Dizzy used a plastic mat with rivers on it for her setting. While she began her work with an air of indifference, she rapidly became absorbed in her
creation, working with intense concentration. She placed a toy pig on a table in the middle of the mat and proceeded to create a man out of clay. The man leaned against the table to chop off the pig’s head for food, while around the man, the pig and the table, trees and animals spread over the mat. All of the animals were eating or drinking, and a cow behind a fence was there to give milk to the man. Dizzy made a house for the man using paper, clay, and toy furniture. Brother and sister sharks lived in the river, but they were chained up. Dizzy said that she wanted to be the man, who she named, ‘Lonesome Johnny Berry’. The following is his story as told by Dizzy:

Johnny ran away from his Aunt when he was sixteen years old. His aunt was like the aunt in Cinderella, the wicked one. Johnny is now 42 and it is 1940. He has lived on the Island of Beauty ever since he ran away from his aunt. Both of his parents died in a car accident. The first thing he did when he arrived at the island was make his house. His house protects him from the rain and keeps the birds away so they don’t bite him when he sleeps. That is why he put a roof on it. The birds are not his friends because he shoots them to eat them. He adopted the pig (Pinky). The birds never came back so he had to kill the pig and eat it. He had the pig for sixteen years and he was very hungry. There are two sharks (Louie and Dewie) who are brother and sister and had to be captured and tied up so they wouldn’t bite lonesome Johnny when he swims. Lonesome Johnny has a boat, a toilet, a bathtub, and a fireplace to keep warm. Johnny makes his own soap and shampoo from leaves and flowers. Johnny has a mental illness on his foot so when he has a bath he has to sit down. Sad but true. The shark bit his foot, that’s why he locks them up. A girl comes along. She ran away and ran away to the same place as Johnny. She’s taking a bath now, she has just arrived today and Johnny has not met her
yet. Melissa is more of a modern woman because she had paddles on her boat. She was very impressed to see all the animals.

We closed the session by blowing out a candle and making what was to become our “weekly wish”. Dizzy was proud of her story and her world and wanted to invite a staff member to come look at it. Dizzy wanted to show me some books she checked out from the library but, as our time was over, we decided to look at them next week. In future sessions, Dizzy would not want to continue to the story of Lonesome Johnny.

Themes of session: Survival, resourcefulness, self-care, isolation, and family.

Session Example #3

“Books, or sections from them . . . help normalize the situation for the child who can begin to see that bereavement happens not just to them alone.” (Hogan & Penells, 1997, p.148)

The first of several books that Dizzy introduced to the sessions was H. is for Homicide. I asked why she chose that book to which she replied that this was, “the kind of stuff I like”. With difficulty, Dizzy read several pages from the book. She indicated later that she had actually checked out the book because of its cover (a picture of a young boy covered with a police blanket with blood oozing from beneath it). We talked about the young boy in the picture, who he might be and what might have happened to him. Dizzy suggested that perhaps he was shot, or stabbed by a gang member for his money or drugs. Dizzy did not want to act out the story using toys; she wanted to take turns reading. The next book, en-titled Monster, was about a suspected killer awaiting trial. Again, Dizzy read several pages with difficulty and we instead imagined what the book might be like, verbally creating our own characters and plots. The final book was about
sexual abuse; from this one she requested that I read some of it aloud to her. I asked her why she chose to read these books to which she replied that she likes to read about things that have happened to her. If it has happened to her, “it’s not scary because I already know what it’s like”. The books that Dizzy introduced to this session all contain stories of events similar to events that occurred in Dizzy’s life: a murder, a trial, exposing sexual abuse. Books, stories, and characters were Dizzy’s metaphor for her life; tools that she consistently chose to use in her dramatic projections. We closed with a weekly wish.

Themes of the session: violence, death, and familiarity.

Session Example #4

Our work with stories soon began to incorporate poetry, which would later become one of Dizzy’s favorite expressive tools. In one of our sessions, Dizzy read from a book of poems. This particular book of poetry was put together by a group of young people who had experienced violence in some form in their lives. She read to me for the entire hour (with the exception of when she asked me to read to her). I asked questions about the people in the poems, people who wrote the poems and what she liked about the poems. To the latter question she often replied, “guess why I like them”. Instead, after she read a poem, I summarized the themes. She agreed with all of themes that I gave her and said that was why she liked the poems. Her favorite poem was the “The Red Line” which she recited to me several times:

The day was hot – the day was dragging – one second crawled like an hour – it didn’t take long for them – to get bored – in seconds they found a diversion. In seconds he pulled back the hammer. In seconds he pressed the trigger. In seconds he watched as the red life line – slipped away. In seconds he watched his
own brother die. The day was hot — the day was dragging — it didn’t take long to find — daddy’s gun — it didn’t take long for the day to end.

Dizzy was animated when reading the poems, often using different voices and effectively expressing the general emotion of each poem. When I asked about the people that wrote some of the poetry, she replied that some of them were “sick in the head”. I asked Dizzy how one might fix that problem (of being sick in the head) to which she replied they would go to the “mental hospital”. Dizzy was not that interested in talking and when I asked her if she would like to act out a scene from one of the poems with me she replied that she would, “but not today”. Dizzy communicated a tremendous amount of information simply in the poems she chose to read. All of the poems she read to me were very literal, describing a violent scene or event (usually murders or rapes). The poems she requested I read to her were one’s that she “didn’t understand”; these poems were less concrete and dealt with the writers’ feelings of hopelessness and pain. These poems focused on the inner struggle of the individual to survive - they were more abstract.

Themes of session: violence, death, family, street life.

Session Example #5

Dizzy has just come out of the crisis unit for an outburst and violent episode with the staff last week. I am concerned with how traumatic the experience has been for her.

The toys that we had often used in our sessions were spread out on the table and I asked Dizzy to pick one object that she felt represented her today. She picked the chair and stated that it represented her today “because everyone steps and sits on it (the chair)”. As I asked questions about the chair, various other people and places entered into our
play space. As a new person/place entered through Dizzy’s narrative, I invited her to choose an object to represent that person/place. The following is a transcript of the objects Dizzy chose to represent aspects and people in her life.

**Dizzy** – Chair: “everyone sits and steps on me”.

**Staff 1** – large black cat.

**Dizzy’s brother** – tree: “The tree gives air and mental strength the chair. The chair gives love to the tree”.

**Crisis Unit** – tank: Dizzy wishes they would say, “We don’t want you back”.

**Staff 2** – mirror: “I have no choice but to send you to lock up”.

**Staff 3** – rock.

**Dizzy’s father** – “Good for nothing” pig: The pig would say, “I didn’t mean to, I couldn’t help it”. The pig stayed with the pile of the toys because “he was dead and in hell”.

**Dizzy’s mother** – ring: “She is in heaven”.

**Drugs** – white horse: would say, “I am awesome”.

**Death** – lamp: would say, “If you don’t pay off your drug debts you get killed”.

I asked Dizzy who/what she would want in the picture that was not in it. She replied that she would want the mother of her younger (half) brothers and sisters. She chose a pretty doll to be this person.

I asked Dizzy to pull the chair forward from the picture and asked her what she thought the best qualities of the chair were. She replied, “it knows how to fight”. When asked what kind of fighting, she replied, “physical and mental”. When asked what qualities the chair wanted to work, on she replied, “it will be a murderer by the time it’s
It is interesting to note that Dizzy is breaking from her own established metaphor and projection here. She was openly communicating hope and fears about herself, blurring the boundaries between the projective metaphor and her reality. Next, Dizzy takes the chair and "murders" a staff member (object for staff was switched from big cat to dinosaur). She placed the lamp on the dead dinosaur. I asked Dizzy how the chair now felt that it murdered the dinosaur. She shrugged her shoulders. I commented that the chair must have a lot of strength and bravery to be such a fighter. I then asked Dizzy to choose objects to represent the good qualities of the chair; she chose a tree (brother) to represent mental fighting and a solider to represent physical fighting. I asked Dizzy what other positive qualities the chair had, but she could not think of anything. Dizzy asked if we were finished, to which I replied did she want us to be. "Yes" she said. I asked if there was anything else she wanted to add to the picture before we stopped – she chose a stuffed fish and said it was me. She put it near the doll. I asked her what this fish says. She replied, "You are a talented poet Dizzy". We put the toys away in silence and she left.

Dizzy returned a few minutes later and asked me if she could read me a poem, she had wrote about death. I said yes. We sat across the room from each other and she read the poem to me twice. I commented on her obvious talent for writing and told her how impressed I was with her creativity.

Themes of session: family, drugs, social identity, inner self.

Case Discussion
We play around with versions of understanding until we find a satisfactory meaning together which encompasses the consequences in our particular culture and time. (Cattanach, 1999, p. 81)

The consistency of themes that occurred in the first ten weeks of our work together gave strong indicators to the very difficult and complicated issues Dizzy is struggling with in her life. As seen in the session examples provided above, the main themes revolved around violence, anger, and family. Dizzy’s search for meaning surrounding the intensely violent deaths of members of her family, as well as the struggle she faces with her own anger and violent outbursts. Dizzy expressed these themes through stories, and play, and while she rarely acted out violence, and never excessively, there was always an element of violence and violation in our sessions. For the most part, in the first 10 weeks of our therapy, Dizzy did not verbalize connections between her work in Drama Therapy and her life. To this I believe she was exploring both the safety of the work and developing trust in our relationship. We worked in a distanced and metaphoric manner utilizing the constructs of narrative and drama to explore meaning.

As Emunah states “Arts modalities can match the intensity and complexity of the adolescent’s experience, and provide a non-threatening and constructive means of communicating tumultuous feelings and thoughts” (Emunah, 1990, p. 153). Dizzy creatively communicated complicated feelings about anger, violence, and family through techniques and tools of Drama Therapy.

“The most fantastically unreal tale . . . will be at the same time fictional yet to do with the innermost realities of the individual’s psyche” (Jones, 1996, p.10). In the beginning of our work, Dizzy used dramatic projection and play, and fictional storytelling
(Lonesome Johnny Berry) to explore complicated and difficult issues within her real life. Several connections can be made in the story of Lonesome Johnny Berry. My intention in briefly touching on these connections is to further explain Dizzy's use of dramatic play and projection.

In reflection of events that occurred in Dizzy's life, parallels can be made with the story of Lonesome Johnny Berry (session example #2). The death of Lonesome Johnny Berry's parents in a car accident and his subsequent living with his aunt, "His aunt was like the aunt in Cinderella, the wicked one" is similar to Dizzy's experience with losing her parents and subsequent permanent placement in Youth Protection. Like the wicked aunt in Cinderella who made Cinderella clean the house, residents of group homes often spend several hours a day on cleaning the facility. Dizzy had also often complained of the strict rules enforced by the group homes. The locked up sharks in Dizzy's story are also reminiscent of her situation. The sharks are brother and sister and locked up so they might not bite anyone, just as Dizzy and her brother are both in a group home. As stated in her social services file, Dizzy's grandmother is not willing to care for Dizzy in her home due to Dizzy's violent outbursts and aggressive behavior when she is in the community. Does her grandmother believe Dizzy will bite if she is not locked up? One of the themes that I found most touching is the theme of survival. How Johnny Berry surrounds himself with things that he needs and enjoys. Soap, Shampoo, a toilet. For me, this is an indicator of hope. I want to reiterate that these connections are the interpretation of the therapist. I have made these possible connections to provide the reader with a stronger idea of the power of dramatic play and projection. Because Dizzy was unable to verbalize connections between her reality and her dramatic play, we can
only infer the true connections. This is also the case with Dizzy’s use of books as projective techniques.

“It is very easy to separate and exclude people via diagnostic systems suggesting that they do not belong in a “normal” story” (Parry & Doan, 1994, p. 47). Dizzy’s use of storybooks and poetry appeared to be attempts to normalize her life story. Her story is one of loss and violence, thus it could be concluded that in order to survive, people naturally move toward normalization of traumatic life events. In seeking normalization, she was tackling her feelings of isolation and complex mourning surrounding the death of her mother. Complex mourning is particularly traumatic for children since the individual is mourning an un-natural, un-expected, or violent death. With complex mourning, difficult questions often arise regarding life and death and, when an individual is religious, questions about the existence of god. Dizzy sought normalization of her complex mourning through her projective identification with scenes, characters, and plot lines available to her through storybooks and poetry. I assisted in her search for materials while respecting her continued reference to texts. As seen in session example number three, I brought in a book of poetry and short stories written by teens that have experienced violence. The seeking out of material with which Dizzy could identify with her own life experiences prompted the idea of creating her own material, or text. This idea of a text, what we would later call the “script”, had potential for Dizzy to break her own feelings of isolation through reaching out to others. Similar to what storybooks and poetry has done for her. This one spark lead us to using techniques that Dizzy was comfortable with (projective storytelling, poetry) in a new form, the creation of the script.
Dramatic Projection within Dramatherapy is the process by which clients project aspects of themselves or their experience into theatrical or dramatic materials and thereby externalize inner conflicts. (Jones, 1996, p. 101)

The final session example held significance because our projective work shifted from the metaphoric play to reality based dramatic play, which proved to set the tone for the following 12-weeks. Reality based play can be seen in session example #5, where Dizzy began to make connections between her dramatic projections and her reality, specifically using objects to represent people and places in her life. This marked an important shift in our style of working. At several times in the session, Dizzy asked me to ask more questions. In this, we began to solidify our path toward conscious co-constructing meanings in her social world. This also indicated to me that Dizzy was comfortable with the depth of the work and wanted to take the work further. As noted in the session examples, we had explored death and murder in sessions before; but we had not specifically explored the death of her parents.

The creation of this world is reflective of Dizzy’s view of her immediate social system. I found it interesting that death and drugs were two of the three non-humans represented in this world. She showed me that they are a part of her social reality. Since we are essentially looking at Dizzy’s view of her social system, I am able to see the overwhelming nature of death and drugs in her life. They are as much a part of her daily existence as her brother, staff members, and the memory of her parents are. The creation of the world with objects very much parallels the concept of the social atom (usually done on paper or with living sculpts). One of the main differences between the social atom and our work, on that day, was that I did not specifically guide Dizzy to look at her
social system. Rather, it manifested organically and Dizzy agreed that this represented important people and things in her life. This signaled me that Dizzy trusted the therapeutic relationship and space, and, additionally, was ready to begin less distanced work. This contributed to the development of the idea of creating a script.

The use of projective devices such as toys, or puppets, brings the dramatic paradox to life. Through projection, individuals experience the “me” and “not me” paradox. It is in this space, between the fantasy and reality, that the imagination and psyche have the freedom and safety to explore and create meaning. The question often arises regarding how projection is therapeutic and whether it simply recycles existing problems. It is my belief that with the telling of any story, be it fictional or non-fictional, new understandings emerge, and with them, openings for new perspectives and choices. Dizzy’s projective use of toys and books provided a space where she was engaged in the dramatic paradox. Where, through the safety of the projection, she was able to express herself and explore her life meanings in a manner where she was both herself, and not herself. Her self is reflected in her telling of the story while her “not self” is engaged in the characters of the created story. Through the reflection on these stories, from both the “me” and “not me” positions, opportunity arises to understand and integrate themes,

The space between reality and imagination is the source of creative energy enabling us to make sense of our perhaps not-so-meager existences. By being simultaneously actors and characters, ordinary human beings and something else — god, demons, heroes, villains — we are capable of transforming our understanding, feeling and valuing. (Jones, 1993, p. 30)
Dizzy’s life has been filled with trauma and violation from a very early age. Because of her intense life experiences, she has matured in a way that most 13 year-olds have not. Dizzy’s opportunity to play as a child appear to be significantly limited. Our Drama Therapy sessions provided an opportunity for her to re-establish a connection with her childhood through dramatic play and projective techniques. In doing so, we worked developmentally, with a focus on steps that she may have missed in real life. Children play in order to make sense of the world around them. Children often play “house”, “doctor”, or “store”, enacting and exploring the concepts of reality they have experienced but may not fully understand. Dizzy’s play revolved around violence, isolation, family, and anger. These are the concepts that Dizzy needed to explore, needed to make sense of. These concepts are therefore the themes of most of Dizzy’s work. She used dramatic projection and play to begin to make sense of and come to terms with her past and present life experiences; this is where the true therapeutic value lies.

**Our Project (weeks 11-22)**

In January 2000, I approached Dizzy with the idea of working with her on a special project, perhaps a script or book. We used the first session to brainstorm how we might create a script together, and what the purpose of creating one would be. We decided the purpose of such a text would be for Dizzy to compile her poetry and other work in an attempt to provide a medium through which others might better understand where she is “coming from”. We agreed that the text should have a variety of things in it, including stories and poetry. I suggested that we might even tape record parts of our sessions, so things like role-plays may be used. Dizzy responded positively to this idea and to the idea of using a tape recorder to record her thoughts and feelings. At this time,
I told Dizzy the purpose of this project was to help me finish school, and because of that, my teachers, other students and colleagues would be reading it. I asked Dizzy to think about a name she would like to use for herself, and we agreed that Dizzy would edit and fully approved all aspects of the script.

The creation of the script evolved out of our sessions, which were based around role-plays, interviews, and storytelling with the intention of creating a script. The formats of our sessions were generally non-directive, with Dizzy initiating an idea and I shaping into action. I chose this particular style of working because I trusted Dizzy’s creative talent and energy and I wanted to provide Dizzy with autonomy, thus empowerment, through this process. The first several sessions of our process comprised of the construction of questions and practicing interviews. Dizzy immediately began speaking into the auto recorder, addressing a fictional audience. From this, we created questions I could ask Dizzy during her radio address. We explored who might be listening to the radio address. From these first explorations, we moved into interviewing emotions and storytelling through poetry. As stated earlier, not all of the material made Dizzy’s final edit.

I was influenced from a variety of sources regarding the therapeutic purpose of the script. Those influences include the Narrative Therapy concept of “speading the news” and the “re-storying” process (White and Epston, 1990) and Robert Landy’s Drama Therapy work with role repertoire (Landy, 1993). From the beginning, the creation of a document held three main therapeutic goals: (a) to provide a medium through which Dizzy could use her voice, (b) to provide a medium where Dizzy could acknowledge her current story, and (c) to provide an opportunity to explore and expand
her life roles. Based on the definition of therapy provided in the introduction of this paper, these three goals outline a method based on empowerment, introspection and acceptance of self, and actualizing potential. It was my belief that these goals could be successfully accomplished using specific Drama Therapy and Narrative Therapy techniques in the process of creating the script. As we created the script, other therapeutic qualities appeared; one of the most important being pride and increased self-esteem. Dizzy expressed great pride of her work and accomplishment.

My beliefs regarding the co-construction of meaning in both everyday life and in the therapeutic relationship strongly influenced the presentational style of this script. In the therapeutic relationship, meaning is created through the interaction between the therapist and the “client”. Because it is my belief that all our work was co-constructed in meaning, it became my intention to present part of our work together as co-constructed. Although I will discuss my perspective on this work as well as my perspective of the effect it has had on Dizzy, I will not alter the text itself, as we created, organized, and edited it within the 12 weeks of our sessions. Please note that this text is not necessarily in chronological order and that some sections of our sessions have been cut through Dizzy’s editing process.

Following the script, I will break down the themes expressed and compare them with dominate themes of the first ten weeks. This is done with the intention of to summarize and identify repetitive themes Dizzy expresses in therapy. Due to the differences in style in which we undertook the second half of our therapeutic time together, I am curious to note both the similarities and differences of the themes of our work. I will also explore some of the techniques and tools that we used in the
script, including role-plays, interviews, poetry, and letter writing. I will also focus on these techniques, noting their theoretical roots, and examining their effectiveness and therapeutic value. I do this to focus on the technique rather than the analysis of Dizzy’s work, thus honor her work and voice completely.

Wherever there is an underlying foundation theory of truth, there must be an expert to interpret it. When they are of supposed expertise of another person’s experiences, the expert is, ironically, taking that person’s voice away from her/him. (Parry & Doan, 1994, p.8)

I have since given Dizzy a copy of the following script in an informal follow-up that we agreed to have. We had also agreed, earlier in the process, to bind the work, like a book, and chosen the order of pages. Dizzy spent about fifteen minutes looking through the script, occasionally asking questions such as “did you correct any words”, and making comments like: “this looks really good”.

The Script

Cast of characters

Amy
Dizzy’s Mother
Mad
Frustrated
Nervous
Happy
SQ
Tiger

Interview with Dizzy

Amy: What do you think about therapy and what we did last semester in our Drama Therapy sessions?
Dizzy: It helped me to express how I feel. I have a hard time expressing how I feel and Drama Therapy is really good. I enjoy Drama Therapy and when I enjoy something it helps me work harder for the next week so when I have Drama Therapy again, I enjoy it again. I have something to look forward to.
Amy: What about when we used the toy animals?
Dizzy: I usually pick one of the animals to be me. And the tiger is one of them because I’m rough and tough. That’s what it is.
Amy: What is the biggest thing you would like to work on in the next couple months?
Dizzy: My tough and roughness. I’m a pretty big girl but I also lose a lot of friends doing that. Because most girls would like, oh, when they’re sad or something I’d go up to them and go “oh poor you”. I’m not like that, I’m the type that will go up to you “what the hell’s wrong with you”. I lose a lot of friends that way but, yeah, my rough and toughness.

(Response to a “how are you feeling today” w/ four emotions)

Dizzy: Well today I was mad, nervous, a little bit frustrated, and happy. Happy that I was coming back home.
Amy: Would you say that these are the four emotions that you feel most often?
Dizzy: Yep. Mad, Nervous, Frustrated, and Happy. Those are my emotions on Jan. 28th 2000. These are my emotions I feel most days; mad, happy and frustrated. I’m not usually nervous.
Amy: If each one of these had one line that they said, what would they say?
Dizzy:
Mad would say: “I don’t know what’s going to happen and I feel that I’m going to lock up.”
Nervous would be: “Oh my God, what’s going to happen at this meeting?”
Frustrated would be like: “I don’t know what’s happening so I’m frustrated.”
Happy would be: “Thank God I’m going back to SQ”.

Amy: Do they (emotions) ever talk to each other?
Mad would talk with frustrated and nervous would talk with happy. Cuz happy always makes nervous feel good. Mad and frustrated always end up exploding. Mad and frustrated talk a lot. Cuz when I’m frustrated, frustrated says don’t get mad. And mad is already mad so it turns to nervous cuz I know I’m going to lock up. And at the end of everything, something good happens. This is how my life goes.

Dizzy’s Mom: (actual letter from Dizzy’s mom to her own mother)
Mom, I’m sorry for being such a bad girl, it wasn’t my fault. I was sick in the head because of cocaine. I’m really sorry for what I put you through. I really didn’t mean to hurt you. Mom, from now on I promise to make you proud to have me for a daughter. I love you Mom and I hope you will forgive me for being so stupid. Could you please come and see me before I go to XXX. If I go that is. I can’t wait to come home to you and my kids. I have a feeling that if I go to XXX and finish the program that I would have the whole world to myself. I will be strong enough to control what happened in my life. I have plans, big big plans. Of being somebody and moving to the country with you and the kids. Where we will grow old and happy and in peace. I love you more than you will ever know.
All Love,
XXXX
Dizzy: Hi, this is Dizzy speaking, I’ve lost my mom. Yes, she did get shot. I feel pain. She got shot on December 00th, 0000. I cry every night but I will get through it. Many kids that have lost their mothers, I feel the pain. I went through that pain. Like this letter, Dear Mommy, yes I cry over it even though I did not write it cuz I love my mom and those that don’t have moms well, you’re not alone. And let me tell you, when I lost my mom I went through so much pain I did not eat, I did not speak, I was so sad. Then I realize that she is in a better place. I wish everybody would have a mom but that’s not how it is in reality. But those who have a mom, appreciate it, even though they might get on your nerves, not let you go out but when they’re not their you always wish that they were. I miss my mom so much. I love you. This is a message I want to send to my mom. Mom, I miss you so much I wish you were here. My health is bad, I have a bad temper, I wish you were here to wipe my tears. I wish you were here to hold me when I cry. I wish you were here to tuck me into bed. I wish you were here to help me say my prayers. I wish you were here when I had a hard time, when I wished I had a mother, but you were not. My dad was never there and I just wish that everything would go fine. But see, you’re gone now and I just pray every night that even though you’re not here somebody else will help me through. This is a recording on Jan. 28, 2000 by Dizzy, a 13-year-old girl who has lost her mother. Thanks bye.

Cast of characters

Dizzy
Amy
Pissed Off

Interview with Pissed Off

Questions from Dizzy and Amy

Amy: Pissed Off, How are you feeling today?
Pissed Off: Very anxious, worried, very mad, pissed off. Cuz that’s my name. I have tension in this house that I live in and I don’t like it. I’ll live through it though right now I’m really ‘pissed off’.
Amy: Wow, Pissed Off, that’s a lot of feelings. Why are you pissed off?
Pissed Off: Because people piss me off. Little things like, you look at me wrong, anything. If you talk about my mom its all over. Yesterday I had an incident like that. This girl talked about my mom and I almost broke her face up. Besides that, it’s all good because I get mad for a reason, a lot of people think I get mad for no reason, but that’s not true.
Amy: People do things to get you ‘pissed off’?
Pissed Off: Indeed they do.
Amy: Are you happy today Pissed Off?
Pissed Off: No I am not happy today.
Amy: What would you like to do the next few weeks?
Pissed Off: I would like to speak to my social worker and tell her about how I feel because I’m really ‘pissed off’ and one more thing, I want to be ‘pissed off’. That’s the
thing I like to do. Be pissed off. I’m going to be ‘pissed off’ because people make me ‘pissed off’, that where I got my name.

**Amy:** Pissed Off, could you tell me what you think about Dizzy?

**Pissed Off:** Dizzy is a little skanky hoe and she’s so insensitive. But she can sometimes be cute and nice but when you see her temper, it flies. That’s where I come in, Pissed Off. So Dizzy, me and her are cool ya know. Me and her are like a team, like a crew, know what I’m saying? We get along. Happy never gets along with this girl. Either does Confused. Her emotions are ‘pissed off’ most of the time. When she’s ‘pissed off’ she starts to swear, its normal cuz Dizzy’s a motor mouth.

**Amy:** Does Dizzy ever fight you off, Pissed Off?

**Pissed Off:** Sometimes I think she tries to push me away. Then I start to cry and she pulls me back, know what I’m saying. But like when she’s sent up to lock up, ‘pissed off’ is like the best thing to be. I come in and I’m her close friend, I don’t got too many close friends, cuz nobody likes to be ‘pissed off’. But she’s one of my coolest friends, me and her are always ‘pissed off’ together.

**Amy:** I really appreciate you doing this interview with me today Pissed Off, it’s given me a lot of insight. Do you think that you will always be a good friend to Dizzy?

**Pissed Off:** Well, no. She’s going to grow up. Every kid grows up ‘pissed off’. Cuz life is something to be ‘pissed off’ at. When you grow up, yeah you get pissed off a little bit. That feeling comes and goes, but as you grow older you lose the ‘pissed off’. Its like walking in a park and you let your dog go and it runs across the street and gets hit by a car, that’s basically what it is. So, yeah as she gets older, it’s going to disappear. I just won’t be as close. She’ll be mostly happy because I know her life will get better, she won’t need me. Yeah, Dizzy is a big tough girl, she don’t need to be ‘pissed off’ all the time. But me and her are still close until then, so me and her going chill, alright.

**Amy:** Do you have any final thoughts you would like to tell our audience? Do you want to give a shout out to anyone?

**Pissed Off:** To everybody out there, I’m the coolest friend to have. Thank you.

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**Dizzy’s response to Pissed Off’s Interview**

**Dizzy:** Hello Pissed Off, what’s up? You’re all cool but sometimes you get in my way and make my life miserable. Me and you are always going to be close friends, because Pissed Off is a part of my life. You make me stronger, stronger in the meaning of, when I’m weak, you lift me up, know what I’m saying. I can’t be happy going to lock up. When I’m ‘pissed off’ you make me want to rage and I don’t care about lock up, that’s the good thing about you. I like being ‘pissed off’. But see, I want to get rid of you in a way. But in a way, I don’t. You’ve always been my friend. Me and you have always been cool. You make me the person I am, which, I’m always ‘pissed off’. So you’re just going to have to go take a taxi cuz I don’t want you in my life anymore. That’s all I have to say. Bye.

**Amy:** Dizzy, What are the consequences of having Pissed Off in your life?

**Dizzy:** When I’m ‘pissed off’ I get aggressive. This is not good. My verbal aggression comes out. I’m very rude and then I get myself in trouble. Pissed Off gives me energy, when I’m happy I don’t have energy to curse people out. But Pissed Off always gives me that energy. Like we could be on the metro and someone could tell me to shut up, Pissed
Off comes and deals with him. But besides that, Pissed Off's no good, he's a cheap skanky piece of crap.

Dear Pissed off,
Wuz up my friend. Me nothing much. All I want to say in this letter is how much I love u and hate u. You have always been there for me. There's nothing to it. You piss me off so much sometimes, I lose my control it just isn't good, my man. I thought me and u was cool. But I guess your not. Let me tell u something. U could go catch a taxi because your not doing any good for me. You son of a beep.
Dizzy

Cast of Characters
Dizzy
Amy
Violence
God
The Devil
Weapons

After reading the latest copy of One L.O.V.E. — A Leave Out Violence Publication, Dizzy comments on what she's read.

Dizzy: "I have friends from that paper who write about leave out violence. Some of the things are very sad, but hey its life. And yeah, I think this world really needs to leave out a bit of violence. Things are getting out of control. I had to make a police report on violence yesterday because there are these kids in our neighborhood that like to start violence, threaten to shoot us and stuff. I think you should just take it the easy way, phone the police, do what you can because this has got to stop. This world is getting out of control and I think this program they have to leave out violence is really good. Yeah, some stories you will cry, I just read one. Yeah I felt like crying, it was sad, but hey."

Interview with Violence
Questions from Dizzy and Amy

Amy: Violence, How are you doing today?
Violence: "I'm doing pretty good, I haven't got anyone to be violent today, its just not working out for me. But I'll get it tonight. Yeah, I will. Trust me. I'm going to tell you what Violence looks like before I give you back to Amy. I don't look like the devil, like everyone thinks, with red disgusting face and all that. I look like a person, a spirit. I go into people, the devil sends me into people. He say's "do this cuz God's telling them to do something right and I don't want you to do that. So you go over there and you make a fight, and I want it with weapons or with your fists or just arguing". Me, I get joy out of that man, its like I'm tough. A person can say their tough but without Violence they're nothing. They can't do nothing. I know some people, please, "Oh I'm violent" without me they can't get violent. I'll pass you back to Amy now."

Amy: The first question here from Dizzy is, do you like hurting people?
Violence: “Oh yeah, it’s the joy of my life. When I see blood, I get hyped up. And when I get hyped up of course the person gets hyped up cuz they just want to see blood. Some people, I change their mood when they see blood they just don’t want to fight anymore. But I will make a person take a weapon and let them beat the other person because that’s just who I am. Weapons are good. I’m evil, weapons are bad, we both mix in together. It’s all good. I like weapons, especially guns. Its easier I don’t have to waste my breathe and waste my time you just shoot the person.”

Amy: I’ll ask you now Violence, how does it make you feel when you cause people to hurt each other?

Violence: “I get pops from the Devil so its all good. I am Violence. Does God like Violence, no he don’t like Violence. So I’m part of the Devil team. It makes me feel good to do what the Devil says. He gets what he wants and I get what I want. The joy of fighting, the joy of seeing blood, the joy of beating people up, the joy of taking out a gun, the joy of taking out a knife. It’s all good. Weapons talk to me, they say, pick me up – pick me up. I’ll use it, I’ll shoot it so the bullet just comes out and knocks you in your head and your dead. And the blood comes pouring out and I’m proud cuz I like the sight of blood, it reminds me of the Devil cuz he’s all red.”

Amy: Violence, What is the best way to fight you off?

Violence: “The mind. The mind is the best way. The mind is the strongest and only thing that fight me. If somebody says “God doesn’t want you to do that, God doesn’t want you to do that”. Amanda lets say. “Amanda says, God doesn’t want you to do this, God loves you, you don’t need to do this.” I just back off. I have nothing to do. I don’t know, my spirit just floats off and I’m trying to get back into the person and say “fight fight” but it just isn’t working. They just don’t hear me anymore. They’re just like,” yeah ok, I’m going to calm down”, you know. That gets me mad and I go “NO YOUR NOT GOING TO CALM DOWN, I AM THE ONE WHO’S TAKEN CONTROL OF YOU”. It just don’t work. Once you mention God, its all over, I just fade away.”

Amy: So you think that if people had God in their lives every day that they would be able to fight you, Violence, off?

Violence: “Yep.”

Amy: What about our mutual friend, Dizzy, what is the best strategy for her to keep you out of her life?

Violence: “She ain’t got one cuz she loves me. To tell you the truth, she’s stupid, a lot of people don’t love me but she loves me. I give her strength, I give her power, that makes people scared of her. That’s one thing she likes, she really really likes. Cuz Dizzy knows this girl and she always gets big mouthed with these other girls but she never gets big mouthed with Dizzy cuz I protect Dizzy. She like me and I like her because she lets me do what I want. But you know she’s gotten worse over the past years because she keeps pushing me away. When she was younger, I used to be her best friend. Every time, over little issues about candy, I’d automatically go in her and she’d blow up. Now she takes it more cool you know and its getting me kind of mad. But I know she’ll take me back, I just know it.”

Amy: Do you think Dizzy knows about your advice?

Violence: “She knows it but its hard for her to understand what God is at this moment. She thinks God is just nothing right now because if she wanted to commit suicide
because of me she would have already done it. You better back off and stop asking me these questions because this is when I start to get violent.”

Amy: Any final comments that you would like to make to our audience Violence?
Violence: Indeed I do, ya’ll want-a friend? Call 769-HELL.

Dizzy’s response after hearing the interview with Violence.

Dizzy: “Hello, this is Dizzy once again. I heard what Violence had to say, its true he takes control of everybody, he hates God. Ya’ll going to meet him one day in your life because you cannot tell me that you’ve never been violent. All ya’ll that are out there, I just want to tell you something, when you get violent remember its not just you that’s getting violent. Its your soul that’s getting violent. The Devil has taken over your body. You better just realize that Violence is part of the Devil and you better just tell Violence to go away.”

Amy: Could you comment on what Violence said about the use of the mind to fight him off.

Dizzy: To tell you the truth. I, Dizzy, is very stupid, very dumb cuz my mind ain’t working when I’m getting violent. So he can just take that advice and shove it.

Afterthought

Dizzy: The interview with ‘pissed off’ and ‘violence’ was good because it showed me more about my feelings. It also showed that every emotion has a character. You get violent; you get giddy and giggly or have a frown.

Rape: a poem
I was walking down the street
On my 2 feet.
And ended up on my knees
Begging the lord to please don’t let
Him rape me!!
As I was yelling for help. He started
Hitting me with a belt.
He said to me carefully you want
To die and go to hell.
I had tears in my eyes. But I
Didn’t want one to drop
Cause I didn’t want to cry.
As I was sitting there wishing
Not to die. As he took a knife
My neck saying you wasn’t to be
I won’t cut your fucking neck.
He took me and pushed me in the
Face. And said I’ve raped so many
Girls and never gave grace.
My blood was allover me.
I said please stop please.
Leave me die in peace
I knew as he took out his gun
My life was done.
He shot me in the leg
He shot me in the heart. These
Were my last words
When my body fell apart (why me)
As the police came to see if it
Was me.
My eyes were still open from the shock
He put apon me
So live me be. And put me to
Rest in my bed.
My life meant so much to me.
Till I got rape.
And now my eyes are closed
And I can not see
All I have to say that were
I'm people do care and give
Grace.
And now I'm with God.
And so give him all the
Praise!!

Afterthoughts by Dizzy
I wrote this poem because it kinda reminds me of how I got sexually assaulted. I wasn't raped and I didn't die but I guess that's what it means.

A Poem by Dizzy

December 14 my mother was shot.
When I heard that I got hot
And broke down and started to cry
As I said my last good byes
As I watched her come out with a black
Thing over her head I knew she was
Dead. Jennifer Jones who Chris,
Dizzy, Seth called mommy is now
Gone. It didn't even hit dawn
And now she's gone. I called her up and
Said my last goodby as I went to
Her grave and sat there and prayed
That I had took the bullet.
If I would there I would have a
Fit as the blood came out my
Mom's body people would think it
Nasty but she my mom and now she
Gone I remember the times we’ve had
Together. Now that you gone it’s not
Better. Mom you remember when
At night you would pray to
Die. And I say mommy no and start
To cry. You were there for us
Yes, you were on drugs but I
Don’t care and that your
Gone it not fear and now I am
Taking your path praying to
Die. Mommy you remember when
You sniff cocaine I felt so much
Pain mommy as the bullet came
After you it hit me when the
Bullet came threw you I felt
Shock to my heart.
Because I knew you wouldn’t
Be at my wedding see my
First kid. You wouldn’t tuck me into
Bed and Batshaw couldn’t say your
Doing good and you could have
Your kids back you were there
And you said you didn’t care
But you DID you would take a
Bullet for me and I would take a
Bullet for you you remember the
Word you said to me before you
Die mama I’ll always be with you
No matter what dead or alive.
And Batshaw said you couldn’t take
Care of your kids but you DID
If we needed food in the house you
Would have it. If ou only had 2
Pennies you’d find 3. to give to all
Your kids you give your blood and
Vains to you kid so I don’t care
What Batshaw say. I’ll always
Love you. Mommy you couldn’t get
Better love you from your only girl
That you said was so special.
In memory of my mom.

A letter from Confused to Dizzy

Dear Dizzy,
Hi! Wus up? Me, nothing much. All I would like to say is that I am really sorry that you're so confused. But I can't stop it because it feeling that comes within you. I come from a city called: the city of feelings. I am about 80000 years old. I was here when Jesus was here. Anyways all I want to say is that I am really sorry about what your going through but you'll get out of being confused. To tell you the truth I really don't like being in you because you're already had enough in your life. Any ways, friends for always,
Love,
Confused

A Poem

I am a Bird
I am a Bird that sings
I am a Mad one that always flaps her wings
I am a Sad Bird who always crys
I am a Bird who flies away high
I am a Bird who is Happy
I am a Bird who want's to take a nappy

A Poem

My mother got shot when I was 8
And now that she's gone I am afraid.
I went to her grave
I sat there and prayed
My hope is gone
But I'll always remember that she lives on
I always asked
Why is she gone?
What did I do wrong?
I always wished
She would be at my wedding
But now that she's gone
I don't know where I'm heading
As I cry at night, wishing she was there
As I look at the stars
Hoping some day
I'll walk through the doors of heaven
And hold her hand and say
"I love you"

A boy I know: a poem
A Boy I knew was very sad.
And sometimes he got very mad.
When he got mad he’d puch and kick and his Daddy would give him licks. And call him you ‘punk as bitch’. And sometime he would find hisself in a ditch. He’s dad would drink so much that he wouldn’t wake up till after lunch. His dad used to beat him to the bone till he bled there all alone. One day the boy got up to take some milk his Dad was so drunk he hit him with a belt. The boy sat there crying as he knew his inside were dying. He didn’t tell his Dad he was Dying of cancer because he knew there would be no answer. His Dad just keep whipping him with a belt and one day he whip his dad with a belt just so he knew how it felt and told him go to hell he packed his bags and yelled “I have cancer and you were never there to help”. As the boy was walking down the street he got sudden shock and said his sister lived down the block. He got there all the doors were locked. She had sniffed cocaine and pot. She had past away and the whole family was going insane. He decided his life was to come to end he went and got a gun and shot himself in the head.

**Dizzy’s World’s**

**Imaginary**
This is my imaginary world, I’m the baby and in beautiful scenery. I’m being protected by two men, I have my nice couch and my feet on a rock. A view of animals and bugs and frogs and the ocean is in back of me and I can hear the breeze. The guys need to protect me from animals. I like how I did the ocean. This world will never happen. In reality the baby is being choked to death by two snakes, a two headed snake

**Drama Therapy World**
Drama Therapy world is a comfortable couch and this pink fish. The couch is because its comfortable and the fish because we come really far like a fish swimming. Drama Therapy is also a pig because a pig’s cute.

**Afterthought from Dizzy**
I think it’s good that other people read this. You know you could make a play out of this script.

**Case Discussion**

**Comparison of Themes**

This narrative approach can also be utilized in any adolescent situation, but we have found it most useful when dealing with the sensitive issues of loss, separation, and bereavement. It allows us to enter the world of the adolescent and facilitate the generation of alternative meaning and understanding. We have found that it elicits co-operation and investment by the adolescent and
circumvents the power struggles that can occur at this particular developmental stage. (Hogan & Pennells, 1997, p.154)

Drama Therapy has roots in play and storytelling. Both can be safe and distanced manners in which one may communicate. It is natural therefore, to begin a therapeutic alliance utilizing these two methods, especially with an adolescent who has experienced considerable trauma in her life. In establishing these two basic, yet delicately complex elements of Drama Therapy, the therapist also provides permission for the young person to be just that, a young person. As in the case of Dizzy as I have noted previously, there may not have been many opportunities to play as a child. Her acceptance of this permission to play was challenging; however, without Dizzy’s acceptance of the play space, it is my belief that our work would have been futile. In looking at the themes of the two sections of our work together, I must reiterate the manner in which they emerged. The first 10-weeks were framed in dramatic projection and play, working safely through metaphor. The creation of such an environment where Dizzy felt safe, contained, and creative, was the first major step. The second major step was to facilitate her acceptance of playing. The majority of the work that occurred in the first 10-weeks was the establishment of the play space, thus this was the manner in which the major themes emerged.

Development in playing processes can often be accompanied by changes in cognitive, emotional and interpersonal developments. Hence the client, for example, can develop emotionally or cognitively through the crossing of developmental drama stages in Drama therapy. (Jones, 1996, p.116).
The development of a therapeutic alliance was also a major factor in the shift from the distanced work of the first 10-weeks, to the more direct work later. There were many occasions where I was tested and tried. Could I be trusted in so many ways? Would I keep my word and be there every week? Alternatively, would I abandon her? Would I keep my word and ensure confidentially of what was said in the session? These are but some of the questions I image Dizzy was confronted with when we began our process. These questions further attest to the need to begin in a safe, almost coded manner. A place where stories and feelings were communicated through metaphor, through a code. This code was safe and if for some reason our relationship abruptly ended, Dizzy would not have risked much. I respected this code and the need to keep our work as safe as possible. I respected it because I needed the safety as well. As trust and the therapeutic alliance built between us, however, the need for such distance began to break down. Dizzy began to own and express her feelings. This signified her shift with increased feelings of comfort and safety with the medium and the further development of a trusting therapeutic relationship. It is in this space, in which we began to co-create a script, that the major themes of the second 12-week were expressed.

The themes that encompassed the second 12-weeks of our therapeutic relationship revolved around the dominant themes of the first 10 weeks: family, death, violence, anger, and emotions. The major difference was in the way Dizzy expressed these themes. The first 10 weeks themes emerged through dramatic projection and play utilizing narrative form. While this narrative style continued through the next 12 weeks, themes emerged more directly, with Dizzy making direct references to herself, her
emotions, as well as making connections between her metaphoric work and her life events.

Clinical aspects of the script: process and containment

The expression of emotions through role-play, dramatic projective play, and storytelling provides a natural distance that enables the individual to express him or herself in safety. As Dizzy began exploring her emotions surrounding her mother’s death during the final sessions of our first 10-weeks, I felt the need to further enforce the containment of the sessions. Perhaps this was due to my status as a Drama Therapist in training and uncertainty with my own ability to contain such intense emotions. Clinically, we actively used the script as a container for the emotional explorations that occurred in our Drama Therapy sessions during our project. The script was used to provide further in depth containment of the complicated and intense emotions Dizzy was beginning to directly express, thus providing opportunity for her to explore them in safety.

Every week, the sessions were audio recorded which I then took home and transcribed. After each transcription, I introduced the texts back into the sessions, giving Dizzy the opportunity to edit and revise them. This provided Dizzy and opportunity to reflect on the previous weeks explorations and possibly revisit the same themes in the current session. Following Dizzy’s review of the transcriptions, I asked if she would like to fill out a “how are you feeling today” sheet. Dizzy enjoyed doing this and it developed into a ritual that would last through most of the 12 weeks. These beginning rituals assisted Dizzy in an exploration of her current emotional states as well as assisted her in identifying, distinguishing, and expressing various emotions as they were occurring.
After the filling out the "how are you feeling today" worksheets, we moved into interviews or storytelling through poetry. As documented in the script, Dizzy chose to interview her emotions occasionally, creating questions with me, and always casting myself in the role of the interviewer. The embodied and enacted emotion provided an opportunity for Dizzy to distinguish it from other emotions, to look at how it might affect other emotions, and to create distance between herself and a emotion which often encompassed or overwhelmed her. This technique of interviewing emotions proved quite demanding and we would often utilize the more distanced technique of storytelling through poetry in the sessions following the interview.

Techniques: Role Playing Externalizations and Interviews

There is a story of a monk who asks his master, 'I have a terrible temper and I can't cope with it. Please help.' The master says, 'Well, bring it to me and I'll see what I can do.' The monk hesitates: 'I am sorry, at the moment I haven't got it.' So the master suggests, 'Next time, when you have got it, bring it to me.' The monk confesses, 'I am not sure if I can do that.' The master then declares, 'In that case it is not yours,' and suggests that if it comes again the monk should get a hold of it and then beat it away with a stick. (Dwivedi, 1997, p. 90)

"Most often, it seems clients describe these restraints (problem stories) in terms of feelings. Among those most frequently mentioned are fear, guilt, self-deprecation, perfectionism, and anger. Since feelings are often accompanied by thoughts, this exploration also invites the clients to identify what such feelings are telling them (in other words, it externalizes them), as well as the particular types of contexts in which this occurs" (White, 1990, p.55). With the introduction of the "how are you feeling today"
exercise and the interviews with feelings states, I introduced Dizzy to externalization and the embodied exploration of feeling states. Not only was the goal to externalize what Dizzy viewed as her “problems” (violence, anger) that she often felt were overwhelming and all encompassing, the aim also became to assist her in identifying when she was experiencing these “problems”. As is true with many emotions, they are often difficult to identify until one is immersed in them. Through our interviews, I hoped Dizzy would learn the triggers that sent her into anger and the personal tools/techniques to assist in fighting her problems. As every individual is unique, Dizzy would have to develop her own method of dealing with her problems, she could not be completely successful by being handed a pre-packaged system of anger management, she would have to find it in herself.

According to these authors, a therapy that ‘encourages persons to objectify, and at times to personify, the problems they experience as oppressive’ (White 1988-1989, p.3) is more useful than therapies supporting the old definitions that clients bring to therapy with them. This view is based upon the assumption that clients’ definitions and understanding (interpretation) of their problems are often instrumental in supporting their continuing existence and power in their lives. (White, 1990, p.52)

The interviews also incorporated a fundamental aspect of Drama Therapy as well: role-playing. Through interviews, Dizzy externalized and role-played two significant aspects of her life; “pissed off” and “violence”. The interviews provided the means in which she could take on and personify these characters to the fullest. According to Landy’s role taxonomy, Dizzy was exploring her role of a “Hot head”. “... The hothead
is emotional, impulsive, irrational, given to violent outbursts. The Hothead expresses hurt, anger, and rage openly and directly” (Landy, 1993, p. 202). It could be reasonably stated that, in her daily life, Dizzy often plays the role of the Hothead and it is likely that she is often identified as such. It is through this role that Dizzy obtains complete attention wherever she may be (which has been addressed in several treatment meetings).

“Role does not exist in a singular form” (Landy, 1993, p.13). Similar to the concept of co-construction, Robert Landy refers to life roles as intertwined with the life roles of people around us. Looking at the “hothead” role that Dizzy often played, it can be concluded the opposite of this role must exist. The “hothead” must experience periods of calm. It is these periods of calm, which need nurturance and support so they may thrive. “To seek peace, one must negotiate with one’s tendency to disturb the peace. To do that, one needs to give voice to one’s anger and listen carefully to the message. In choosing peace, a place needs to be found for war” (Landy, 1993, p. 14). In choosing peace, Dizzy needed a place where anger and rage could be stored. Her creative work with poetry, role-plays, and dramatic play became that “storage area”.

In asking Dizzy to embody and interview the qualities she is familiar and often associated with, she was also able to examine their influence on her life. The focus of the interviews was not, however, to necessarily change behavior. As this is so often the request that most adults (social workers, child care workers, staff) ask of her - change the behavior. “Sometimes giving up certain behaviors (such as punitive ones) may feel like losing whatever power or control one has over the situation and can be associated with feelings of complete helplessness.” (Dwivedi, 1997, p.92). I therefore did not request a
behavior change, but invited an exploration of the emotions behind the outbursts and invited Dizzy to brainstorm how they might be best dealt with.

In the 'de-roling' of the emotions in the interviews, I have essentially asked Dizzy to correspond with her externalized interviews through letter writing and/or verbal comments to the emotion. Both are an adaptation of the Narrative concept of letter writing in which letters are used as a means of communication between the therapist, the client and the client's outside community, promoting the client and the work he/she has done in therapy. "...letters are a version of that co-constructed reality called therapy and become the shared property of all the parties to it. Letters can be substituted for case records" (White, 1990, p.126). Through the use of letters in Narrative Therapy, communication lines are opened among parties who might not otherwise have active communication. In adapting this to Drama Therapy and to Dizzy's needs, I intended to open communication between the aspects of herself that she might otherwise not communicate with. It also provided a means in which we could maintain some distance and clarity between the embodied roles of her emotions and her self. These letters therefore essentially became a "de-roling". Dizzy and I listened to the recorded interview with 'Pissed Off', afterward choosing to either write a letter to Pissed Off, comment to Pissed Off on the tape-recorder, or both. This further externalized the problem, emphasizing her interactions with "Pissed Off" and de-emphasizing her feelings that "Pissed Off" is an uncontrollable part of her.

Problem externalization involves talking about problems as problems rather than people as problems. ...it is in direct contrast to the dominate "mental health
story” which pathologizes people via placing their problems inside of them.

(Parry & Doan, 1994, p.52)

Techniques: Storytelling through Poetry

Poetry, Stories, and Interviews were the main focal point of Dizzy's script. I cannot say that they came from my initiatives, as I believe the work Dizzy and I have done is co-created. However, the language with which Dizzy expresses herself belongs to her. She is able to find meaning and unravel complicated issues through working in the narrative form. Not only does the script give an opportunity for Dizzy to express herself in her preferred language, but it also acts as a celebration of Dizzy's obvious talent for this type of expression. It is her talent and passion for the narrative form that must be acknowledged and supported. Through supporting and encouraging her narrative voice, Dizzy may begin to develop new stories about herself. Stories that are not dominated by violence and anger, but balanced with empowerment and self-confidence.

“The narrative analogy suggests that for human change to occur, the stories that structure and shape people’s live – in other words, the ‘meanings they are making’ – must undergo some sort of re-vision” (Parry and Doan, 1994, p.103).

Therapeutic Value

The proliferation and elevated status of the modern document are reflected by the fact that it is increasingly relied upon for a variety of decisions about the worth of persons . . . thus, documents have become influential in the lives of persons to the extent that they precede and preclude persons in a great number of situations.

(White, 1990, p.188)
The script became a document that held three levels of therapeutic meaning. The script that Dizzy created through our Drama Therapy sessions developed around the idea to acknowledge and document her current story, thus accept herself; document this story in the language with which she communicates it, thus empower her voice, and celebrate her movements toward “new” stories, thus actualize her potential. It provided a space where Dizzy’s voice was heard, where she was able to communicate to the world. In this way, her story is acknowledged. “It is often necessary to render the details and characteristics of new stories so visible that both the clients and significant others will be aware of their existence . . . The only stories that count are ones that people are sufficiently aware of to recite into being” (Parry & Doan, 1994, p.173). Through Dizzy’s writing of the script she spread the news about her current story, and set the framework for new stories to emerge through her new role; that of an author. In the following section, I will further examine what I consider the therapeutic aspects of the script. I will also examine the overall therapeutic value of the project first in relation to Dizzy’s experience.

**Therapeutic Value: Acknowledgement of Current Story**

“It (therapeutic conversation) is a mechanism through which the therapist and the clients participate in the co-development of new meanings, new realities, and new narratives.” (McNamee, 29). It is my belief and that while the development of new meanings and realities is the desired result of a therapeutic intervention, this “newness” cannot be created without the acknowledgment of the pain and struggle in which one currently exists. Only after the struggle is acknowledged can one begin the process of changing the story line. Without this acknowledgment, the process of change becomes shallow, unlikely to stand the test of time, and even another oppression in the individual’s
life. It becomes essential for the therapist to both acknowledge the struggle and to have acute awareness of the timing in which the individual can successfully move toward change. In reflection, it is my interpretation that Dizzy’s script is a documentation of the struggle she faces. Now that she has acknowledged and documented her struggle, it would be my responsibility to stay with her pain and gauge her needs to move toward change. “...written “texts” serve as more than a (powerful) metaphor for the client’s life, becoming active therapeutic procedures used by the therapist” (Neimeyer, 1993, p.227).

The content of the script acknowledges Dizzy’s current story and struggle. Murder, rape, abuse, violence, anger are all themes which run throughout. It is important, however, that these themes are given a space to live and to be explored, for it is easy to find them too difficult to accept. Through the Drama Therapy process, the script became a tool in which difficult themes could be contained and held, while still acknowledging them. “Writing a book (or any act of writing) is, in the main, a projective activity, where thoughts, feelings and ideas are recorded outside of the human body” (Jennings, 1994, p. 41). As I noted earlier, the format of the script actually acts as a double container. While the poems and interviews act as a container for difficult issues and themes that Dizzy faces in life, the script contains the containers. It is through this strong structure that Dizzy acknowledged her story with safety and can begin to move forward.

Therapeutic Value: Empowerment & Responsibility

The importance of documents in peoples lives stretches into most aspects of life and touches almost everyone. Although documents and written texts are prominent in our lives, most of these documents are written in language that caters to the author rather
than the subject or audience. Take this paper for example. I am conscious of the fact that if I presented this paper to Dizzy, she would not be able to understand or grasp many of the topics and concepts I have written about. I understand, however, that my audience will not be 13 year-olds, rather post-graduate and professional Creative Arts Therapists. Communicating ideas and stories through the language of a graduate student in Drama Therapy, I have also organized my ideas in the manner specified by the American Psychological Association Publication Manual. This language challenges and empowers myself as a professional and an individual. If Dizzy were to create a document, in her language, communicating ideas and stories that are significant to her life, would this not also challenge and empower her?

There are also those documents that are significantly authored by the person who is their subject. In these documents, the subject plays a central role in contributing to the specification of her own self. In doing so, she becomes conscious of her participation in the constitution of her own life. This can lead to a profound sense of personal responsibility, as well as, a sense of possessing the capacity to intervene in the shaping of one’s life and relationships. (White, 1990, p.191)

The opportunity to create a document about oneself that others will view is one that most 13 year-olds do not encounter. With the creation of such a document comes a sense of power, of empowerment, of knowledge of one’s own voice. There is also a sense of responsibility. In the creation of the script, Dizzy had both freedom and responsibility over the content. And with choice and power comes responsibility for actions and non-actions. Dizzy took the responsibility through her initial decision to
accept this project. She took the responsibility a step further in her authoring and editing choices. The script is reflective of Dizzy’s commitment and responsibility to both her artistic creation and her personal therapeutic work.

I have often visualized the therapeutic relationship as one that holds a specific amount of power. Within the relationship, this power can neither be created nor destroyed, only redistributed. Traditionally, therapists have held the majority of the power, acting as experts with far more knowledge of people than people know of themselves. Throughout this paper, I have introduced the idea of co-construction, as both a clinical style as well as a theoretical perspective. Co-construction implies cooperation, teamwork, choice, and power balance. Through the redistribution of power in the therapeutic relationship, along with the techniques and framework of the script, another therapeutic quality of our work was Dizzy’s empowerment. “Every piece of fiction, therefore, growing as it does out of its author’s subconscious and conscious mind, is valuable as a human document” (Esslin, 1977, p.107)

**Therapeutic Quality: Expanded Role Repertoire**

As I observed Dizzy in her interactions with staff and other residents of the group home where she resided, I was struck by the fact that there appeared to be little opportunity to expand one’s role repertoire. In fact, the roles that both the staff and residents played out were limited, repetitive and often dysfunctional. I sensed frustration on the part of both staff members and residents that they were stuck in these roles. At one point, I entertained the idea of creating a “community group” involving staff and residents, but, instead, decided to work with Dizzy toward the expansion of her role repertoire. The script also became a celebration of a new role for Dizzy, the role of the
author, or poet. In this sense, Dizzy practiced her role as a poet and an author through the creative expression of her story. Through the documentation of Dizzy’s story through her own chosen language, we promoted and encouraged a new life role as well. “The social constructionist, narrative methodology is dialogical and focuses on the many aspects of the client’s abilities rather than searching for pathology or dysfunction.” (Riley, 1997, p.285)

Through the creation of a piece of art, a script which contained feelings, fears, hopes, and explorations of herself, Dizzy added a new role to her repertoire. She added the role of an artist, a writer, and a creator. The importance of this role is not the final product of the script, but that she practiced this new role every week for 12-weeks in our Drama Therapy sessions. Dizzy stretched her role repertoire through our explorations, thus exploring her potential as well as practicing that potential. Her potential to find and add new roles in her life that satisfies and strengthens her as a person. The potential to respect, yet diminish, the role “Hothead” plays in her daily life. This expansion of role repertoire assists in Dizzy’s realization of her potential, and is thus one of the therapeutic aspects of the co-creation of this script.

Our real-life roles, responses, and dynamics in interaction with others are limited; we become imprisoned by our own patterners and the expectations held by others that we behave in certain ways. . . An expanded role repertoire equips us to deal with a broader range of life situations, to cope with new tasks, and to respond to old tasks in new and creative ways. . . Even more significantly, we become increasingly available to all that lies within us. (Emunah, 1994, p.33)

**Conclusion**
After 22-weeks of Individual Drama Therapy, Dizzy and I terminated our relationship. On the last day, I presented Dizzy with her copy of the script, typed (upon her request) and bound. She flipped through the pages of the script, slowly, seriously, and in silence, seemingly re-reading much of the work. Contemplatively, she looked up from the pages and, nodding slowly, commented, “This looks good”. A look of pride began to break through the seriousness on her face and soon she was beaming from ear to ear. We had previously chatted about the selectivity and responsibility she should use before showing the script to people. We spoke about this again and she agreed that not everyone “could handle it” and that the script was “special”. Then, after we finished our celebratory sodas and chips, Dizzy politely asked if I would ever be her Drama Therapist again. I asked her if she wanted that, to which she replied, “not forever, but maybe for a couple of years.” I am currently communicating with Dizzy’s social workers, primary care workers, and teachers about continuing Drama Therapy with Dizzy.

Through a combined use of Drama Therapy and Narrative Therapy, in a format that promotes co-construction in therapeutic relationships, Dizzy was able to successfully navigate through an intensely inspired therapeutic experience. This paper is a documentation of our process and struggle with deeply complex and delicate issues. Through the writing of this paper, I have found new meanings in the work we did together, for I am re-storying it in a new format. I feel a sense of connectedness with Dizzy as I write since she experienced new meanings in her explorations with re-storying. Like her creation of the script, I am reflecting, digesting, regurgitating, and exploring meanings in this therapeutic process. Through this, I feel flexible, inspired and contemplative yet free. The discovery of new meaning creates a refreshing freedom, and
if it is freeing for me, I can only image how it might feel to someone who has carried pain for so long.

Several significant therapeutic steps occurred in Dizzy’s and my relationship. These steps outline her healing process and her increased ability to cope with her anger. The first step in this process was that she accepted -- and I provided her with -- a safe environment where exploration could occur. She accepted the opportunity to play, thus reconnecting with her childhood and embracing her creative and spontaneous self. Through her dramatic play, she was able to explore difficult issue surrounding violence, violation, and family in a safe and contained way. Since we worked in a non-directive manner, Dizzy worked at her own pace. She moved from metaphoric dramatic play to reality-based dramatic play, exploring major themes and social aspects of her life. With the creation of the “script”, Dizzy accepted, acknowledged, and documented her struggle. She used her own words to pay respect to the struggle, while containing it in the “script”. This allowed her room to explore new stories and meanings in safety, all while increasing her role repertoire through her artistic and creative development.

“All major life transitions and upheavals contain the potential for disturbance, as well as for personal growth” (Jennings, 1994, p.153). It is my belief that through the combined use of Drama and Narrative Therapies and the perspective of the therapeutic relationship as co-constructive, Dizzy began to move from a place of disturbance to a place of growth. According to team members who are currently working with Dizzy, they have seen an increase in self-esteem, increased ability to communicate emotions, appropriately, and increased ability to cope with disappointments. Several team members, including her primary worker, attribute the bulk of this change to her work in
Drama Therapy. Inspired by Dizzy's bravery and courage, I plan to further investigate the combined use of Drama and Narrative Therapies with adolescents.

_We are encouraged to think of ourselves not, as Shakespeare said, “merely player's,” mindlessly playing out our life scripts, but rather also as the playwrights and co-directors of our life's dramas._ (Blatner, 1996, p.1)
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