# THE NEVER-ENDING STORY: A DRAMA THERAPIST'S QUEST TOWARDS CULTURAL HUMILITY

## AIRIN FINKELSTEIN

A Research Paper in The Department Of Creative Arts Therapies

Presented in Partial Fulfillment of the Requirements for the Degree of Master of Arts Concordia

University Tiohtià:ke/Montréal, Quebec, Canada

APRIL 2021

©Airin Finkelstein 2021

## **CONCORDIA UNIVERSITY**

School of Graduate Studies

This is to certify that the thesis prepared

By: Airin Finkelstein

Entitled: The Never-Ending Story: A Drama Therapist's Quest Towards Cultural Humility

and submitted in partial fulfilment of the requirements for the degree of

## Master of Arts (Creative Arts Therapies; Drama Therapy Option)

complies with the regulations of the University and meets the accepted standards with respect to originality and quality as approved by the research advisor.

Research Advisor: Simon Driver, MA, RDT, LTA

Lecture Department Chair: Guylaine Vaillancourt, Ph.D. MTA.

April 2021

## Abstract

In this heuristic inquiry I, Airin Finkelstein, ask myself: How can self-inquiry around culture and social locators help to enhance cultural humility in drama therapists? The proceeding journey brings me into relationship with my social locators and I am afforded a non-linear and healing discovery process. Join me on my journey within!

#### Acknowledgements

I want to thank my friends and family for growing with me and caring for me. I want to thank the friends in my life who orient themselves towards growth and healing; the holding you have brought into my world has been made me more peaceful and integrated.

I want to thank my teachers in the Drama Therapy program at Concordia, as well as my cohort, for being my co-learners and teachers.

I want to thank the clients I worked with while in the program for being such generous co-learners and teachers.

I would like to thank Simon Driver, my research supervisor, for his humor, earnest listening, and willingness to learn and grow with me. And for being a kind man!

I would like to thank my ancestors for welcoming me into their story.

I would like to thank the tension between Entropy and Negentropy for the ability to exist at the crossroads of space and time, for the wild phenomenon of consciousness, and for allowing me a brief glimpse into what it's like to have an identity and opinions. It is so strange. Look Void, I wrote an essay, with my very own shiny experiences and opinions!

Introduction	1
Literature Review	4
What is Cultural Humility?	4
Culture	5
White Supremacy and Fragility	6
Creative Arts Therapies and Cultural Humility	6
The Work of The Therapist	8
Prospective Capacities Gained From this Work	9
Self-Awareness	9
Therapeutic Presence	9
The Therapeutic Relationship	9
Theoretical Models Informed by Cultural Humility	10
Theoretical Models that Arose During the Research	11
Methodology	13
Research Design	13
Initial Engagement	15
Immersion	16
Incubation	16
Illumination	17
Explication	17
Creative Synthesis	17
Findings	18
Findings During the Immersion Phase	
Jewish Identity	18
Queerness	20
Physical and Mental Illness	23
Therapist/Healer	24
Findings During the Illumination Phase	25

## **Table of Contents**

Braiding and Bridging Parts	25
Being my Own Ally	26
Explication Phase: Results and Discussion	27
Recommendations	29
Conclusion	29
References	31
Appendix	34

#### Introduction

When I decided to apply to the Drama Therapy program at Concordia, I was at what seemed to be another challenging crossroad in a series of challenging crossroads in my life. In 2017 I experienced a medically induced manic episode that left me grappling at relational extremes, without the capacities to ground into relationship with myself. I felt at times both hyper proximal, reliant and desperate, and at times dissociately distant, ungrounded in who "I" was. This was not the first period of intra and interpersonal instability in my life, and though the medication I was on spurred me into the mania, I do not think my propensity for relational grappling can be understood out of context.

When I was around 7 I was diagnosed with ADHD, when I was around 9 I was diagnosed with Type 1 Diabetes, when I was 14 I was diagnosed with Social Anxiety and Depression, when I was 15 I was diagnosed with Chron's Disease, when I was 23 I was diagnosed with Bipolar 2. And it goes on, different diagnoses pertaining to my mental health came and went in between these, some seeming more stable, and others seeming more or less pertinent depending on what was happening in my life, in my mind, and in my body. My physical health fluctuated through my teen years, coming to some kind of culmination at 18 when I got a bowel resection.

To look at me, you might not know I struggle with these things. I am playful and able to respond with creativity and connectivity in many social contexts, one of the benefits of being ADHD. If I tuck my pump into my back pocket my body looks like it's correctly packed, full of tubes and fluids that squeeze and un-squeeze, secrete and excrete, with best practices and customer satisfaction in mind. I am not opposed to public nudity but, as it is not in vogue, only those close to me can see the evidence that something dying was cut out of my middle when I was very young.

I am not particularly unique in my family; Each member of my home of origin has a complex relationship to physical health, mental health, or both (which makes sense because they are inextricable!). From one isolated vantage point it seems that we are quite unlucky, no? from another, the chosen people! Victims to circumstance and uniquely challenged. And I've swung between these two extremes, feeling both chosen and particularly terrible, in overt and covert ways, most of my life. From another vantage point, one that feels is grounded in conscious discernment and nonjudgmental empathy, I come to see that I am not so much a victim of circumstances as I am attuned to them.

To look at me, you might not know I struggle with these things, because to know only *my* life, isolated from the world that contextualizes me, is to be in a narrow and narcissistic relationship with what it is to know someone. You will hear me repeat, as a kind of grounding through-line in this paper, wisdom offered by Resmaa Menakem: "Trauma decontextualized in a person looks like personality. Trauma decontextualized in a family looks like family traits. Trauma in a people looks like culture" (Tippett, 2003-present).

The settling inhale this quote initiates in me brings me down into my gut, helps me feel my spine and my range of movement; helps me orients, in a new direction, and compels me to see myself and others as contextualized by, sometimes held by and sometimes held down by, the nuances of embodied history, inherited narratives and present-day culture. When I see myself as a separate being, uniquely challenged by the world, picked on, asked of, I am trapped within the circumstances of my life. When inhale my gaze up from my navel and see outwards, maybe around, maybe behind, I look at the world holding me, layers upon layers of it. Yes, even the terribly weighty things will be shouldered by the benevolent ambivalence of nuanced lineage, multi-lingual history. I make sense, I am not wayward and my body and brain, their tensions between capacitated integration and surrendering deterioration, might actually demonstrate my attunement, rather than dissociation from this, life. Because there is trauma in my lineage. And trauma is passed, it is not a surprise that it lives in my body. It has arrived in my life, in big ways, in ways that I cannot deny. I feel I am being asked to examine what has been passed through my family line, to not demonize it but to acknowledge the embodied and interpersonal pain that has come from being Jewish, from an oppressed people, and from having members of my family line directly exposed to some of the traumas unique to Jewish experiences across the diaspora.

So how does this conviction, to understanding myself and the story of my lineage as a culturally scaffolded being, bear on this research and on my work as a therapist? Well, if we look at the culture of North America right now, of Canada, in 2021, in the wake of the death of George Floyd, in Covid's third but not final wave, it is clear that there are many through-lines of pain and oppression in how we are taught to be with and relate to one another. We live inside of Capitalism and Colonialism, systems that function off our disconnection from ourselves and others and prioritize our ability to function at a high level of production despite this disconnection. This disconnection and scarcity of resources, both internal and external, thrives

off of white supremacy and violence against Black people, Indigenous people, and People of Colour (POC) and Culture.

As healers, we are not just working with isolated stories inside of rental rooms, we are working with people who live inside of this world, this culture, and as I demonstrated above within my own story, I believe that what we experience inside of our lives must be allowed to be tied back into our experiences as interrelated social bodies. If I was not allowed to understand myself as a sensible product of all the things that came before me, I would be mired in narcissistic, existential confusion and dread-why is my body like this? Why is my brain like this? Why does my family relate in this way? Me me me, my my my. But I am not condemned to do this because my life is not just mine. The acknowledgement of our relationships makes us make sense, makes our stories real and multi-dimensional, with enough space in the layers to hold all of the nuance that is incompatible with white supremacy and oppression, with the idea that only one way of being makes sense, that there is some kind of perfect and it hates difference.

This research serves a two-folded purpose for me. I wanted to have the opportunity to really sit with some of my cultural intersections, to help me ground myself in both my embodied experience of them, as well as how I relate within them in a cultural sense, so I could better relate to all my clients as people ingrained in culture. This is especially necessary for working with other people whose struggles are inextricably tied to the ways in which culture, under the systems touched on in the previous paragraph, has historically, and at this very moment continues to, oppress.

I will now locate myself for the purposes of this research. Of course, we all have multiple locations of both privilege and oppression (often each point contains a unique interplay of both these things). In the context of this paper, I investigate and report to you the parts of me that have experienced the most oppression, and the understanding of which would not only be healing to me as a therapist, but I feel would also allow me to help be with others through similar journeys.

My name is Airin Finkelstein (If you're my friend at the time I am writing and submitting this paper you probably call me Wry), and I am a Trans, Jewish, Chronically Ill/Disabled person living in Tiohtia:ké. Through my access to schooling, I have been able to train as a drama therapist and hope to become a healer. My family came to Canada as settlers looking for refuge from violence. I am a child of diaspora, as my Jewish lineages trace through Europe and the Middle East.

My research supervisor, Simon Driver, was a sounding board, container, and collaborator in this process and so I feel it is important to share how he identifies: "I am a white straight cisgender male whose consideration of his own intersectionality is revealing important information about the cultural passageways he must cross as an instructor and helper" (S. Driver, personal communication, April 20, 2021).

#### **Literature Review**

In this literature review I will be synthesizing current knowledge from the fields of Therapy, Drama Therapy, Social work, Education, and Political Theory to address the following question: How can self-inquiry around culture and social locators help to enhance cultural humility in drama therapists? I will also be keeping in mind subsidiary questions: how can what I find through this review, as well as through the following research, contribute to the ways drama therapists are guided through the building of a relationship to their cultural identity. What capacities can be gained from these explorations, and how can these capacities be used to help others heal?

#### What is Cultural Humility?

Cultural humility was "developed by Dr. Melanie Tervalon and Dr. Jan Murray-Garcia and was "initially intended to address issues found in dynamics between medical professionals and patients" (Bodlovic & Jackson, 2018, p. 2). They created this competency so healing practitioners would be able to pursue a mutually respectful partnership, where both members of the therapeutic dynamic are not only recognized as their more obvious roles (ex. "therapist" and "client"), but also seen as multi-dimensional humans inside the therapy space. It is the responsibility of the healer in the dynamic to ground themselves in understanding around their own cultural identity and the relevant cultural identities of the client (Tervalon & Murray-Garcia, 1998).

Cultural humility is not a goal that can be reached or a title that can be earned. Taking it on is committing oneself to lifelong learning and self-inquiry; this inquiry centers "not knowing" as a strength because it creates infinite learning, and therefore growing, opportunities (Bodlovic & Jackson, 2018; Patallo, 2019; Tervalon & Murray- Garcia, 1998). The benefits of this were further explicated by Zerbe Enns, Bryant-Davis and Comas Díaz:

"Cultural humility is informed by self-reflection, flexibility, patience with ourselves and others, tolerance for ambiguity, empathy, and awareness of power dynamics. It requires regular exploration of our co-existent points of privilege and marginalization, as well as how our points of view can be affected by implicit, nonconscious biases that may resist change" (2021, p. 213).

Bodlovic and Jackson identified four tenants of cultural humility, to help orient therapists towards a practical enactment of it, they are:

"1) lifelong learning and critical self-reflection; 2) recognizing and challenging power imbalances for respectful partnerships; 3) developing mutually beneficial and nonpaternalistic clinical and advocacy partnerships with communities on behalf of individuals and defined populations" (2018, p. 3) and "the need for institutional critique" (2018, p. 4).

In 2016 the North American Drama Therapy (NADTA) board, published a report "outlining a rationale and six guidelines pertaining to the promotion of culturally responsible practice" (Sajnani et al., 2016, p. 141). Within this outline the authors defined cultural humility similarly to the practitioners above; as a process that spans a lifetime, as it is not a fixed point, but a mindset and embodiment of continual curiosity and integration around self-evaluation and therapist-client power dynamics (Sajnani et al., 2016).

## Culture

To be able to connect with this research, it is important to have an understanding of what is meant when I say culture. In the broadest, most sociological terms, culture can be `identified as "all of the learned behaviors, beliefs, norms, and values that are held by a group of people" (Hayes, 1196, p. 334). Culture is deeply intertwined with history, as it is passed on from older members of a group to newer members, and, in this passing on, the ways that groups see and interact with the world are sustained (Hayes, 1996; Menakem, 2017). This is not only done through conscious practices like the making of traditional foods, but it also integrates into our subconscious through the ways in which we pass down traditional actions, informing how we fundamentally perceive the world. A personal example of this melding is the seder (a ritual meal)

every shabbat (Saturday, the day of rest for religious Jews). The ritual meal doesn't only include food but also stories that contain certain values. There is a literal and metaphoric ingestion of culture in this practice. Thus, culture allows us a sense of location and belonging, tying together not only conscious ways of being but also subconscious ways of being (Menakem, 2017).

#### White Supremacy and Fragility

Despite there being an evident scaffolding that comes from the experience of culture, as mentioned above, there are many aspects of what it is like to be within culture, here in Canada, on colonized land, that do not create a sense of belonging. North American culture is suffused with white supremacy: the belief that people with white skin are the norm of humanity and therefore, deserve to be at the top of the societal hierarchy (DiAngelo, 2011; Menakem, 2017). White supremacy is more complex than just skin color, however. As Tufekcioglu and Muran (2015) explain: "Take, for example, the case of a European immigrant to this country, who possesses the apparent privilege of being White, but with the hidden experience of alienation" (p. 34). But on the whole, the reality of privilege related to skin color must be acknowledged when thinking about ethical therapeutic practice. After all, the field of therapy itself has been established within societies that function in a system of white supremacy (DiAngelo, 2011; Menakem, 2017; Hayes, 1996). White fragility, a state defined by and made famous by DiAngelo, is a state of racial comfort purportedly held by white people or people with proximity to whiteness and its privileges. When someone embodies white fragility, they lack the tools to deal with the realities of racial injustice are not cultivated and therefore the stress of this reality is intolerable (2011).

Since we are operating in a system that has been built by white people, it is fair to assume that this ignorance is integrated within the lineage of therapy. This fragility, and the associated lack of competencies and tools, can also be assumed to be lacking in therapeutic practice and training.

#### **Creative Arts Therapies and Cultural Humility**

The above section makes it clear that the therapist must take on the task of relating to culture on their own terms, with a discerning eye and heart, and with the recognition that they may have to address some internalized white supremacy. As a creative arts therapist (CATS) I looked towards my community to see how others addressed this necessary task.

Doing research on how to bolster cultural humility is necessary for any healer because of the self-awareness engendered by the process of relating to cultural humility; "self-awareness and multicultural competence are essential for a therapist's personal development and for the quality of care offered to clients...Therapists are in fact required to develop and maintain self-awareness through their mandated professional codes of ethics" (Bell, 2018, p. 59). Drama therapists, as healers who draw "on anthropology and upon stories, rituals and artefacts from a diversity of cultures and from history", arguably have a greater imperative towards a culturally humble practice as we explicitly work with culture (Carr & Andersen, 2012, p. 93). Therefore, the pursuit of cultural humility might create a safer container for the use of these tools as "increased cross-cultural awareness could, perhaps, help...clarify any distortions" around culture made by the therapist (Carr & Andersen, 2012, p. 93).

Many CATS in the research I engaged with have come to their knowledge about cultural humility through two experiential avenues: 1) personal self-inquiry around culture, power dynamics, and their own history, and 2) through their experiences of feeling cultural vulnerability as clients in therapy.

Min, a Burmese and British drama therapist, explored how their life as someone with a complex multi-cultural experience affected their therapeutic practice. They recognized the importance of addressing the intricacies of one's own cultural experiences and noted how these experiences can affect the perspective the healer is bringing into the therapy space. They focused on the idea that we have to consciously go into our own stories, and the stories of our ancestors, and work out how we are going to relate with a sense of agency to passed along trauma (2009). This process allows the recognition of associated strengths and knowledges that come from being alive and connecting with oneself and others despite hardship (2009). They found that knowledge provided by our cultural experiences and our lineages that we were not consciously aware of can arise, and this can enhance our practice (2009). Bell and Camilleri, two music therapists who both engaged in research self-inquiries around their identities and cultural humility in their practices, found that engaging in this work made them more connected to their artistic practice, which generatively integrated into their therapeutic practices (2018; 2001).

A value upheld by some CATS that orient their practice towards cultural humility is a grounded transparency in the client-therapist dynamic. Christey-Casson, a gay drama therapist, felt betrayed when he found out the therapist he was working with from an LGBT organization

was not, in fact, a member of the LGBT community. The unspoken understanding that the therapist belonged to Christey-Casson's community made him feel safe to disclose things that he may not have otherwise (2018, p. 181). The absence of the therapist awareness of the implicit power dynamic between a cisgender heterosexual therapist and a queer client demonstrated a lack of cultural humility, and the resulting feelings of betrayal are one example of how clients could experience cultural trauma, rather than healing, in therapy.

#### The Work of The Therapist

As outlined above, it is clear that a therapist must intentionally work on their relationship to their cultural identity, and the ways in which they relate to clients across cultural differences. Many theorists stress the importance of the therapist's self-awareness, in terms of their biases, values, perspectives, and privileges, in the practice of culturally humble therapy (Bell, 2018; Hayes, 1996; Yan & Wong, 2005). The process of actively searching out specific information around a client's cultural identifiers is cited as an important aspect of practicing cross-culturally (Patallo, 2019; Yan & Wong, 2005). A necessary appendage to this search is to critically reflect on the information received and any subsequent biases, since looking for culture-specific information on a client can also lead to stereotyping (Patallo, 2019). Min stresses the importance of excavating one's own personal history and any cultural traumas that one's ancestors may have endured, to avoid re-enacting these traumas in our personal lives or experiencing them unwittingly in the therapy space (2009). Bruck notes that historical self-inquiry can arise from thinking about a client's cultural perspective (2009). In reflecting on a client's cultural milieu and their ancestral history, the therapist may be opened to thinking about themselves with a similar curiosity (Bruck, 2009) Menakem stresses the importance of this self-discovery for not only those who have experienced legacies of oppression, but for those with colonizing histories as well; "when a body observes the willful harming of another- especially if it inflicts that harmit may experience its own secondary or vicarious trauma...the horror was stored as trauma in their bodies" (Menakem, 2017, p. 102-103). This underlines the fact that cultural healing is necessary for all, even those who live at privileged intersections, because living in a society with such disparity of privilege and oppression is dissociative and dehumanizing on a grand scale. Bell recommends that therapists who are working towards cultural humility through the processing of their cultural identities should do so together, as a community (2018). This is

especially important in times of transformation as working with others provides witnesses and mirrors for the therapist; this can help someone better understand who they are and who they are becoming (Bell, 2018, p. 71).

#### **Prospective Capacities Gained from This Work**

#### Self-Awareness

In addition to Bodlovic and Jackson (2018), many other theorists have placed selfawareness at the center of the Venn diagram between cultural humility and ethical therapeutic practice. In theory ethical therapeutic practice is inherently culturally humble as defining one's own perspective, the differences between self and other in the therapy space, and the dynamics within these differences, is necessary within all therapeutic relationships whether there are cultural similarities or differences (Carr & Anderson 2012; Tufekcioglu, & Muran, 2015). Being aware of one's own background is essential for the management of countertransference (Williams & Fauth, 2005). However, since, white supremacy tends to be infused within our culture, the awareness of countertransference is *informed by* things like white supremacy, and general cultural biases can come to pass if not explicitly explored by the therapist.

#### Therapeutic Presence

A therapeutic factor that arises from the self-attunement gained from knowing oneself deeply is Therapeutic Presence. This is "the process and experience of bringing oneself completely to the encounter with the client". This has been linked to 'empathy, congruence, and unconditional positive regard" (Romanelli, Tishby & Morgan, 2017, p. 18-19). Knight brings up the ideas of canonical theorists Shulman (2008) and Rogers (1961), who highlighted genuineness and transparency, qualities that arise from a solid sense of self, as important elements of the therapeutic alliance that encourage client transformation (2012, p. 2).

#### The Therapeutic Relationship

Based on the presented research so far, it seems clear that once a therapist begins to understand themselves as a cultural being, they gain new competencies and experience less fragility. But feeling grounded in oneself as a cultural being is only one part of being a culturally humble therapist. Yan & Wong assert that the next step is inviting dialogue with the client:

*"intersubjective reflection* is a dialogic process in which both worker and client interactively negotiate, understand, and reflect on their own cultures with reference to their understanding of the problem presented by the client" (2005, p. 186). The conscious inclusion of the client's perspective is essential as "findings suggest that most ethnic minority clients report experiencing at least one microaggression from their therapist" (Patallo, 2019, p. 230).

This feedback is invaluable in the assessment of what needs to change in therapeutic practice. It is important for the *therapist* to recognize these ruptures and to highlight them for both themselves and the client (Tufekcioglu & Muran, 2015, p. 472). It is important for therapists to not only meditate on the client's connection to their culture, but to directly interact with clients around this topic and to see if culture and ethnicity are important locators for the client's lived reality and avoid microaggressions that happen within stereotyping (Owen et al., 2014; Patallo, 2019; Hayes, 1996). If a therapist is not aware of how this inquiry is affecting their own perspective and does not humanize their knowledge by connecting respectfully and humbly with a client, they may inadvertently adopt a stereotyping mindset (Patallo, 2019). Owen et al. found in their research that there was a positive overlap between a "clients perceptions of a therapists multi-cultural competencies" and their assessment of a therapists overall abilities (2014, p. 96).

Self-disclosure of the therapist's perspective is viewed by feminist and multicultural perspectives as a way to validate the client's experiences and to create equality within the client therapist relationship (Knight, 2012). Knight asserts that disclosing personal demographic information to the client is a part of the informed consent process of therapy (2012). It has been found that engaging in this process helps clients to feel more engaged in the therapy (Knight, 2012). Self-disclosure and the acknowledgment of what the client deserves to know, as a standard of respect and equality, can extend into the client's life and begin to heal interpersonal experiences (Tufekcioglu & Muran, 2015). It is important, then, for a therapist to engage in their own cultural self-inquiry as a baseline, and to know their own story.

#### **Theoretical Models Informed by Cultural Humility**

Below are some models of therapy I touched in on when trying to prepare myself to engage with cultural humility.

The awareness of a general lack of competency when it comes to not only race but the nuances of cultural oppression in general, orient me towards a search for models that can help me come to a more resourced practice. I hope to relate to the constructs of oppression, rather than being mindlessly intrenched in them. Owen et al. cite the Cultural Humility Scale (CHS) as a tool that can be given to clients to assess the humility of their counselor, thus empowering the client's perspective and its place within the therapist's self-reflection and evaluation (2014, p. 93). Fort identifies two models that relate to a culturally humble therapeutic practice: Intersectionality Theory and Intersubjective Systems Theory (IST) (2018, p. 117). Intersectionality Theory calls for the acknowledgement of all the factors that shape a person, for example I am a chronically ill/disabled, queer and Jewish person. These identities do not exist in a vacuum and Intersectionality theory underlines how interconnected these factors are (Fort, 2018, p. 117). IST is a model that focuses on how experiences in therapy effect both the client and the therapist. It stresses that contextual cultural factors must be taken into account to understand these experiences. Fort recognizes the importance of tracking how this process shapes the therapeutic relationship (2018, p. 117). Finally, the trans-cultural-specific perspective focuses on cultivating "culture-specific expertise" when working with minority cultures, as they are highly neglected in "research and education" (Hayes, 1996, p. 334). Hayes (1996) proposed the ADDRESSING model as a framework to help trainees assess their biases and areas of inexperience based on the social locators that each letter in ADDRESSING represents: Age, Disability (congenital and acquired), Religion, Ethnicity, Sexuality, Social status, Indigenous heritage, National origin and Gender (identity and expression) (p. 335). This model also argues that belonging to one social locator does not bar someone from belonging to another. Even though a person might be in an oppressed position in one sense, they may be in a very privileged position in another (Hayes, 1996).

#### **Theoretical Models That Arose During the Research**

While I was in actively engaging in the steps laid out in the next section, I came into relationship with two additional therapeutic orientations that allowed me a deeper understanding of what was going on in my journey. These orientations were Internal Family Systems (IFS) as seen through the lens of Jay Earley, and the drama therapeutic orientation of Role Theory, as outlined by Robert Landy. They both offered me new perspectives on how my cultural

intersections might live in me, and how I might heal my relationship with these intersections. This healing would allow deeper understanding and integration, and therefore a more grounded relationship to cultural humility.

Within the scope of IFS, human beings are seen as complex systems of parts-we have 'inner families' that include parts of ourselves at varying ages with varying needs (Earley & Shwartz, 2009). Each of these parts are seen as having good intentions, as they are all trying to maintain a safe environment for the whole, but some parts may be stuck at ages that are too young to fully take in and mitigate the world (Earley & Shwartz, 2009). The young parts that have been wounded or that have unmet needs are often "exiled" and suppressed by protective parts. These protective parts are trying to keep it so the whole self will not get too distressed (Earley & Shwartz, 2009). But when something in the present happens that triggers the negative beliefs about the self and the world that the exiled parts might have, these thoughts and feelings can come to the surface (Earley & Shwartz, 2009). Suddenly one's capacity to relate to the world and to interact with it from a grounded place becomes compromised, as they are in many ways a child. This makes me think about white fragility. How young this part in certain people must be if it can not take even a tiny bit of cultural distress.

This understanding was useful to my work. It helped me see the importance of giving each of my oppressed intersections a week to themselves during my heuristic inquiry. It felt as though I was giving parts of myself that had been exiled space to relate to me, without other complicated relationships with other oppressed parts making things harder to understand.

Role theory, as described by Robert Landy, has similar perspectives about the makeup of the human psyche. Human personalities are seen as a nuanced relationship of roles, each containing its own "discrete patterns of behaviour that suggest a particular way of thinking, feeling, or acting" (Johnson et al., 2009, p. 67). Landy identified that the primary task in drama therapy from a role perspective is to help clients identify and access the role or roles in their life that are "either unavailable, poorly developed or inappropriately aligned with other roles or other people in their roles" (Johnson et al., 2009, p. 68). A main healing goal when therapy is conducted from the perspective of role theory is to help the client live with "ambivalence, contradictory tendencies and paradoxes"; a person who gives up relating to their multiple and complex ways of being and who instead settles on one or a few fixed ways of relating to the world is considered unhealthy (Johnson et al., 2009, p. 73).

The acceptance of the complexity of what it is to be human, and the conceptualising of this balancing as an essential part of health, helped me to integrate and understand the complexity of all my intersections, especially as they started to overlap and integrate in the final phases of my research.

Both these outlooks also have an observer role. ISF has the "Self", a mature and scaffolded part of the whole that is able to hold the realities of other parts; this part can change but in its essence it is more stably tied to certain core beliefs like "we can do this", "we are worthy of love", "I am here for you" (Earley & Schwartz, 2009). Role theory has the "guide" part of the self, which helps oppositional parts of the self speak with each other, and who has the main goals of integration and integrity in helping all the roles in the self find their way and be heard (Johnson et al., 2009).

These two iterations of the observant, equity minded and attuning part of the self-helped orient me within my roles as both the researcher and the researched. It helped me to go about this with the intention of being kind to the parts of me that were exposing themselves, and to stave off being too analytical or asking for clear results from myself until the final stages of the heuristic process.

## Methodology

#### **Research Design**

In its essence the nature of my inquiry is about finding a deep and grounded way of relating to myself as a healer, so I can relate to others in a deep and grounded way, across differences and on terms that are mutually agreed upon. I needed to find a research design that had the tools and allowances for me to make such a personal and non-linear journey.

Clark Moustakas developed heuristic inquiry from a similar place; he needed a system that was nuanced enough to allow multiple intelligences to be validated as "scientific". First, he used himself as the primary source of knowledge around the experience of loneliness. He used a 6-phase framework for connecting with himself in this pursuit. The phases are not necessarily meant to be followed in a linear order, though I did do so with some overlap. The phases are; 1. Initial Engagement, 2. Immersion, 3. Incubation, 4. Illumination, 5. Explication, 6. Creative Synthesis (Moustakas, 1990).

Three elemental tools of this research design that allowed me to feel valid in my ways of

knowing and interacting with knowledge are Self-Dialogue, Tacit Knowing, and Indwelling (Moustakas, 1990). I spent a lot of time in these ways of knowing, and these qualitative forms of connecting to knowledge allowed me to validate many ways of being as relevant to the research, rather than just the moments when I was writing something down or collecting evident pieces of "data".

The concept of Self-Dialogue is very amenable to the reality of exploring the multiple intersections of a person as it allows whatever is being researched "to speak directly to one's own experience...In this way one is able to encounter and examine it, to engage in a rhythmic flow with it-back and forth, again and again-until one has uncovered its multiple meanings" (Moustakes, 1990, pp. 2). This aligns with the multiple overlapping theoretical and felt views I have of my intersections. From one understanding they are seen as social locators, from another they can be seen as parts, and from another as roles. The allowance for knowledge to come from dialoguing with each locator/part/role as a separate researcher self, and then allowing these parts to come together in layered understanding gives me space in this research and eases the anxiety around the expectation that I will come out of this with a clear and simple answer. The researcher, writing this, is just one location/part/role, and I can make academic meaning from all the parts explicitly involved in this research to an extent. But they are also separate from this venture, and are speaking to it from their own autonomy, they are not here to be mined for knowledge, but asked for teachings in relationship. What has ended up in this paper is certainly not all I discovered or felt, but it is the middle ground between my desire to create something definitive in a research setting, and the desires of these intersections to still be figuring things out, to have things still grumbling in the realm of Tacit Knowing.

Moustakas identifies tacit knowing as the "base of heuristic discovery" (Moustakas, 1990, pp. 6). Tacit knowledge, in my understanding and implementation of it, is the allowance of many types of knowledge to collect together and to give a sense of knowing without having to clamp down on a certain definitive way that this knowledge was come to. This kind of "knowledge is possible through a tacit capacity that allows one to sense the unity or wholeness of something from an understanding of the individual qualities or parts" (Moustakas, 1990, pp. 6). It allows for both the evident facts that are seemingly solid to contribute to how something is understood while also leaving space for felt and intuited ways of knowing to be present. An example of this is how I know I am Jewish. On the one hand there are the obvious knowledge of

my lineage that earns me the inclusion in this group. But there are also cultural and ethnic felt senses, inherited ways of being in my body and in the cultural stories I have been told that conglomerate to bring me to a sense of Jewishness; not just a sense but my own unique sense that comes from the allowance for the things that I can put into words and the things that are ineffable but present. I deeply valued the allowance for tacit knowing in this venture.

Indwelling is the final concept that I felt particularly drawn to from the tools offered by heuristic research. It is the "process of turning inward to seek a deeper, more extended comprehension of the nature or meaning of a quality or theme of human experience" (Moustakas, 1990, pp. 8). This process allowed space for the ways that I report my findings later on in this paper, which I do at times through the quoting of stream of consciousness journaling and the subsequent excavating of these expressions for their knowledge.

#### 1. Initial Engagement

In this stage the research question is found through passionate interest in a topic and selfdialogue around the personal and cultural significance of this topic (Moustakas, 1990). I began my engagement with my research question early on in the program. My physical and mental illnesses, my Jewishness, and queerness, are realities that all have a nuanced relationship to privilege and oppression within the world. My experiences as a person living at these crossroads, and the nuances of privilege and oppression therein, made it so I was already contending with what it means to try and live in an ethical and connected way in this society before I started the program.

At the formal start of the initial engagement in this project I identified the intersections that I was going to focus on within the scope of the project as the ones mentioned above, with one final addendum: the role of the therapist/ healer. It felt important to address this new reality that I was formally stepping into in my life, through both eventual acquisition of the title of "Drama Therapist" and through internal intentions of pursuing a healing role in this world. I wanted to ensure that my understandings and knowledges gained from these three other deeply complex parts of me would be integrated into this burgeoning new role.

I noticed that the people I most wanted to work with were people that were marginalized in our society. While in the program I worked with autistic adults and adults with Down's Syndrome as well as Urban Indigenous folks aged 3-30. When I imagine who I will be working

with in the future I often see myself working in community spaces and across difference. The knowledge that I am implicitly drawn to working across difference and often with people who have marginalized experiences made it so questions around ethical and connected practice came up in this realm.

Since I was finding myself coming to questions about identity, power, and privilege in relationship to myself as a therapist, and I was also feeling drawn to working with people where the reality of power and privilege are evidently in play, it seemed like coming to research around cultural humility would be a grounded way of acknowledging and tying together what life was asking of me. This is how I came to my research question.

#### 2. Immersion

During this stage the researcher is fully immersed in their research question (Moustakas, 1990). I decided that each aforementioned intersection would have a separate week, where I would focus on them individually and then in the incubation period, they could start to reintegrate and inform each other.

My hope was that in giving each intersection space to be complex and for my feeling and ideas about that intersection to have breathing room, this would allow greater acceptance of how I specifically fit within that intersection and a greater understanding of my own story within that intersection. I predicted that during the incubation, illumination and explication periods the understanding I had gained for each isolated intersection would help me understand the complex nuances of the intersections as they informed each other.

I scaffolded the weeks with containers for response; I had questions that I asked myself at the end of the week and I met with my research supervisor Simon Driver to talk about what was on my mind with another drama therapist.

#### 3. Incubation

In this stage the researcher disengages from research as well as active thought around the research, so the seeds of the initial stages will have space to grow in the mind and body of the researcher (Moustakas, 1990).

This stage lasted for many months-but even though I was not consciously focusing on this research, the platform of understanding myself that the research had opened me to kept me

moving towards an understanding of myself culturally. The concept of myself as a cultural being became especially prominent and nourishing in my life.

#### 4. Illumination

In this stage the researcher re-engages with the material produced in the first two stages. This engagement, combined with unconscious work done during incubation, is meant to illuminate new insights. From this point of new clarity, the researcher starts to find themes in the reflective material that are relevant to the research question, and creates thematic clusters (Moustakas, 1990).

In this stage I started to be more drawn towards writing my paper again, as I found myself going through my reflections on the topics not only from the four intentional weeks of research but also from the incubation period. I found that the separate experiences of interacting with the intersections had become more integrated and I was beginning to notice I was relating to these intersections differently. I felt less reactionary when these parts of my life were brought up and more curious about how I was reacting and why. I felt a greater grounding in a sense of culture.

#### 5. Explication

In this stage the themes and connections that have come to light during illumination are more rigorously categorized and the core themes are developed. The purpose of this stage is to find the essential essences of the main components of the researched phenomenon (Moustakas, 1990).

The explication of my research will be made evident in the findings that are to come. The "essential essences" for me were the ways I noticed myself change through this process and the discoveries I made about myself during this time. I will further extrapolate on how I can see these discoveries aiding in my ability to facilitate therapy in a culturally humble way.

#### 6. Creative Synthesis

In this stage the researcher takes the main themes and intuitively creates a piece of art that represents the outcome of the heuristic inquiry (Moustakas, 1990). For this part of the research I reflected on what it means to be an artist, in the wake of what I had just learned, and I gave myself a loose "art" assignment based on the answer I came up with. My thought process around this and the assignment can be found in the Appendix.

#### Findings

In this section I will unpack the processes of my incubation, illumination and explication periods. I will start off by unpacking some of the essential findings that came from my journaling during the four weeks of the immersion phase, where I was focusing on each intersection in an isolated way.

I will then demonstrate how, within the illumination period, the understanding of these separate intersections came back together, and I was able to notice the complex web of feelings, thoughts, and perceptions each part of me has. I note how these different ways of being inform how I interact with the world. I will offer some real-world examples of times when I noticed this integration and deeper understanding.

I will make clear the practical competencies and outcomes I can gleam from my journey in the explication phase.

Finally, I will make recommendations for other drama therapists and healing practitioners based off my findings.

## **Findings During the Immersion Phase**

#### Jewish Identity

The first week of my research I focused on my Jewish identity. This was around the time that George Floyd was murdered and people around me began examining how our culture, with its legacies of colonialism, capitalism, and white supremacy, is complicit in the murdering of and violence towards black people and the associated acts of violence towards POC, Indigenous people, and, in effect, those whose realities must be diminished and made less than human for the supremacy of a few to stay in place. I re-engaged with certain questions around Jewishness that have echoed through my life but not landed in my understanding of myself as a cultural being.

As 3/4<sup>th</sup> Ashkenazi (a Jew whose origins can be traced to Europe and who often have white skin), and 1/4<sup>th</sup> Mizrahi (Mizrahi being a Jew with origins from the Middle East and North

Africa), I was contending with the nuances of power and privilege that come from being a white skinned Jew, with origins also from the Middle East.

These events and orientations shaped the thoughts I was having about this part of my identity and directed me towards the content I interacted with this week. I read up on the concept of "Ashkenormalizing", or the ways that being a white/Ashkenazi Jew is the assumed norm of what it means to be Jewish in North America because of its proximity to the originally colonizing white bodies of North America, and the privileges this affords (Tamler, 2020). I brought my own internalized anti-Semitism up with myself and spent time with the thoughts and feelings I have associated with this oppressive mindset. I tried to forgive myself for internalizing these thoughts.

Some relevant points of learning from this week that I will later tie towards my growth as a culturally humble healer are as follows. I acknowledged the complex feelings I have about being from a diaspora, a settler on this land but also someone that does not have one place of origin in my recent lineage. In my giving space to the complexities between oppression in my family line and in my validating of this pain for myself, I felt more grounded in conversations about the oppression of others. I wasn't coming into the conversation with a covert need for recognition or understanding of my own story. To put it in IFS terms, the exiled parts I had around my connection to my own oppression and privileges in this area were seen and accepted by me, so I became less triggered by their feelings during conversations around oppression (Earley & Schwartz, 2009). I was also able to understand some of the qualities of Jewish intergenerational trauma as I saw them in my family home and my internal world, to reiterate the wisdom of Meankem; "Trauma decontextualized in a person looks like personality. Trauma decontextualized in a family looks like family traits. Trauma in a people looks like culture" (Tippett, 2003-present). I had an embodied understanding of the truth within this quote.

This realization brought me closer to myself and helped me release some of the relational pains I experienced in my family home. I centered into the reality that we come from a culture that has experienced the deep pain of oppression, and that weight of this has been felt by the generations in my home in both micro (antisemitic comments) and macro (My Saba, Hebrew for grandfather, was in the holocaust) oppressions. Alongside this, understanding racialized oppression within Jewish culture gave me a gateway into understanding how life for my Safta (Hebrew for grandmother) who is Mizrahi, might be very different from the life of my Bubie

(Yiddish for grandmother) who is Ashkenazi. Though both are definitely affected by the nuances of antisemitism, there are different intersections and therefore probably different nuances of both oppression and resilience inherent in the different ethnic identities, accents, and skin tones that they inhabit. My subliminal integration of these differences, and how I view myself as a descendent of both these lineages has become a more central part of my identity and understanding of myself as a being that is moored within a lineage. I did not just show up here on this continent without a history or a culture, despite the overlaying of a neutralized "Canadian" identity.

#### Queerness

The second week of my inquiry I focused on my identity as a queer person. This is an intersection of my internal cultural map that I spend a lot of time at. A lot of my relationships revolve around this intersection. I do not view this identifier as simply a pinning on of at least one of the symbols in 2SLGBTQIA+ (which stands for Two Spirit, Lesbian, Gay, Bi-sexual, Transgender, Queer, Intersex, Asexual, with the plus standing in for all of the diverse ways of identifying sexually or within your gender that exist in the world). I view queer as an orientation.

This view is heavily informed by a video I watched a few years back by the content creator Shon Faye, and that I watched again for this research. She made a video in partnership with Novara Media called "What Does it Mean to be Queer" where she unpacks to moniker "Queer"; She lays out some of the history of the word and most importantly, she explores what it means to claim this identity (Novara Media, 2016). Does it mean you have to be 2SLGBTQIA+ or is it an orientation towards the world that inspires certain actions. Is there a way to relate queerly? In the inquiry she offers queerness as "riposte to identity", a not knowing and an openness to learning (Novara Media, 2016). On the flip side of the riposte, is the grounded acknowledgement and responsibility that comes with being a member of the queer community, especially if you are a member that comes in with a lot of privilege from the other intersections in your life (Novara Media, 2016). As a white-bodied queer I do not have the same lived reality of oppression as a Queer POC. In recognizing this I would hopefully act in solidarity with these members of my community who experience oppression, as I am not truly free when people in my community are experiencing oppression. It is my responsibility to take on reparations for what another community I am a part of (whether I want to be or not), that of white or white passing

people, either consciously inflicts or is complicit in when it comes to the realities of POC members of the queer community. I can take it upon myself to use the privileges and extra resources I get from being white to offer my energy and support in ways that are being asked of me.

Jumping off the starting point offered in Shon's video, I engaged deeper with the question of what it means to take on the identity of Queer. I wondered what some other ways of queer relating were. Ways that go against the prescribed ways of knowing and being inside of our culture. I came across The Wheel of Consent, A tool created by Betty Martin that helps one better understand what consent means, specifically when it comes to touching and being touched, and the lessons therein (2014). I saw this as inherently queer because it encouraged ways of relating to others that defied the heteronormative script. It asks you to tune deeply into your own desire and to use this as a starting point for relating. Understanding more about consent made me think about consent in therapeutic practice, especially with marginalized clients. This brought me into a flow of self-assessment and realization around the ways I interact with client's stories.

In the drama therapy program, I worked with two different so-called "populations", or insular cultural realities: Adults with differing cognitive abilities, like autistic adults and adults with Down's Syndrome, and urban Indigenous folks between ages 3-30, through Native Montreal. Though I am not autistic myself, my twin and younger brother are, and I have been diagnosed as ADHD. I have many emotional, sensory, and relational experiences that, though I mask it, I experience in a way that does not seem to align with neurotypicality. As a chronically ill person with chronically ill family members, I also have a lot of experience being around people, and in fact being a person, who have physical needs that are different than the "norm". It is very normal for me to be in relationship with those who relate to the world in unique ways. While working with autistic adults and interacting with their stories, there was not the same sense of newness and gaps between my life experience as there was with the indigenous folks I worked with. As I interacted with the life stories shared with me by indigenous clients, I noticed that certain parts in me were present that were not peaked with my other clients. Of course, I had a sense of curiosity about the uniqueness of my autistic clients cultural and embodied realities, but I was already somewhat familiar with the cultural backdrop that their experiences were contextualized within. Though I read and integrated writing and indigenous perspectives into my life through taking in art made by indigenous folks around their cultural stories and identities, I

think there is just a fundamental difference between learning by seeking out knowledge and learning in relationship. When I would hear about a story that was particularly tied to what it was like to be indigenous, and the knowledge that this reality lived in all of the stories I was being told, I felt myself intrinsically learning, and I felt I was not only in the role of therapist, but also that of the student. And I realized that I should have made this reality clearer, that I was covertly a student and they were covertly a teacher.

I will clarify why I felt this way with a personal example. Personality qualities that I identify as uniquely connected to the experience of Jewish oppression are suffering and neuroticism. The feeling of suffering through something is based in so many realities that Jews have experienced. Someone who has seen Jews on television may have a sense of this through caricatures of Jews. You see the complaining, shvitzing, oy-veying Jew, the Seinfieldian Allenesque neuroticism, and you have a sense of a culturally contextualized reality. But knowing something through comic relief on a television show is different than knowing something as a quality that is based in cultural truths. Neuroticism isn't just a quirk; suffering isn't just an internalized mindset. If you were from a culture that had been scapegoated throughout history all across the diaspora you might have a sense of victimization, of suffering through another trial in a long story. If you were always looking behind your shoulder, waiting for a door to be kicked down, hiding, this may live in your perspective on the world, the continual shifting between freezing, and fleeing might be traumatically stored in your body. You might pass this embodied dysregulation onto your children. This way of being might sink into the bones of your culture and be enacted through humor, another survival tool. You might get so good at this tool that you use it to assuage yourself and to be palatable for those who do not understand you, who seek your continued oppression: "Trauma decontextualized in a person looks like personality. Trauma decontextualized in a family looks like family traits. Trauma in a people looks like culture" (Tippett, 2003-present).

So, if I had a therapist who was not Jewish, who did not have any intimate relationships with Jews where they may have heard about this reality from a place of relationality, with their body attuned to another body, I might not be sure that they understand that neuroticism and suffering aren't just stereotypical traits, but deeply tied to cultural traumas. That doesn't mean that they might not learn this in relation to me. That doesn't mean I'm closed to them learning from me. But I do have an expectation that they would be self-aware enough to recognize this

dynamic that might be hidden if not exposed; that we are not simply therapist and client but also co-learners and teachers.

It is in this way I noticed a difference between my work with my indigenous clients. I truly learned in a new way about a different lineage and different embodied and culturally passed along stories. Looking back, I would have wanted to bring this up when I noticed it, and to respect the fact that it was happening. To be able to honor the teachings. To be able to give the client the freedom to make a new choice if this was not a dynamic that felt fair. I feel there may have been a client that I had that was not interested in there being this covert dynamic between us. Maybe another client may not care, another might find this quite obvious. I can think of a client that I have had that may have been happy to know that they contributed in this way, as they often talked about positively contributing to the world and teaching others as a main goal in life.

I think this added layer of cultural consent might allow more agency and a true recognition of what is happening in dynamic into the space and could offer a moment of healing. Though a client might choose to end therapy because they do not want to be in a teaching dynamic, or to be "giving" in that way in this dynamic, at least they were given as much autonomy in the relationship as possible. A respectful ending of a relationship that is not pleasurable or consensual is a healing experience.

## **Physical and Mental Illness**

While reading through this section with my supervisor we noticed a tonal shift in this section compared to the last two weeks. I felt that in this section I was plainly laying out visceral experiences of being in my body, while the prior sections were written more by a mitigating "self". It seems that this part of me has quite a feisty relationship to the world, like it's a bit young and it wants to heard on its soapbox with its hand on its hip and the its reality held in its hand, beating.

This week I focused on the realities of being physically and mentally "ill", on noticing myself. Noticing when I felt discomfort or need in my body, noticing when my thoughts and feelings started to swerve towards discomfort and need. I started to notice when I would try to escape my pain, both physical and mental. This involved a lot of staying with myself, even when I wanted to go. For most of this week I centered myself around something my therapist had said

to me, that affixed itself to my chest as she casually tossed it out. She told me that "I can't walk over my body". A fairly benign collection of words, but coming from her at the time it came, the reality entered my body and sunk its hooks in. As I tried to unlatch each one, I was opened up to a deeper understanding around why this phrase initiated an inhale. As someone who has two chronic physical illnesses, Diabetes and Crohns, as well as a revolving door of other diagnoses, I have often have to run away from the particulars of what it's like to live inside of this body and life, to work towards "success". As a person who has also experienced multiple macro and micro aggressions from those in power, particularly teachers, around my specific needs related to illness and difference, I have internalized the "wrongness" of my body and way of being. Since my disabilities and differences are invisible, I have internalized the idea that I should learn how to survive with them and mask myself as normal. "I do NOT deserve accommodations or different rules" "I think I'm better than the rules". The amount of times things like this have been said to me in overt and covert ways is more than I can count and goes as far back as I can remember.

So yes, I walk over my body.

My goal this week was to be with my body as much as possible. To stop and sit when I started to experience physical pain, which often leads to emotional discomfort and fear. To stop and breathe when I was experiencing emotional pain, which often inflames my physical discomfort. To recognize what a fucking ride it is to live in a world as a body that has a diverse amount of experiences. To be a young person with some of the embodied challenges that are usually given to those who are at a later point in their life cycle.

This week I mostly learned about the importance of space and breathe. Of not trying to change or figure anything out. Holding painful realities by being with them. Noticing other things that are happening in my body, not just the discomfort and pain. Noticing other perspectives and realities when my trauma thoughts and perspectives are warping the world to the size of a pin top. I came out of this week with a deeper connection to my needs as a body that experiences pain and discomfort that is out of my control. I stopped trying to control the pain in my body and the painful mindsets that flinch through my head as a result of constantly being told, and repeating to myself of my own volition, "you are wrong". I just feel the things, and I feel love and understanding for myself and my circumstances without feeling like a victim to them.

#### Therapist/Healer

This week I took stock of the therapeutic practices, orientations, and teachers that I had connected to in the last three weeks. I also came to a more grounded definition, in myself, of why I wanted to be a healer and how I wanted to do it. I found that the processes over the last three weeks, in an of themselves had helped me feel more located in my reality. I felt less existential confusion around my orientation towards being a healer, as I felt I knew where I was coming from and how to relate to myself in a healing way. I felt I had a better idea about how to relate to others across differences, as I had related to myself across my own differences, from a place of integrity.

#### **Findings During the Illumination Phase**

During this stage of the research, I found that my understandings of and relationship to each of my locators had started to integrate. The four weeks that I had spent focusing on each of the intersections individually had allowed me greater space for the experiences I had within each of these realities, while the time afterwards allowed these understandings to inform each other and reintegrate as connected parts of the whole experience of what it is like to be me. In the following section I recount some moments where I noticed that my understanding of myself, and how I acted based on this new understanding, was different than before I started the research.

#### **Braiding and Bridging parts**

Recently I was talking with someone about the medical system and they were excitedly telling me about how they were deciding to go off of their medication. They were happy that they wouldn't have to rely on the pharmaceutical system or the products of a capitalist society. As they started to talk about their excitement around this, I noticed that I began to feel uncomfortable, sad, and annoyed. I had to tell them I couldn't talk about it; not because I didn't want them to be excited about this change in their lie, but because I couldn't be excited for them in that moment.

As a chronically ill body that relies on life saving medication every day I am inextricably tied to capitalist consumption. This is something that causes me sadness.

Through this research exploration I have come to better understand my chronically ill

body. The tying of this body to culture and lineage, knowing that I am carrying specifically Jewish intergenerational trauma, I feel more vindicated and grounded in my boundaries around the pain I experience through invisible oppressions.

Before this exploration, because of cultural gaslighting of my lived oppressions, I would have felt irrational for my annoyance and made myself listen, all while harboring inexplicable resentment at my friend for not understanding realities that they do not live and echoes of pain in me that go back generations.

This deep understanding of my experience of my own oppressions, I feel, may help me to better understand what my clients may be feeling or experiencing, in invisible ways, that might not even be a part of their conscious story, but contained in their bodies. I feel I will better be able to facilitate the ways parallel interactions of different intersections could be echoing in their bodies.

This makes me think of the self-woven identity "Indigiqueer" created and claimed by Joshua Whitehead, an Oji-Cree poet and writer whose novel Jonny Appleseed I read and loved this year. Joshua identifies as two-spirit, but also recognizes the reality that being indigenous and being queer are inextricable identities in their life, saying "For me, to take the word 'Indigenous' and braid it with 'queer' is a new type of worlding — a braiding of two bridges. I really like the biting edge 'Indigiqueer' has. I think of it as the driving force that is pulling along two-spiritness" (Rogers, 2021).

Though I do not have this specific experience, from my experiences and purposeful exploration of my own unique intersections, I may have more of a blueprint or curious opening for the ways in which folks are compelled "braid" and "bridge" their identities (Rogers, 2021).

#### Being my own ally

This research provided me with a more solidified grounding in myself as a person who lives at oppressed intersections. Since I gave space to my emotions and reactions within my experiences of my intersections, I found I had more room between my sense of my Guide role and my Self part, and the reactions of my parts (Earley, 2009; Johnson, 2009). I found I could respond to situations that involve complex interactions between privilege and oppression while using the ability of the Guide to balance the multiple messy realities in every situation, and the Self to stay grounded in a sense of unconditional love and integrity (Earley, 2009; Johnson,

2009).

The grounding I experienced through this research helped me to re-assess certain situations of oppression around my queerness and chronic illness that I had experienced while studying at Concordia. I was able to hold, witness, and validate my feelings of sadness, frustration, and confusion around what had happened. From this vantage point of responding rather than reacting, I was able to take a step back from the situation and think about other people like me. I was not going to say anything about the situation originally because I had felt so conflicted and confused, but in sitting with myself during the course of this research and in being able to connect to those around me through my own grounding, It became important for me to bring up my experiences. My intention in doing this was so those who enacted the oppression would get the opportunity to learn about what they had done, and hopefully become more educated and re-invigorated in their own practices of cultural humility. A main drive in this was that I did not want other people who are oppressed to experience the oppression that I did.

Through feeling of connectedness with myself and my communities that I gained through my journey towards cultural humility, I was better able to show up as an ally for myself and for others who live at similar intersections to me.

#### **Explication Phase: Results and Discussion**

It is in the explication phase that I came to realize the concrete results that had come out of this process. In this section I will concretize some of the outcomes demonstrated in the sections above and discuss their relevance to my growth as a culturally humble therapist.

In this investigation I became more grounded in my relationship to whiteness and was able to define for myself what it means to be both a white-skinned person, while also having a different lineage and different privileges than what might be assumed when someone lives in the multi-layered reality of "White". This made me realize that I want to begin healing with other people in the Jewish community, both Ashkenazi and Mizrahi, as I feel the wounds and privileges that I need to address and make amends for in my life are situated within the braided and bridged reality of being a white mixed Jew, rather than being a white Canadian (Rogers, 2021).

Through this process I also feel more grounded in my relationship to consent in therapy. Most evidently, I have come to a new realization about the role of "learner" that comes up in me

when working with clients cross-culturally, and the integration of transparency and agency that I plan to integrate into future work with clients across difference.

I also felt more connected to consent within my relationship to my parts and my body. Since my oppressed parts were given space to be heard, I became more attuned to exactly how much time they really need to feel their feelings, say what they want, and come to some sort of resolution. In the past when I had felt upset, especially when there were multiple upset parts, I was more likely to shut down and steam-roll over their realities or force myself to do something I was not fully comfortable with. I am now more grounded in how I can relate to all parts of myself consensually.

Because of my ability to be seen and listened to by myself, I feel my parts start to mature and integrate. As Earley pointed out, exiled parts are often young and don't know about the capacities of the adult self (2009). As I invite these exiled parts into a space of compassionate listening, they have started to understand that I am resourced and will be my own advocate when I need that. This has made it so I feel less overwhelmed by multiple diverse reactions, as I am quickly able to understand and integrate certain emotions with compassion and appropriate action. I have worked towards a primary goal of the self in ISF work, capacitated care from the Self (Earley, 2009). I have also touched in on a primary goal of the Guide, integration of the self (Johnson, 2009). Based in the healing logic of both these perspectives, I have taken steps towards overall healing in this work. I believe this contributes to my work as a culturally humble therapist because I have a deep understanding of the fact that cultural healing is necessary for overall healing.

This ability to appropriately advocate for myself has made it so I am a better Ally to my oppressed parts. As I mentioned throughout this paper, I have internalized some of the oppressive mindsets I have interacted with throughout my life. I have also been through many circumstances of aggression ranging from micro to macro, especially in academia. I had become jaded and tired, a role that would show up when thinking about advocating for myself in these situations; the maligned and weak part of myself that felt too targeted to fight back. In the grounding that I was able to do, and the clear understanding of each of the parts of myself that were being oppressed, I understood from the Guide/Self parts of myself that I deserved to be stood up for. That the people in my community deserved to be stood up for. This allowed me to not code this situation as something that was happening yet again to the maligned part, but something that is systemic and that needs to be addressed with compassion and perseverance.

Through this research I gained the competency of stillness, of being able to be with from the place of the Guide/Self. Before this experience I did not have an established relationship with the parts of myself that had been oppressed. It was harder to be with myself in situations where some of them were triggered because there were so many feelings swirling around and I did not understand where they were coming from. In this process I also learned more about doing nothing but being with myself and my body when I was in pain or uncomfortable. This helped me to both be with these feelings while also being able to gain enough space to notice other things that were happening.

Finally, I have come to understand that I am forever a learner, not just the therapist, in relationship to my clients, and am more committed to honoring that in my dynamics.

I feel that all of these competencies will help me to become a more grounded and culturally humble therapist. Since I am better able to understand and show up for oppressed selves, and since I developed multiple ways of responding, I feel I will better be able to show up for my clients who experience oppression.

#### Recommendations

I have come to a few recommendations for the training of drama therapist in cultural humility based on my work.

- Spend time with each intersection. Spending time with my intersections apart from each other allowed me to better understand their individual needs and stories. Because of this attunement I believe that the parts are beginning to integrate. I also feel I am able to be with nuance.
- 2. Learn in community. Though I was doing this research by myself I am lucky enough to be in a community of friends that are also attempting to heal their cultural wounds. It was in healing with others, across difference, that I was able to see my own story more clearly. This was true of my whiteness specifically. One of my close friends has historical origins that come from a lot of histories of colonial whiteness. The differences in our stories and our iterations of whiteness made it more clear to me that though I do have the embodied experiences of some of the privileges of being white, I do not come from the same lineage of whiteness that is tied to colonialism in Canada, and that some of the

avenues I need to heal need to be done with a different understanding of how whiteness is iterated in my lineage.

3. My incubation and immersion stages spanned over 6 months-I needed much more time to integrate and sit with these realities than I originally thought. I feel that it would be instructive and generative to introduce the concept of cultural humility at the beginning of training programs and set it up as something that continually needs to be re-engaged with.

#### Conclusion

I came to this research with this question: How can self-inquiry around culture and social locators help to enhance cultural humility in drama therapists? And in engaging in this research I have not exactly come to a clear and fixed answer, but I certainly feel I have a new understanding of cultural humility. I was able to connect to my own story, my multiple lineages, and be honest with myself about what it feels like to be In these stories. I was able to be humble at the edge of these stories, coming out of the idea that I begin and end and opening myself up to the knowledge that I am in perpetual lineage to things that contain more than this body and life, and that give this body and life meaning.

I feel I came up with generative recommendations in this research, but I am mostly feeling gratitude for where this journey has taken me. What it has allowed into my life. I am not sure if this will feel the same for everyone else. If the outcomes or recommendations would at all align if my neighbor went through the same thing, but I do know that I recommend going off and doing it anyways, because I feel truly changed by this work, not like I just finished an assignment so I could graduate.

I feel both deeper understanding and connection with the stories of my life that were hinted to and told in this work, and also able to step away from them. I feel love and acceptance for the parts of myself that have been oppressed, that felt confused and disconnected, and I now feel I have the capacity to hold my life, with the knowledge that I am being held.

#### References

- Bell, S. (2018). A Music Therapist's Self-Reflection on Her Indigenous Heritage: A Heuristic Self-Inquiry. Canadian Journal of Music Therapy, 24, 59-75.
- Bodlovic, A., & Jackson, L. (2018). A Cultural Humility Approach to Art Therapy Multicultural Pedagogy: Barriers to Compassion. *The International Journal of Diversity in Education*, 19(1), 1–9. doi: 10.18848/2327-0020/cgp/v19i01/1-9
- Bruck, T. (2009). How Dramatherapy is Informed by the Therapists Own Background and History. *Dramatherapy*, *31*(2), 25–26. doi: 10.1080/02630672.2009.9689774
- Camilleri, V. A. (2001). Therapist self-awareness: an essential tool in music therapy. *The Arts in Psychotherapy*, *28*(1), 79–85. doi: 10.1016/s0197-4556(00)00069-1
- Cantrick, M., Anderson, T., Bennet Leighton, L., Warning, M. (2018). Embodying Activism: Reconciling Injustice Through Dance/Movement Therapy. *American Journal of Dance Therapy*, (40), 191-201. https://doi.org/10.1007/s10465-018-9288-2(0123456789().,-
- Carr, M., & Andersen-Warren, M. (2012). A Research Interview: Dramatherapy and Cross-Cultural Awareness. *Dramatherapy*, *34*(2), 92–100. doi: 10.1080/02630672.2012.704190
- Carolyn Zerbe Enns, Thema Bryant-Davis & Lillian Comas Díaz (2021) Transnational Feminist Therapy: Recommendations and Illustrations, Women & Therapy, 44:1-2, 212-233, DOI: 10.1080/02703149.2020.1776021
- Christey-Casson, J. (2018). On Being a Gay Therapist: A Reflective Memoir. *Dramatherapy*, *39* (3), 181–182. doi: 10.1080/02630672.2018.1508604
- DiAngelo, R. (2011) White Fragility. International Journal of Critical Pedagogy. 3(3), 54-70.
- Fort, C. J. (2018). Intersectionality, Intersubjectivity & Integration: A Two Person Therapy.*Journal of Psychology and Theology*, 46(2), 116-121. DOI: 10.1 177/00916471 18767987
- Earley, J., & Schwartz, R. C. (2009). *Self-therapy: a step-by-step guide to creating wholeness and healing your inner child using Ifs, a new, cutting-edge psychotherapy*. Pattern System Books.
- Hayes, P. A. (1996). Addressing the Complexities of Culture and Gender in Counseling. *Journal* of Counseling & Development, 74(4), 332–338. doi: 10.1002/j.1556-

6676.1996.tb01876.x

- Johnson, D. R., Emunah Renée, & Landy, R. (2009). Role Theory and the Role Method of Drama Therapy. In *Current approaches in drama therapy* (pp. 65–88). essay, Charles C. Thomas.
- Knight, C. (2012) Therapeutic Use of Self: Theoretical and Evidence-Based Considerations for Clinical Practice and Supervision. *The Clinical Supervisor*, 31: 1-24.
  DOI:10.1080/07325223.2012.676370
- Martin, B. (2014, January 8). *The Wheel of Consent* [Video]. YouTube. https://www.youtube.com/watch?v=auokDp\_EA80&ab\_channel=BettyMartin
- Menakem, R. (2017). My Grandmothers Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies. Las Vegas, Nevada Vegas: Central Recovery Press, LLC.
- Min, Y. (2009). Who's that behind You? What Do We Knowingly Or Unknowingly Bring From Our Heritage that Colours the Way We Interpret and Practise Dramatherapy? *Dramatherapy*, 31(2), 14–18. doi: 10.1080/02630672.2009.9689772
- Novara Media. (2016, March 13). *What does it Mean to be Queer*?.[Video file]. YouTube. <u>https://www.youtube.com/watch?v=RDO2-sNF2s4&ab\_channel=NovaraMedia</u>
- Owen, J., Jordan, T. A., Turner, D., Davis, D. E., Hook, J. N., & Leach, M. M. (2014). Therapists' Multicultural Orientation: Client Perceptions of Cultural Humility, Spiritual/Religious Commitment, and Therapy Outcomes. *Journal of Psychology and Theology*, 42(1), 91–98. doi: 10.1177/009164711404200110
- Patallo, B. J. (2019). The Multicultural Guidelines in Practice: Cultural Humility in Clinical Training and Supervision. *Training and Education in Professional Psychology*, 13(3), 227-232. <u>http://dx.doi.org/10.1037/tep0000253</u>.
- Reupert, A. (2006). The Counsellors Self in Therapy: An Inevitable Presence. International Journal for the Advancement of Counselling, 28(1), 95–105. doi: 10.1007/s10447-005-9001-2
- Rogers, S. (Host). (2021, January 30). 2021 Canada Reads: Joshua Whitehead on Jonny Appleseed [Audio podcast episode]. In The Next Chapter with Shelagh Rogers. CBCListen. https://www.cbc.ca/listen/live-radio/1-67-the-next-chapter

Romanelli, A., Tishby, O., & Moran, G. S. (2017). "Coming home to myself": A qualitative

analysis of therapists' experience and interventions following training in theater improvisation skills. *The Arts in Psychotherapy*, *53*, 12–22. doi: 10.1016/j.aip.2017.01.005

- Sajnani, Nisha, et al. "Guidelines on Cultural Response/Ability in Training, Research, Practice, Supervision, Advocacy and Organizational Change." *Drama Therapy Review*, vol. 2, no. 1, 2016, pp. 141–148., doi:10.1386/dtr.2.1.141\_7.
- Tamler, C. (2020, August 10). Land that Lives in the Body. GRAYLIT. https://graylit.org/blog/land-that-lives-in-the-body.
- Tervalon, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. Journal of Health Care for the Poor and Undeserved, 9(2), 117–125. doi:10.1353/ hpu.2010.0233
- Tufekcioglu, S., Muran, J. C. (2015). Case Formulation and the Therapeutic Relationship: The role of Therapist Self-Reflection and Self-Revelation. *Journal of Clinical Psychology: In Session*, 71(5), 469-477. DOI: 10.1002/jclp.22183
- Williams, E. N., Fauth, J. (2005). A Psychotherapy process study of therapist in session selfawareness. *Psychotherapy Research*, 15(4), 374-381.

Yan, M. C., & Wong, Y.-L. R. (2005). Rethinking Self-Awareness in Cultural Competence: Toward a Dialogic Self in Cross-Cultural Social Work. *Families in Society: The Journal of Contemporary Social Services*, 86(2), 181–188. doi: 10.1606/1044-3894.2453

#### Appendix

This experience not only helped me feel more grounded in my social locators, it also helped me to feel more connected to what it means to be an artist, and what our roles are in society. This work made me think more about the privileges that artists have in society. I think about the experience of seeing someone without a home on the street expressing their feelings loudly and asking for things, for relational recognition from people. I see how we ignore or other these people's experiences. Then I think about how, if I slapped on a shirt that said, "artist in residence" and did the same thing that a person without a home did, displayed my emotions publicly and asked for relational recognition, people would probably feel more allowance and relate to me more readily. This makes me think about what being an artist even means, what is the function of making art in our society? To be a safe container for public feeling and expression.?When I make this distinction, put on a shirt that cleanly defines my actions as those of an artist, who am I in sovereignty to? It came to me that people who express their emotions in public, that show their need, are doing a real service for us and we are turning away. Privilege within white supremacy, colonialism, and capitalism asks us to hoard our resources and to keep relationality out of public spaces. To keep emotions, especially those associated to the pain of separation and otherness that capitalism necessitates, out of the public eye. I see people begging for their lives and I feel that they are doing a public service. They are bearing the brunt of social disconnection that somehow makes it so we can ignore someone dying right in front of us. I wondered how I could make art that is in solidarity with life, with my life, the lives of those around me, and with the more than human lives of plants, animals, and the wide wild world. I decided to give myself a loose assignment or outline for how to follow my impulse to connect to the world, to feel in the world. I would do this in public spaces without regard for what was proper and improper, and without a desired outcome from the general public, with the knowledge that because of the implicit safety of being white and looking a certain way, that I can act "improper" without fear. My intentions around expressing are that being alive in public, feeling shouldn't just be the job of those who are forced to express. Being alive in public is a public service, being in heightened relationality is what art making is. Below is a loose outline of the thoughts that I followed to create things that might be called art if I was wearing an "artist"

badge while doing them, but that felt to me like heightened and honest relationality:

Notice how you are feeling while you are present in the space you are in. Notice what you are noticing and follow yourself. Remember all the things you are able to do; sound, speak, move, breathe, sing. Ask yourself if any of these things feel right to do right now. Tap into the things that are around you, especially the more than human others like the members of nature and objects. See if you connect to any of these things or if any of these things are talking to you. See if any of them want you to stay with them, if any of them want you to sound, speak, move, breathe, or sing. Engage in these actions if they are called upon and allow yourself to check in with yourself and the things you are interacting with: "what do you want?". Feel free to wait for an answer, feel free to not receive one. Feel free to relax into any of these parts. Feel free to go at whatever pace feels right in the moment. You are welcome to notice other people if it feels right, you are also welcomed to not relate to humans. The goal, if there is any, is to be honest with the world, and to not cut yourself off. To allow your experience of what it means to be alive and in relation to mean that you are more than a segmented self, that you can hear the world and respond, and that the world is continually there for you, offering something, if you open yourself to it. If you are too mired in yourself to feel connected, connect to that. You are not wrong in where you are. But wonder, from your place of integrity that believes in yourself and the world, what would you like to do, what is within your capacity, not based on a story about yourself but in how you respond when you ask yourself that, right now.