

**The use of mirrors in therapy: The potential use of a mirror as a projective
assessment tool in drama therapy**

Marleah Blom

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ABSTRACT

The use of mirrors in therapy:

The potential use of a mirror as a projective assessment tool in drama therapy

Marleah Blom

Literature on the use of mirrors within drama therapy and what information might be gained when a therapist observes his client interact with his mirror image is limited. An overview of how mirrors are used within psychological research, psychotherapy and drama therapy will be presented. A comparison will be made between the use of mirrors and the use of photographs and video as self-image viewing tools within the creative arts therapies. Projective techniques and projective assessments that are commonly used within drama therapy will be outlined before describing and evaluating a potential new projective assessment that uses a mirror in individual drama therapy with children. Further directions for research and clinical work in regards to the mirror as a projective tool are also discussed in order to introduce professionals in drama therapy and other related fields to new, creative, ways and techniques to help better understand their clients and their needs.

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Introduction

So well as by reflection,
I, your glass,
Will modestly discover to yourself
That of yourself which you yet know not of.
(Shakespeare, I: 2, 68-70)

The word mirror may be defined as “a reflecting surface, usually of glass coated with silver on the back; a faithful representation; a pattern for imitation; to reflect in or as in a mirror” (Stein & Su, 1980, p. 561). The word mirror is derived from the Latin word *mirari*, meaning to wonder. The roots of the word mirror also appear in miracle and mirage (Lichtenberg, 1985). Lichtenberg suggests that reflecting surfaces create a source of wonder and continuous fascination, as well as suggest the fantastic and illusory. The word mirror is also commonly used as a metaphor within various topic areas as one tries to describe how one thing is a reflection of something else, including theatre as it is described as a mirror to nature (Holtan, 1976) or “one usually thinks of drama as the mirror to life...” (Emunah, 1994, p.xiii).

In North America, mirrors may be found in various places. “Just about anywhere you look you can find mirrors” (Gardner, 1995, p. 4). They are used today as objects, decorations, research tools, and can be a source of fun as well as a source of information. Pendergrast (2003) states that the earliest discovered artificial mirrors were from approximately 6200 B.C.E. near Turkey. He continues to give a thorough examination of the history of mirrors and describes their many uses. A mirror, with its popularity, has thus various uses and representations. A mirror is capable of many things. “We have used the reflective surface both to reveal and to hide reality, and mirrors have found their way into religion, folklore, literature, art, magic, and science” (Pendergrast, 2003 p. ix).

While looking into a mirror one sees a reflection of the self, demonstrating not only how one views himself but this reflection may also reveal how others may view him (Katz, 1996). What one sees may be accurate or not, depending on his own interpretation, which is linked with one's own self-knowledge (Haglund, 1996). Can one's reaction to his reflection also express information to others about his inner self? Can we say that a mirror is an object that can become a magical surface on which projections can be made when individuals interact with it?

Ancient Myths and Customs

The magical powers of mirrors and seeing one's own reflection have been around since ancient times. In ancient myths and various customs in different areas of the world, the phenomenon of the mirror and viewing one's own reflection has had negative implications. Olowu (1984) discusses a myth in Nigeria which warns that newborn infants should not look into a mirror image until they grow teeth or until the age of three years. Frazer (In Elkisch, 1957) writes,

It was a maxim both in ancient India and in ancient Greece not to look at one's reflection in the water and ... the Greeks regarded it as an omen of death if a man dreamed of seeing himself so reflected. They feared that the water-spirits would drag the person's reflection or soul under water, leaving him soulless to perish (p.192).

Frazer also found the same beliefs among other cultures. Death was connected to seeing one's mirrored reflection in the water in that one would lose one's soul.

Roheim (In Elkisch, 1957) writes on rites and customs involving mirrors in many different cultures in which children, especially infants, should be prevented from looking

into the mirror due to the insidious dangers of creating a narcissistic fixation within the child.

The Greek tale of Narcissus (Bulfinch, 1913) speaks of a young boy who was loved by many but showed no return of affection. For this he was cursed. "That he might some time or other feel what it was to love and meet no return affection" (p.102). Once Narcissus saw his own reflection in the water, "he fell in love with himself" (p.102). Narcissus died looking at and wanting his own reflection.

Within the above stated myths and customs, individuals, especially children, are advised not to look at their mirrored reflections. Being faced with their self-images was linked with the loss of their souls or a creation of a narcissistic fixation. It may be stated that in ancient times, viewing one's mirror image may bring forth hidden parts of the self or set forth psychological processes that are not necessarily otherwise visible.

Children's Stories

The phenomenon of mirrors and self-reflection are also common within many children's fairy tales and stories. One example of this is Snow White (Barthelme, 1967), in which the Queen is repeatedly looking into her mirror to ask the following, "looking-glass upon the wall, who is the fairest of us all?" (p. 213). She would do so "...for she knew that the looking-glass spoke the truth" (p.213). The Queen would be content when the mirror replied that she was the fairest in the land. She would, however, become filled with rage, envy and disappointment when her looking-glass revealed that Snow White was fairer than she. After failed attempts to kill the fair Snow White, the Queen "...could not stir from the place for anger and terror" (p. 221) and fell down dead due to her fill of anger and negative emotions.

A mirror does force one to face his own self-image. In a way the mirror does speak some form of truth. When one's image in the mirror does not reflect what one wants it to, however, hidden emotions may be evoked. These emotions may be negative like the Queen's feelings of envy, anger and disappointment when her looking-glass told her of Snow White's beauty. In this fairy tale, the Queen's feelings were only evoked when she faced her own reflection in her mirror.

Hans Christian Anderson's tale of *The Ugly Ducking* (1985) also tells the tale of a character who views his own reflection. Here, one duck believed that he was extremely ugly and unacceptable to others. It was not until the end of the story, in which the duck "...bowed his head low, expecting death. But what did he see in the water? He saw beneath him his own form, no longer that of a plump, ugly grey bird - it was that of a swan" (Anderson, 1985, p. 219). Your self-identity is created by not only how you view yourself but also by how you feel you are perceived by others. In this children's tale, it was only through seeing his own self-reflection through which hidden elements of the duck were brought forth, which in turn helped create positive feelings of self-worth and self-acceptance.

Mirrors are frequently used and are very much accepted as part of our society. They are common objects that are readily found and are, along with seeing one's reflection, a part of many tales and stories. Most children become familiar with being exposed to mirrors at an early age. "One of the ways by which the child can symbolically designate himself in the environment is by seeing his own image in the mirror" (Olowu, 1984, p. 135).

Mirrors are found as part of many infants' toys and mobiles. Mirrors are also commonly used to help develop children's mastery of behaviors and materials. "Thus the mirror has been used to aid in mastery with materials, and it has also been used in mastery of a safe and comfortable development of engagement between child and therapist" (Mallery, 2001).

Psychological Research

Studies have shown that even children who are not familiar with mirrors have the ability to recognize themselves (Priel, 1986). In her research Priel has analyzed "...the influence of familiarity with mirrors on the process of self-recognition in children from 6 to 26 months old" (p. 239). She discovered that familiarity with mirrors does not effect an infant's self-recognition abilities, although it may impact the ability of the child to utilize the mirror to localize an object behind him.

In Mans, Cicchetti, and Sroufe (1978), it was said that "only severely retarded and some psychotic individuals appear not to recognize their visual image" (p.1250). Many experiments with atypical infants and toddlers have been conducted along these lines in order to help discover if most infants and toddlers are able to recognize their self-image when faced with a mirror. Some of these studies will now be discussed briefly.

Studies have been done on self-recognition abilities of autistic children, (Neuman & Hill, 1978; Spiker & Ricks, 1984). In examining the notion that "autistic children appear to lack self-awareness" (p. 571), Neuwan and Hill discovered that autistic children above the age of 5 years are capable of self-recognition in mirrors and in pretaped images. Spiker and Ricks found that 69% of their 52 autistic children studied were able to recognizing their mirror-images and explain that "... those who failed to show

evidence of visual self-recognition were more likely than those who did show evidence of visual recognition to be mute or lacking in communicative speech ...” (p. 214).

Mans, Cicchetti, & Sroufe (1978) performed a study with children diagnosed with Down’s Syndrome to test the notion that “... self-recognition is a function of cognitive development” (p. 1248). Data collected within their experiment helped these authors conclude that “by the age of 3 years almost all Down’s syndrome children are able to recognize themselves in a mirror” (p.1250).

Studies have also been done to explore cognitive, social, and emotional variables in relation to the development of visual self-recognition in infants. Schneider-Rosen and Cicchetti (1984) examined the impact of social experiences on developing self-knowledge as they tested the relationship between attachment and self-recognition. They found that “as expected, those infants who recognized themselves, a significantly greater portion of them were securely, rather than insecurely attached to their caregivers” (p. 653). They also found that there was no significant difference in the self-recognition abilities of maltreated infants compared to non-maltreated infants.

Another study completed by Schneider-Rosen and Cicchetti (1991) examined the self-recognition abilities and spontaneous affective reactions of maltreated and non-maltreated children. They found all children were able to recognize their own self mirror images and there were some differences in affective responses within the three groups tested. Maltreated children were more likely to show neutral or negative affect when exposed to their mirror images.

Research findings have suggested that most children are able to use a mirror to view their self-image. This leads to the following questions that will be addressed within

this paper. What psychological processes are activated when a child views his own reflection? Can a child's reaction to his mirror self-image translate information about their feelings of self or provide others sources of information that he may not otherwise reveal? What hidden parts of the child's self may be projected and revealed onto this type of reflecting surface, onto such an object that is able to create magical and illusory sources of wonder?

The above mentioned children's stories and ancient myths give a certain importance to the idea that seeing one's own reflection is a crucial process which enables hidden psychological processes and feelings to be revealed. We are also aware that past research has described how different types of children are capable of self-recognition and that children may have different affective responses to their mirror images. Being exposed to a familiar object, a mirror, may unconsciously help a child project or reveal important, otherwise hidden information to others, or more specifically, to a drama therapist.

This paper will provide a theoretical examination of the use of mirrors in therapy and introduce the use of a mirror as a potential projective assessment technique when working with children. It will include a discussion of literature addressing how mirrors have been used in research and clinical practices within the field of psychology and in the field of drama therapy. Literature that currently exists on this topic will be explored, as well as other literature on other areas that use the processes of viewing one's self image, such as videotherapy and phototherapy. Projective techniques and assessments within the field of drama therapy will then also be described. A summary of what has been

discussed along with ideas for clinicians, researchers and drama therapists to consider in order to help promote future research within this area will then be included.

Let us now take a look at literature that has examined how mirrors have been used within the field of psychology.

Chapter One: The Use of Mirrors Within Psychology

Within the field of psychology, literature has focused on a variety of areas in which mirrors have been used. Mirrors have been used as metaphors to compare how one thing may reflect another and they have been discussed within the development of certain psychological theories. During the 1800s, Cooley created the term ‘looking-glass self’ as he theorized that a self-concept is a reflection of what we perceive others think of us (In Pendergrast, 2003). He believed that a child developed his sense of self through social interactions and that others are the mirrors in which an individual see himself.

Freud also has made references and analogies to mirrors in his numerous works (1912, 1919, & 1920). He compares an analyst to a mirror by describing how an analyst should show patients nothing except what his patients demonstrate to him. He refers to mirrors and blurred boundaries as he describes his concept of the uncanny. He also writes about his grandson’s games that involved looking and crouching beneath a mirror.

Lacan has created the theory ‘mirror stage’ of development (Muller, 1985). His framework maintains that the ego is a structure of identification and reflection and the origin of the ego are created by an infant’s response to its image in a mirror between 8 and 18 months of age. Many psychological theories are based on the process of mirroring, within therapy and within the early stages of development (Haglund, 1996). One of the psychoanalytic theories that focus on the mirroring process that occurs between the infant-mother dyad is the theory of object-relations.

The use of mirrors as objects has been documented throughout different branches of psychological research. One-way and two-way mirrors have been used in the field of psychology for research, supervision, observation, and training purposes. Literature has

touched on the use of mirrors within both experimental and clinical settings, some of which will be described below.

The use of mirrors within the field of psychology has been used by others experimentally to explore the concepts of social construction, (Ingusoll & Bronitsky, 1987; Katz, 1996), ego development (Evans, Brody & Noam, 2001; Kunkel, 1947), self-concept and self-representation (Chadwick, 1988; Snodgrass & Thompson, 1997), and self-focused attention (Duval & Wicklund, 1972; Carver, 1979; Carver & Scheier, 1981; Greenberg & Musham, 1981; Zentall, Hall & Leer, 1998). Information generated from some of these areas will be touched upon briefly within this section. A more in-depth look at literature in the area of child self-recognition will be presented, including articles that explore both normative and atypical children's emotional responses when faced with mirror self-images. We will look at these findings as well as findings of other studies that have examined both normative and atypical children's reactions to mirrors to help determine when a child can recognize his own image and how his reactions to his own reflection may differ due to other variables in his life. This will help to determine possible interpretations that could be made if a mirror is used in therapeutic settings.

Use of Mirrors in Mental Health Practice

Information on the use of a mirror as a tool by mental health professionals within psychotherapy and clinical practice was very limited. A few articles describe the use of mirrors with adults who have been diagnosed with psychiatric disorders. These include Kittur and Ruskin (1999) who describes how the treatment of Alzheimer's patients has been investigated whereby Alzheimer patients expressed agitated behavior due to self-misperceptions when placed in front of a mirror. Other clinical uses have been explored.

After examining his clinical work with patients and their responses to mirrors, Shengold (1974) states, “I became aware of the mirror as a fascinating instrument that allows for perception and reflection of images of the self and of others” (p. 98). His psychoanalytic theories guided his work. He based his patients’ interactions with the mirror on the mirroring situation between infant and his mother as evoking the beginnings of object relationship and the sense of self. He discovered that a mirror image could stand for some aspects of the self, or of the object, or of the self as pictured in his parent’s eyes. “Inasmuch as images of the self and of objects can be presented in the mirror, most conflicts can be enacted there” (p. 114).

Elkisch (1957) describes her work with psychotic and borderline patients, with whom the mirror played a role that seemed to be related to the narcissistic qualities of their illnesses. She describes three of her patients’ behaviors in front of mirror and concludes that they used mirrors in order to help retrieve what they were feeling that they had lost, or might lose; their ego, self, and/or boundaries. “Each of these three patients was gazing at his image as if through such mirroring he might restore his self-identity” (p. 243). By observing her patients’ behaviors in front of the mirrors, and by examining how they used the mirrors within psychotherapy, Elkisch was then given the insight into her patients’ internal struggles and behaviors. She was then able to conclude that these patients, in using the mirror, were attempting to hold on their fragmented selves.

Although some literature touches upon the use of mirrors in psychotherapy, mirrors within literature have more commonly been documented as being used within psychological research. Let us now take a look at the use of mirrors in the empirical research area of self-focused attention.

Mirrors Used within Self-Focused Attention Research

Placing mirrors in front of students have tested the influence of self-focused attention on the academic abilities of hyperactive students during tasks (Zentall, Hall & Leer, 1998). The authors state that a mirror can help focus attention to aspects of self and the presence of a mirror may then enhance students' performances on a written task. They found that performance by children was more accurate for those who looked at the mirror while doing a word puzzle, and performance was more detrimental for those students who did not look at their mirror self-image. These findings were similar to other studies completed by Carver (1979) and Carver and Scheier, (1981) in which the presence of an audience, observer, camera or mirror increased the self focused attention abilities in adults.

Greenberg and Musham (1981) created a study to examine self-focused attention of undergraduate students. This experiment was conducted to help determine if "...subjects who perform acts consistent with their attitudes will show an absolute preference for their own mirror images" (p. 193), and others who do a task discrepant from their attitudes would avoid self-focused attention. They discovered, through their experiment, that subjects who behaved in accordance to their own attitudes searched for more self-focused states (by looking in the mirror) while subjects who did not behave according to their own attitudes showed reluctance to sit before a mirror. These authors suggest, through their findings, that "...self-focused attention is desirable to the degree that individuals are free of faults on some salient dimension" (p.198).

Duval and Wicklund (1972) found that subjects who receive negative personal feedback exited more rapidly from a room with a mirror. They discuss how this is linked

with cognitive theories in which people think about and evaluate themselves while in the self-focused state.

Mirrors within the field of psychology have thus been used in therapeutic settings as well in research studies. The examples described above help point out how seeing one's reflection in the mirror may influence and help bring out an individual's inner psychological processes. Based on these research findings in the area, certain behaviors were brought about with the presence of a mirror, whether it be quickly exiting a room while hearing negative feedback, (Duval & Wickland, 1972), becoming agitated when not being able to recognize oneself, (Kittur & Ruskin, 1999), and being drawn to gaze more intently to one's image in an attempt to hold on to one's own self-identity, (Elkisch, 1957). A mirror then, may be a projective surface with which individuals react in certain ways, providing useful information and insights to others regarding one's behaviors and his internal struggles, and processes.

Mirrors Used within Self-Recognition Studies

Mirrors have also been used in other areas within the field of psychology. Most research that has used mirrors within experimental settings has been within the area of self-recognition.

A large body of knowledge within the area of self-recognition includes studies that have been done using primates and mammals. Gordon Gallup originally tested chimpanzees to see if they could recognize themselves in mirrors in 1970 (In Pentergrast, 2003). By using a rouge mark test that he created whereby a red smudge is placed on the subject and observations are made to see if the subject tries to touch the mark, he found that chimpanzees could in fact recognize their own reflections. According to

Pentergrast, further research has examined the self-recognition abilities of orangutans and dolphins who can recognize their own images, as well as monkeys and gorillas who do not have such self-recognition abilities when faced with a mirror and elephants, whose abilities have been contradictory in research literature. To this day, tests are continuing in the area of self-recognition with primates and other animals as researchers test other types of species. Another main source of literature and research within the area has come from testing human infants.

“In a 1972 issue of *Developmental Psychobiology*, Beulah Amsterdam published the first mirror-recognition study for human babies...” (Pendergrast, 2003, p. 365). Other prior studies, however, have been cited in other works, such as Priel (1986) who stated that the first studies of self-recognition that use a mirror can be traced back to Darwin in 1877 and Preyer in 1881. Previous studies provided results that contributed to an empirical body of knowledge regarding the developmental processes of self-recognition of an infant in a mirror.

According to Priel (1985), the developmental process of self-recognition that occurs in front of the mirrors may be as follows. When placed in front of a mirror, a child at 4-5 months displays social, joyful reactions to his image. At 8-10 months, a child concentrates and compares his body parts with his reflection, at 15-18 months, a child displays withdrawal and concern reactions in front of the mirror and by 20-22 months, a child is able to recognize himself. Most research concurs that “this capacity to recognize one’s self visually emerges during the second year of life...” (Schneider-Rosen, & Cicchetti, 1991, p. 471), between 18-24 months of age.

Developmental aspects of self-recognition have since been studied and, as mentioned in the introduction part of this paper, familiarity with mirrors does not effect an infant's self-recognition abilities (Priel, 1985). Autistic children above 5 years of age are capable of self-recognition (Newman & Hill, 1978, and Spiker & Ricks, 1984), and children diagnosed with Down's Syndrome can recognize themselves by 3 years of age (Mans, Cicchetti, & Sroufe, 1978). One may then use a mirror within therapeutic work with the knowledge that most children do have the abilities to recognize their own reflections at a young age.

Many other studies have been conducted within the research area of self-recognition, whereby researchers examine how other social, cognitive, experimental and language variables may relate to a child's development of the ability to recognize his mirror image. One of these studies includes the work of Schneider-Rosen and Cicchetti (1991), who examined children's emotional responses to their mirror self-images in an experimental situation that created spontaneous affective reactions by the children. They observed children's affective reactions before testing for actual self visual-recognition. They tested three groups of children, aged 18, 24, and 30 months, involving both high-risk populations, including maltreated children, and normative children in an attempt to provide a "...more comprehensive understanding of social and experimental variables that may mediate the development of self-knowledge..." (p. 472). They found that "...there appears to be no association between the experience of maltreatment and the emergence of visual self-recognition at any age" (p.474). All three groups were capable of recognizing their own images in a mirror. Other data from this experiment demonstrated that maltreated children and non-maltreated children from lower socio-

economic groups were more likely to show neutral/negative affect when exposed to mirror self-images in comparison to non-maltreated (high socio-economic status) children who showed more positive affect.

Schneider-Rosen and Cicchetti provided, within the above stated study, a thorough discussion on how "...the mere observation of their mirror image appears to induce affective responses in youngsters" (p. 472). They also outline literature that deals with how maltreated children may differ from normative child populations in their emotional development and affective reactions to mirror images and suggest that further research is required, focusing on affective responses of children from similar samples in a variety of contexts.

This study therefore provides us with findings that demonstrate that children, from both normative and high-risk populations are able to recognize their own images. It also provides us with findings that suggest that certain social variables, that may include maltreatment and/or socio-economic status, may affect a child's reaction to his own image when placed in front of a mirror.

Mirrors then, with their reflective surfaces, have been used in a variety of ways within different settings and different research areas within the field of psychology. Through the above literature review, we have discovered and documented certain information. For many years, numerous theories have used mirrors and/or the process of mirroring. Within psychotherapy, a mirror can act as part of self for clients, be an object to help individuals hold on to parts of the self, and may be an object that gives insight to therapists about their clients internal struggles and behaviors. In studies of self-focused attention, a mirror may cause certain behaviors when it is placed in a room, whether it be

improved performances on tasks, or exiting a room quickly. By 20 months, most children have the ability to recognize their own mirror self-image and social variables may influence a child's spontaneous affective reactions when faced with his own reflection.

Therefore, a mirror is an object that immediately draws attention to oneself. From a young age, even without having previous experience with a mirror or having certain developmental, social or psychological difficulties, one can recognize his own reflection in a mirror, in a natural, unobtrusive way. As attention is brought to the self, a mirror can then act as a magical, projective surface that brings forth certain behaviors. By observing a child involved in the process of seeing his own reflection, for example, one may gain further insight and information about the child. A mirror may thus have an additional use as a projective assessment tool, in addition to those uses explored within this chapter and to the use of mirrors within the field of drama therapy. The use of mirrors in drama therapy will now be discussed.

Chapter 2: The Use of Mirrors Within Drama Therapy

Exercises involving mirrors and the concept of mirroring have been used and documented within the field of the creative arts therapies, including drama therapy.

Within the field of drama therapy itself, on the cover of some drama therapy texts one will find an image of one looking in the mirror (Emunah, 1994), or of an individual looking at one's reflection in the mirror (Landy, 1993). An examination of mirroring techniques used within drama therapy and how mirrors, as objects, are used within the field will be discussed as well as a comparison between the two. A look at how mirrors are used within other creative arts therapies will also be described.

Mirroring

Mirroring is a common technique used within psychodrama (Blatner, 1996; Lewis, & Johnson, 2000). It occurs when "the protagonist is asked to 'step out' of the scene and choose someone to take his role. The protagonist then observes his 'mirror' enact the scene. The mirror technique allows the protagonist to see himself as others see him," (Lewis, & Johnson 2000, p.187). It may be used as a way for individuals "to gain a perspective on his own actions" (p.187) and may also be used within sociodrama.

Mirror exercises may also be used within drama therapy, (Emunah, 1994). These exercises consist of one individual following another's movements and or sounds as precisely as possible. These mirror exercises may be preformed between individuals or in groups. Emunah states that mirror exercises may help with emotional expression, observation and or concentration "...depending on which aspect of the exercise is emphasized" (p. 150). Cattanaach (1996) also describes how mirror work between people

may help clients, when viewing their own actions, control their behaviors and may be beneficial to those who have difficulties looking at themselves or others.

The Use of Mirrors as Objects

Although research is limited on the topic, mirrors as objects have also been used, and are currently used within drama therapy. Lewis (In Lewis, & Johnson, 2000) describes using a mirror with a client who expressed a need to see herself within drama therapy. "I brought her a mirror and encouraged her to look into her own eyes" (p. 154). She states that her client saw herself as empty. As this client continued to look into the mirror, she then became aware of parts of her inner self before moving on to role-playing these inner roles.

MacKay (1987) uses mirrors within an experiment that examines if unconscious roles are brought out through the use of face painting and storytelling. She asked her subjects to look into a mirror after painting their faces and describe their faces as well as tell impromptu stories. She then assessed whether face painting evoked inner roles that were previously identified by her subjects on a pre-test.

Cattanach (1996) also describes various exercises that may be done with clients while using a mirror. Some of her activities are used to explore cultural identity in which children look at themselves in a mirror and describe their image or draw a picture of their face. She writes that individuals with physical disabilities may have a mirror present during and after applying stage make-up. Emotionally disturbed people may also use a mirror in which they carefully look at their own face in the mirror, examine it closely and then write a letter to it or draw a picture and share it with their partner.

Ward (1999) explores her therapeutic relationship with a five year old boy diagnosed with autism. Through her in-depth look at their drama therapy journey and her own methods of processing their work, Ward describes how a hand held mirror was used at various times throughout therapy. The mirror was first introduced during their sixth session together and Ward states that at this time, the boy "...used the mirror in a variety of ways but his primary use was to reflect his own image back to himself. It was as if it confirmed his existence" (p. 26). Work with the mirror continued during future sessions, as it was an object that was accessible to the child, along with other toys.

Differences between Mirroring and Using Mirrors

Mirroring and the use of mirror exercises in drama therapy are different from using mirrors as objects within drama therapy. Although they share some similar purposes and benefits, experiences had by individuals would be different when taking part in a mirroring activity compared to being faced with their own image in a mirror.

Mirroring, as described above, is a process that is used to help individuals gain new perspectives on their own actions through observing another act out their behaviors. Mirroring exercises may aid an individual with emotional expression, observation and or concentration by following or guiding others' movements or sounds. As Cattanaach (1996) describes, mirror work can provide "...helpful ways for two people to observe themselves and their partner and experience how they move and look through their partner's imitations of their movements" (p.112-113). These kinds of activities involve an interaction with at least one other person whereby an individual is watched closely by another and mimicked. The task involved is usually physical, and is very structured.

The use of a mirror as an object in drama therapy however forces one to look at his own reflection. It does not involve observing another in order to help gain perspective. An individual in this case may see and express different aspects of his own inner self depending on what he or she feels is being represented in his own reflection. It is an individual, personal, natural, unguided experience that does not necessarily involve physical actions.

Mirror Usage in other Creative Arts Therapies

In other forms of creative arts therapies, mirrors are used as well. One example involves the use of mirrors with individuals faced with body image problems within dance movement therapy.

Anorexic, bulimic and some compulsive overeaters lack an internal image of a body self or psychological self. These individuals "...rely on external feedback and referents, such as other people or mirrors" (Krueger & Schofield, 1986, p. 324). These authors suggest some techniques through different phases in which they used mirrors and mirroring within their dance/movement therapy in order to help individuals establish an internal center of reference around which a sense of identity can be established.

The first phase includes techniques that involve physical mirroring between the patient and therapist. The individual then gets to experience a relaxing, comfortable, and freeing activity that involves a shared movement with another close physical presence.

During the next phase of treatment, Krueger and Schofield (1986) suggest that the individual turn to face themselves in a real mirror and mirror their own movements. They can see, lead and experience their own bodies. It is stated that as patients

experience and recognize their entire image in the mirror, they are ready to turn their attention to the external world with a cohesive internal point of reference.

“Throughout treatment, work with the mirror maintains an important role. This is done for several reasons. The mirror provides an immediate affirmation of body self unlike any other medium” (Krueger, & Schofield, 1986, p. 329). The authors state that “...the mirror also encourages the conscious realization of the body as real and acceptable” (p. 329).

The use of mirrors as objects has also been noted in other therapeutic arenas, such as play therapy, although literature on the topic is limited. Mallery (2001) describes the potential nature of a mirror as a transitional object. In working with children, she outlines how useful a mirror can be by establishing structure, enhancing mastery of materials and attention as well as help regulate children’s behaviors. Overall, she explains “...the use of a mirror facilitates engagement with the environment in ways similar to the use of videotaping” (p. 401). How are other tools that allow for self-reflection used within therapeutic settings? How do they differ from the use of mirrors? These questions will be addressed in the following chapter as the use of photographs and video in therapy will be explored.

Chapter 3: Viewing one's Self Image With Video and Photographs

A mirror is not the only tool that exists that helps one view his own image. While looking into a mirror produces the ability to view one's reflection and potentially bring forth internal processes to the surface, viewing one's image in a photograph or video may have similar powerful consequences. The use of these tools for one to regard his own image, exist as adjuncts to observing and counselling individuals.

In this chapter, a brief exploration of how video is used, whether it is through video playback or by the process of filming and being filmed as well as self-portrait work with photographs will be discussed. Some examples and some of the purposes behind using video and photographs used specifically in drama therapy will also be explored. To conclude this portion of the paper, differences between using video and photographs compared to using a mirror will be outlined in order to look at the unique potential benefits of using a mirror in drama therapy as a projective assessment tool.

The Use of Video

The use of video has been recently incorporated in mental health professions. As Dufour (2000) writes, "the usefulness of the camera is based on its capacity to provide what is commonly assumed to be 'objective' information for self observation, self confrontation and increased self-awareness" (p. 3). Many people have used a video camera within different situations and with a variety of populations. Paradis (1985), for one, describes how substance abusers have been shown videos of themselves in therapy dating back as early as 1954. She uses video feedback as a form of mirror. Video feedback, in this case, is used as a form of self-confrontation in order for a client to watch himself and see how he behaves and how he is viewed by the world. Video feedback

“...retains ‘real-time’, recording visual gestures simultaneously with auditory events,” (Paradis, 1985, p. 55).

Dufour (2000) is another author who writes about her use of video within her art therapy session with children. She states that most “...uses of videotaping diverge in their aims and methods, they share the common thread of relying on the playback function of video technology to derive therapeutic benefits” (p.12). Within an object-relations perspective, she discusses the benefits of filming and being filmed instead of having clients view their own self-images on taped material. She observed the interactions between her clients and a video camera and found that even without the client being faced with his own image, the camera created powerful projections reflecting the clients’ relationships with their mothers in early childhood. The camera was a tool that allowed clients’ projections of their mothers’ gaze, which affected and changed their sense of self through therapy.

A video camera is therefore a tool that has been used for many years as an aid to help clients in therapy, whether through processes of viewing their own images through video playback or by acting as a neutral projective object that puts forth feelings about one’s sense of self.

The Use of Photographs

Another means to observe one’s own self-image is by facing a photograph of oneself. Within the field of phototherapy, there is a technique that involves working with individual’s self-portraits. “The term self-portrait loosely encompasses any photographic presentation dealing with the perceptions of oneself by oneself, whether actual or metaphoric” (Weiser, 1993, p. 19). This technique involves having a client take his own

photograph, either in a 'live' photo moment with a Polaroid camera within the therapy session or outside the therapy room on a self-portrait assignment. It has been said that the self-portrait technique "... is probably the most powerful of all the phototherapeutic techniques because of the emotional involvement that the client can have when confronted with his/her own image," (Elmaleh, 2000, p. 6).

While working with self-portraits, Weiser (1993) goes on to say that as clients have control over taking their own photographs, clients can explore who they are without someone else watching, and judging through the lens. A photograph provides an individual with a three dimensional representation of oneself to aid in safely looking at oneself as an external entity, a separate person. One can examine separate components of oneself and explore the possibilities of their identities. The external components of the self can then be compared with one's internal image. "Because they are pictures of the self, made by the self, they have the potential to be powerfully self-confrontational and undeniable" (p. 19). Clients may have dialogues with their selves and/or confront their selves verbally and nonverbally. Self-portrait work can also be combined with other expressive media, and be further aided with other projective techniques.

Within the field of drama therapy itself, video has been used in a variety of situations, settings and for different purposes. For one, video drama may be described as "a technique employed in organizational development which, from interviews of staff, identifies the underlying problems and creates a script and a dramatic production which demonstrates an alternative way of interacting within the organizational system using the familiar 'training film' style" (Lewis, & Johnson, 2000, p. 464). Videoing within drama therapy is also a term that is "used to identify significant moments and interactions for

further awareness, assessment, as well as to extend the creative metaphor through movie making” (p. 464). A few examples of how and why different drama therapists use video within their work will now be discussed.

The Use of Video in Drama Therapy

Linden (In Lewis, & Johnson, 2000) uses videography in transformational theatre whereby a monitor is placed beside the camera so an individual can watch his own image while being guided through different levels of awareness. Harvey (In Lewis, & Johnson, 2000) uses video with other drama therapy techniques in dynamic family play to help families work through problems. Emunah (1994) also uses video in different ways with a variety of populations.

Within group drama therapy with adult patients in a psychiatric day treatment center, Emunah (2000) states “aside from taping and viewing segments of most sessions, the clients were asked three times during the series to sit before the television monitor and address their own live image...” (p. 68). This activity, which Emunah refers to as ‘Confronting Yourself on Video,’ is a powerful encounter between the client and his self. “Feelings about oneself and issues of self-esteem generally surface” (p.227) and it was devised according to her, a drama therapist, to observe and document how clients viewed themselves throughout treatment. Emunah also uses video as a means to record such things as rock videos, scenes, and production on tape “...allowing the group at the end of the session to become audience to its own creative work” (p. 210).

Landy (1986) describes how video may be used as a projective tool. “As a removed, judgmental, or intuitive eye, the camera can take on many projections”

(p. 137). He uses video along with other drama therapy techniques in order for clients to watch and observe images of themselves, speak to their own images, as well as project their inner thoughts, roles and conflicts. "In drama therapy, video technology provides a means of instant feedback, self perception, and self-analysis. As a naturalistic projection of the self, it is a direct confrontational device that allows a person not only to see an image of himself in present time but also to speak to and analyze that image" (p. 136).

Petitti (1989) uses video in drama therapy as an externalizing object, "...that is, as an inanimate object transformed by the patient into the role of a significant other so that a fictional relationship to real-life conflicts can be dramatically played out and explored" (p. 121).

The Use of Photographs in Drama Therapy

Information focusing on viewing photographs of self in drama therapy is not as readily available. Dunne (In Lewis, & Johnson, 2000) writes about one of her clients creating a pictorial history with photographs chosen to capture important life moments from birth to present. This history may be changed, Dunne states, through therapy by adding photos. She does not however discuss how her clients react to photographs of themselves. Landy (1986) discusses how a photograph "...contains a vast potential for drama which occurs through one's projection into it" (p. 135). Viewing one's self in a photograph is a starting point for other drama therapy techniques, such as body sculpts and tell a story. Further information on viewing one's self-image in a photograph within drama therapy may be an area to be explored in further research.

What is it that occurs when one is placed in front of an object that will record self or when one is faced with his own image, whether it is on video, photograph or in a

mirror? “Overall, little attention in the literature is devoted to the psychological processes engaged in the act of being photographed or filmed in and of itself, despite the fact that strong reactions are generally acknowledged and even expected” (Dufour, 2000, p. 16). Without substantial literature related to the topic, what then can we say about how the use of video, and photography in therapy is compared to the use of a mirror and how do these processes differ?

Differences Between Using a Mirror and Using Photographs or Video

Some purposes of using video playback and other self-confrontation procedures with video or photographs, as discussed earlier within this section, include the client being able to watch himself and see how he may be viewed by the world, observe alternate ways of interacting with others, gain further self-awareness and self-analysis, work through group and individual problems, as well as interact with self. Photographs and videos also have projective qualities. Different uses of these objects help bring out clients’ inner thoughts, relationships, roles, and conflicts, and help therapists observe and document how clients may feel about themselves.

Both video and photographs are used in therapeutic contexts, including drama therapy, as tools that compliment other work being done within therapeutic situations. Videos and photographs are used along with other techniques and information gained from clients’ interactions with them may provide starting points for future work and for the development of other appropriate treatment and therapeutic goals.

A mirror may be similar to a video or photograph in many ways. It is an inanimate object that produces one’s self- image. It too creates opportunities for self-confrontation, self-awareness, and self-analysis. When an individual looks at his own

image in a mirror, he can interact and speak with his self as well as see how he may be viewed by others. As “the camera’s potential as an object is dependent upon the projection that is made onto it” (Dufour, 2000, p.6), a mirror also possesses a surface on which projections and projective interactions may occur. “Mirrors are meaningless until someone looks into them. Thus, a history of the mirror is really the history of looking, and what we perceive in these magical surfaces can tell us a great deal about ourselves- whence we have come, what we imagine, how we think, and what we yearn for. The mirror appears throughout the human drama as a means of self-knowledge or self-delusion” (Pendergrast, 2003 p. ix). Information regarding a client’s inner self may be brought forth to the outside world, thus providing insight to a therapist.

How would a mirror, however, differ from the presence and purpose of a video or photograph in a therapeutic context? A mirror is an extremely common everyday object. Individuals are familiar with mirrors and interact with them continuously in their daily lives, whether it be in their homes, cars or out in society. Individuals, on the other hand, are not necessarily as familiar nor are they as readily in contact with video and other forms of cameras. Cameras may be more threatening or cause apprehension, and other uncomfortable feelings, which, in turn, may hinder the creation of an image of the client’s real self.

Cameras are also known to many people as objects that have been made for recording purposes, whether it be on videotape or film. This may create the feeling of a presence of an invisible audience, and one may ‘act’ or ‘pose’ in a more unnatural state as compared to being placed in front of their own image in a mirror.

“When people pose for photos, even those they take of themselves, they usually have certain ideas about how they should look in the final picture, and these reflect their expectations about how they should be perceived by other people in real life” (Weiser, 1993, p. 5).

When faced with a mirror, it is an intimate encounter between individual and self without feelings of others being present, with no expectations, and it does not provide opportunities for many differential interpretations, except those made by the individual looking at himself. On the other hand, work with photographs “...permits the complex examination of a slice of time frozen on film as ‘fact,’ and it also allow an endless variety of ‘realities’ to be revealed as each viewer responds to it differently” (Weiser, 1993, p. 4).

An interaction with a mirror is also an experience that occurs precisely in the ‘here and now’. An individual looks at and interacts with his own image at a specific time and then it is gone, with no reproductions or permanency possible. “The person who takes a picture is trying to make a permanent record of a special moment...” (Weiser, 1993, p. 6). It is not something that can be played at a later time, nor can it be shown to other people. An experience with one’s own image in the mirror belongs only to the individual, even when used in group settings, or when being observed by others. It may be referred to as a process of ‘seeing’ instead of a process of ‘being watched’.

A level of space or distance may be created by the presence of a camera, film, and or monitor compared to an interaction between individual and his mirror image. “Because of its capacity to record what the human eye sees, there can be a assumption that a camera is a neutral, objective eye. While in purely technical terms this is correct, I suggest that no person ever relates to a camera as though it was an inanimate,

unjudgmental object” (Dufour, 2000, p. 6). An experience with a mirror is an exact, natural reflection, with no distortions in body, voice, space and/or angles.

An individual may also be comforted with a mirror in that they exert more control over the experience than with a camera. With a camera, someone else may be taping or taking pictures. Someone other than the individual may thus be manipulating the tool and have control over what image is being created. A client in contact with a mirror, especially a hand held mirror, has complete control over his experience, he can physically touch the mirror and adapt how long and as much as they feel comfortable with. This also provides even more information to the therapist who is observing the process of how an individual interacts when being faced with his own image. With a camera, space and time is an added dimension that impacts the ability to control the image.

As discussed within this section, video and photographs have been used for many years, in different mental health settings for the purpose of allowing clients to see, confront and interact with their own images alongside other techniques. These self image making tools have also been incorporated into the field of drama therapy.

A mirror, as another inanimate object that allows for such self-reflection possibilities, is also a familiar tool that possesses unique characteristics that differ from those of video and photographs. These differences may produce more natural interactions and projections and the benefits of using a mirror in therapy, including drama therapy may have previously been overlooked.

Seeing as though, according to the literature, video is being used as a projective tool in many ways in drama therapy, the addition of using a mirror, for its unique benefits, may be beneficial to the development of other techniques and the field of drama

therapy itself. Let us now examine how projective techniques and assessments are currently used within the field of drama therapy before outlining a possible projective assessment that uses a mirror in drama therapy.

Chapter 4: Projective Assessments and Projective Techniques Used within Drama Therapy

A “projective technique is the placement of roles onto objects such as puppets, sand play (world technique), and masks for the purpose of identification, distancing and externalization “ (Lewis, & Johnson, 2000, p. 459). These techniques are commonly used within drama therapy and will be addressed here along with the use of projective assessments in the field.

Projective Techniques

Landy (1986) writes on how projective techniques are used within drama therapy in order to help honor an individual’s therapeutic journey through the process of distancing. Distancing may be described as “...a way to move a client closer or further away from the role in order to discover balance and aid in healing, growth, and role expansion through style changes and externalization” (Lewis, & Johnson, 2000, p. 455). Distancing is thus a process used in drama therapy whereby a drama therapist intentionally incorporates techniques into the drama therapy session for the purpose of providing the client with emotional containment during his experience. Different distancing devices and techniques have different effects on different occasions, (Emunah, 1994). Individuals, for example, who are easily overwhelmed by emotion and have trouble viewing their own situations with objectivity are in need of more distance and highly emotionally invested dramatic scenes and activities may require the incorporation of more distancing techniques.

The use of distancing devices ensures that clients are protected emotionally, and as Emunah writes, even if individuals are caught up in a drama therapy experience and/or

activity, distancing allows enough detachment to respond sincerely and reflectively. They are then able to act as both a participant and an observer in their therapeutic journey.

Landy outlines numerous projective tools that a drama therapist may use in order to provide emotional distance. These tools include dolls, objects, puppets, masks, makeup, photography, video and storytelling.

A mask is a tool that may be used to aid in projecting inner feelings and different parts of the self. It brings forth images with which an individual can then begin to explore through dramatic activities such as improvisations, role plays, storytelling, and discussions within the therapeutic context. Make-up is another tool and it is used as it is directly applied to an individual's face to help project inner parts of his self and bring forth different roles, "...the role is given tangible form which can be taken on, played out, and taken off," (Landy, 1986, p. 146). Storytelling is a process that may be used when an individual projects parts of self in unconscious mind into a character he may identify with. "...as a projection and/or identification, it provides a way to balance the distance between the worlds of reality and fantasy" (Landy, 1986, p. 150).

MacKay (1987) performed an experiment to examine if face painting and storytelling could help individuals express unconscious material. After subjects wrote down some of their own roles in life during a pre-test, she asked them to paint their faces. After completing this task, MacKay then asked her subjects to examine and describe their painted faces in a mirror and tell an impromptu story. She found that "this research has so far indicated that face painting and storytelling in drama therapy can be used as a

particularly effective frame and method for allowing unexpected roles or buried aspects of the self to come to the surface and be expressed” (p. 208).

Sue Jennings, another drama therapist, follows a developmental process of drama therapy whereby her work encourages individuals’ evolution through three developmental stages of play (Cattanach, 1996). These stages include embodiment play, projective play and role play. After individuals rediscover and explore play through their senses, they then move on to projective play. This is based on how “projective play develops as the child begins to explore the world of objects and toys external to herself and symbolic play begins” (p.6). This projection stage is a crucial part of Jennings’ developmental process of drama therapy and must be explored and experienced before individuals can begin to take on roles and pretend in the next stage of role play.

Jones (1996) states that “projection involves the placing of aspects of our feelings into other people or things. Usually it is an unconscious process” (p. 129). He writes that at the heart of this process is the connection of an individual’s inner problems and outer dramatic expression. Through the use of projective dramatic vehicles such as objects, sculpts, improvisation, puppets, scripts and/or masks, an individual’s inner emotional states are projected and thus externalized into dramatic representations. They can then be expressed and explored for therapeutic benefits. Jones also clarifies that “dramatic projection in Dramatherapy can occur in a number of ways. There are aspects, which are primarily of use with regard to testing, diagnosis and assessment. Others are relevant to techniques and approaches within ongoing work” (p. 139).

Projective techniques may vary in what type of ambiguous media is used and how they are used but they may be used at any point within a drama therapy session.

Projective techniques may be used as a warm up for personal or cathartic enactments (Emunah, 1994). Emunah describes how a single drama therapy session may be divided into three main components, the warm-up, main action and closure. During a warm up section of a drama therapy session then, an individual may be asked to choose a doll, for example, which he feels he identifies with. As a main action, the individual may then tell or improvise a story about the doll or create an environment for the doll to live.

Individuals may also create their own ideal planets or visit a magic shop. Within a closing section of a drama therapy session, a projective technique may involve having an individual transform an object into something else or place something real or imaginary into a magic box.

Projective techniques may also be used with individuals or groups belonging to any client population. They also vary depending in which situation they are used and how much emotional distance is felt required by the drama therapist at the time. Projective techniques using masks for example may include having individuals make their own mask within a drama therapy session, or choose from already made masks. The creation of masks is projective in itself, as is having an individual do a body sculpt or improvisation after choosing a mask. As the individual identifies with this neutral stimulus, in this case it being a mask, internal needs and conflicts begin to come out into the open with a degree of emotional distance and the process of projection is underway.

Whether their purpose is to have an individual identify with certain characters, puppets, or objects, to bring out individuals' inner problems to experiences in an external dramatic form, or to create an emotional container within the session, projective techniques provide insightful pathways for individuals and therapists to begin to explore

individuals' inner roles, thoughts, relationships, and conflicts in conjunction with other dramatic media in their therapeutic journeys.

Projective Assessments

Projective assessments or tests are not as commonly used as projective techniques within the field of drama therapy and literature on projective assessments used within drama therapy is limited. "Assessment is that part of the therapy process concerned with understanding a client, his or her condition, and therapeutic needs" (Bruscia, 1988, p. 5). "Because most behavior is linked to the manner in which people perceive and organize the world, responses to projective tests can often predict actual behaviors, methods of thinking, and personality traits" (Johnson, 1988, p.23).

Although projective assessments may use the same form of media and processes as projective techniques, the main purposes of an assessment differ. As Johnson (1988) writes, an assessment is used in order to address clients' behavior, diagnosis, to gain information, to suggest treatment methods and to extend empirical and theoretical knowledge. Like projective techniques, ambiguous objects and stimuli are given in order to have individuals resort to internal resources and processes to respond.

Three projective assessments used with individuals within the field of drama therapy will now be described. These drama therapy projective assessments include the Diagnostic Role Playing Test (Johnson, 1988), and Puppet interviews (Irwin, 1985).

David Read Johnson's (1988) Diagnostic Role-Playing Test, which may also be referred to as DRPT, is "...a projective psychological test that utilizes improvisational role-playing" (p. 23). Individuals are given a table and eleven props and are asked to present and articulate five social roles. Individuals may also be asked to take part in a

complementary test, the DRPT-2, in which they enact a scene between three beings without the help of props.

These tests were created in order to help assess spontaneity, abilities to transcend reality, role repertoire, organization of scenes, patterns in the thematic content, attitude toward enactment, style of role playing (Johnson, 1981) as well as other developmental concepts. These projective assessments, "...can give important clues to diagnosis, personality structure, psychotherapeutic themes and issues, and responses to the dramatic medium" (Johnson, 1988, p. 26). As individuals improvise with or without the help of neutral objects, information is given to the therapist about their inner selves through the process of projection. This information can then help guide the therapist in creating hypotheses and directions for future drama therapy work.

Irwin (1985) describes a projective assessment technique and scale that uses puppets with children in order to help with their diagnosis, and treatment. It is based on play as "...imperfect and confusing as play may be, it still offers one of the best ways of learning about the psychic reality of the child, and his/her worries and wishes," (p. 389). This projective assessment includes a warm-up component, a puppet show and a post-puppet interview. Individual children are given 15-20 different puppets and are first asked to introduce the characters in their story before putting on a puppet show. An interview with the puppet characters and the child then takes place. A rating scale exists in order to help assess such things as underlying preoccupations of the child, his defence and coping mechanisms, level of creativity, themes, and nonverbal communications. Irwin stresses the importance of noting nonverbal responses as well as verbal comments during the assessment in order to gain a better view into the child's private inner world.

Some benefits of drama therapy exist because of its ability to help individuals explore their inner problems, emotions, conflicts and relationships in dramatic forms. This occurs through dramatic projection. "...Dramatic projection can be described as a process which lies at the heart of all Dramatherapy. It enables the client to project inner conflicts into dramatic material and this allows the problematic area to be connected to the healing possibilities of drama" (Jones, 1986, p. 147).

With the use of projective techniques and approaches through ongoing drama therapy work, individuals' needs that require further exploration are brought forth in a nonthreatening, unconscious manner. This provides a base for further dramatic expression. Projective assessments can be used to provide drama therapists with information in regards to their clients' inner workings. This can then be combined with other information the drama therapist has on the client from histories, and other professionals to understand their clients' along with their clients' needs and formulate treatment and therapeutic goals. Drama therapy provides a safe environment to take on this task because of the container it creates through the careful use of distancing and projective tools.

It may be suggested here that a mirror may function, like masks, puppets, and other projective objects mentioned above, as a projective tool in drama therapy. The following chapter will outline a potential projective assessment that uses a mirror with individual children within drama therapy.

Chapter 5: A Potential Mirror Projective Assessment

The following is a potential projective assessment that uses a mirror with children in individual drama therapy. This assessment will now be described, followed by an evaluation based the seven standards Bruscia (1988) set out as requirements for the effectiveness of an assessment in the arts therapies. Benefits, considerations and future directions in relation to the mirror projective assessment will also be explored.

It will be noted here that this is proposed as a potential assessment with children, solely due to my own clinical focus and experience working as a drama therapist with children aged 6-8. Its use with other client populations may also be possible but future research is required to determine how and if it applies to specific types of clients. Other future considerations and research areas related to the topic will be discussed within this component.

Mirror Projective Assessment

In a first individual drama therapy session, after a contract is set up and boundaries, roles, reasons for therapy are established and the therapeutic space is determined safe by the drama therapist, a handheld mirror is placed face down in front of the drama therapist and client. No other props are provided. Observations are made and recorded in regards to the client's non-verbal and verbal interactions with the mirror. The following questions are directed to the client. Do you know what this is? What do you see? Do you like what you see?

Observations are made in order to evaluate (1) if the child wants to and can see himself, (2) what types of behaviors and feelings are elicited by the presence of the mirror, (3) if the client likes his reflection of self if he can see it, (4) the drama therapist's

role, such as, does the client involve the drama therapist's presence when interacting with the mirror, (5) how does the client views himself, and (6) the client's ability to see more than self in the mirror. Non-verbal behavior may also help evaluation how easy it is to look at one's reflections, how long and how the client manipulated the mirror.

Through this projective test, information gathered will help the drama therapist understand the client's presenting problems, feelings about self, inner conflicts and roles within the client, and how the client views himself. This information can then be used in conjunction with other information the drama therapist has gained about the client through reports from other professionals, teachers, parents, caregivers, and through case histories and other observations. The drama therapist can then gain a better understanding of the client and his private inner world and issues in order to better formulate treatment goals.

This assessment may be useful for the way a child interacts with a mirror and his own reflection can provide information regarding the child's self-esteem and self-concept. A mirror may be an unobtrusive, ambiguous, common object that most children are familiar with, an object that possesses projective qualities to provide responses that may reveal inner processes of the child in a nonthreatening manner. "Thus, what is mirrored can include what is visible at the surface as well as what is not visible, disavowed, and even impossible. (In this usage, the mirror becomes not a reflector but a kind of magical window)" (Muller, 1985, p. 233). It also possesses unique qualities that differ from other self-image viewing tools, such as videos and photographs.

Information in regards to the client's nonverbal and verbal reactions and interactions with the mirror will be interpreted depending on the theoretical orientation of

the drama therapist. For example, a drama therapist that follows an object-relations approach may interpret the child's behaviors and responses as they relate to mirroring that occurred in the child's stages of early infancy. The interactions with the mirror may provide this drama therapist with information about the nature of mirroring between him and his mother during infancy and how that influenced his sense of self and ego development. A drama therapist that follows psychodynamic construct, on the other hand may interpret the child's interactions with the mirrors as representing unconscious drives, conflicts and desires. A drama therapist who follows Cooley's looking glass self theory may interpret a child's behaviors and comments as being related to who the child feels he is and what roles he portrays in other people's eyes.

Based on literature that has shown that a mirror helps with focusing attention towards the self and on the idea that a mirror may work as does other projective techniques by bringing out individuals' inner roles, thoughts and feelings about self, the following examples may be hypothesized. These examples also take into consideration that children, between the ages 6 to 8 years old are able to recognize their own mirror images as their own and have the abilities to project unconscious material through play. It is difficult to describe complete examples without knowing case histories and taking into considerations individual characteristics, experiences, needs of these hypothetical children. The following examples present what may possibly occur with the use of the mirror projective assessment within certain drama therapy situations.

A 7 year old child who lacks confidence, has a poor self-image, and is neglected at home may be hesitant to manipulate and look at himself in the mirror during the mirror projective assessment. He may be able to see and describe all external structures and

objects within the drama therapy space but may not be able to or may have difficulties seeing himself. He may engage with the drama therapist mainly in order to receive reinforcements that he is doing what he is supposed to be doing. These behaviors with the mirror may provide the drama therapist with information in regards to the child seeing himself as invisible, his negative feelings about himself, his need for a structured environment and constant reinforcement from others.

An 8 year old child, who has experienced inconsistent child rearing and unpredictable living and family life, may engage quickly and easily with the mirror. He may be able to give full descriptions of his face and the external surroundings of the drama therapy space. He may focus on his own image, by staring at it, talking to it and by interacting minimally with the drama therapist. These behaviors may show the drama therapist that due to the child's inconsistent and unpredictable life, he looks to the mirror for external confirmation of his own identity and strengths that he may not have yet received by significant others in his life.

Some cautions must also be noted in regards to the use of his potential assessment. It may be difficult for some to look at their own reflection and may go beyond the needs of the client. As an object it may not be appropriate, for example, for those with severe emotional difficulties, including sexual abuse and for those with extremely fragmented egos. The use of this assessment must be under the discretion of a qualified, ethical drama therapist. It may not be suited for all people in therapy and these considerations must be made before it's use. The drama therapist must always keep in mind that, "the purpose of assessment is always to help the client" (Bruscia, 1988, p. 10).

Evaluation

Bruscia (1988) writes, “To be clinically effective an assessment should: (a) have clearly defined objectives, (b) be conducted by a qualified therapist, (c) offer unique clinical advantages, (d) employ effective methods of data collection, (e) produce reliable data, (f) lead to valid conclusions, and (g) adhere to ethical standards” (p. 5). The above mirror projective assessment will be evaluated based on this set of criteria.

The assessment is based solely on descriptive objectives. “When they are descriptive, efforts are made to understand the client and his world only in reference to themselves” (Bruscia, p.5). The aim of the mirror projective assessment is not to define a client’s pathology, interpret an individual’s difficulties in terms of a specific theory, nor to provide a data base to place a client in appropriate treatment programs. Although information regarding these other areas, the method, interpretation, and goals of this assessment are related to it’s main objective, which is to find out how the client views himself through the use of a mirror.

The drama therapist who uses this assessment will be experienced and qualified not only in drama therapy and in his clinical work but will have training and supervision in the regards to using projective techniques and assessments in order to focus on his client’s needs and ensure this assessment’s effectiveness. To behave in an ethical manner, the client’s needs and rights take priority and “ethical standards also require that therapists be fully qualified both by training and experience to employ the assessment tool selected” (Bruscia, 1988, p. 10).

This projective assessment has many unique qualities. It uses a common, unobtrusive object that has not been found in much literature for its use in therapeutic

settings, and for assessment purposes. A mirror possesses many reflecting qualities that differ from any other object. The process of viewing oneself in a mirror is also unique compared to the use of other projective self-image viewing tools that are used within the field. It allows for a natural access into a client's private world and fits into the field of drama therapy as it induces a projective process to help externalize and identify hidden parts of a client in a distanced manner.

Seeing as though "drama therapy is the intentional and systematic use of drama/theatre processes to achieve psychological growth and change" (Emunah, 1994, p. 3), this assessment is appropriate in that it not only uses processes that are commonly used within drama, such as dramatic projection, but it is suited to obtain information that will aid in drama therapy treatment and process. Not only will the information gained through the use of this assessment be useful to help a drama therapist understand a client, his inner world and his presenting problems in relation to himself, and help formulate treatment goals, this method of assessment also fits into the drama therapy setting. In individual work, this assessment uses a projective prop, it involves active participation from the client and it also helps begin to form a relationship between client and therapist.

This projective assessment's reliability and validity, however, may be in question for the main reason that it is a new potential technique and future research and insight into its use and effectiveness are required. It is difficult to say whether data provided from the assessment is accurate and not related to chance as it is difficult to determine whether this particular assessment gives adequate responses and organized information about the client without testing it with individuals. Further work in relation to this topic is required to help determine this mirror projective assessment's reliability and validity.

Overall, according to Bruscia's (1988) standards, this projective assessment does have potential use, as long as a qualified, ethical drama therapist uses it with his clients and future work is done in order to determine its reliability and validity. It sets out to understand a client from his own perspective, and it is unique and appropriate to the field.

Other Potential Uses of a Mirror in Drama Therapy

If this mirror test is not deemed appropriate as a projective assessment, it may have other uses within drama therapy. It may be a useful projective tool. Drama therapists may use it with their clients as a projective technique. For example, as Cattanach (1996) describes, clients can first look at their faces in a mirror and then can draw a picture of what they saw or write a letter to their face. In addition, interactions with the mirror may also be useful as projective warm-ups, after which clients can be guided to do body sculptures, create characters and stories, or work with make-up or masks. This allows for the embodiment and dramatic exploration of their projections made through the use of the mirror. It may also be available as a prop throughout on-going therapy sessions, with which a client may interact depending on his needs and wants. A mirror may also be brought forth in the same manner as the projective assessment described near the end of drama therapy work as a source of evaluation of how and if the client views himself differently after the drama therapy process.

Future Directions

Since the topic is relatively new to the field of drama therapy and much more information is required in order for the efficient use of a mirror as a projective assessment tool, future research may include various topic areas. An exploration of how a mirror may be used in group drama therapy, and how mirrors can and should be used with

different client populations are two future areas of interest. One may have a more in-depth look at how to interpret one's behaviors in front of a mirror based on different theories and constructs. One may also devise standardized measures to be able to examine and record behaviors and interactions with a mirror. Research needs to be conducted with clients in order to determine the reliability and validity of a mirror's use as a projective tool and/or assessment as well. Further work within this area will help not only add more research and other innovative techniques to drama therapy but will also enhance the expansion and development of the field.

Conclusion

Mirrors are prevalent in our society. They are objects that are sometimes overlooked because of their commonality and frequent use. People look to mirrors to provide themselves with a tangible reflection of who they are. They provide external representations just as, at the same time, they engage internal psychological processes regarding feelings about the self and other hidden conflicts, desires and relationships with the outside world. Many ancient myths, customs and children's stories address how looking at one's reflection may enable these inner processes.

Research in the field of psychology has provided us with some empirical data as many in the field have used mirrors to examine psychological processes. With this literature, we now know that mirrors have an impact on self-focused attention and that children by the age of 20 months, can view their own reflection and identify it as their own (Priel, 1985). Children that suffer with developmental difficulties can also view their own images in a mirror no later than 5 years old (Newman & Hill, 1978, and Spiker & Ricks, 1984), not dependent on previous exposure to mirrors. Through more in-depth self-recognition studies, it has also been found that "...affective reactions to one's mirror image are seen as a reflection of the child's feelings about the self..." (Schneider-Rosen, & Cicchetti, 1986, p. 476).

Literature is limited on how mirrors are used for therapeutic benefits in psychology and drama therapy. Some uses have already been described, including some uses of mirrors within additional therapeutic milieus. Most examples found give descriptions of how clients may use and interact with mirrors in therapy, however, they

do not explore how these interactions may be important to therapists to gain information about their clients.

One important process that lies within the core of drama therapy is projection. In drama therapy, as individuals are given opportunities to identify with neutral objects and stimuli, they are able to externalize into dramatic explorations into an emotionally safe space in aim to change and grow psychologically.

Projection may occur in drama therapy through the use of projective techniques and projective tools, including video and photographs that involve a client facing his own image. Projective assessments, although limited, also exist within the field of drama therapy to assist drama therapists gain information about their clients and their clients' inner worlds.

Mirrors, with their magical surfaces, possess many qualities that are unique and may prove to be beneficial if used in a drama therapy setting. The projective mirror assessment that was described to be used in a safe drama therapy environment, may provide useful information while taking into considerations a client's needs.

Considerations must be made before using this tool and further research and clinical work is required before fully assessing its reliability and validity when used as a projective assessment with different client populations. There are however other possible uses of a mirror as a projective tool in drama therapy. Its unique characteristics, for the reflective window it provides, makes it a beneficial tool to be used and explored further within the field of drama therapy.

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