

Reclaiming Ourselves:
The Use of Drama Therapy to Re-conceptualize Identity
In Women Survivors of Domestic Violence

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ABSTRACT**The Use of Drama Therapy to Re-conceptualize Identity****In Women Survivors of Domestic Violence****Chlœe Frisina**

This paper explains the use of drama therapy with women survivors of domestic violence. Background information from current literature addresses the various forms of violence, the vicarious cycle of violence and its effects. Victimization, trauma theory and social influences are also explored to understand the many emotional responses women endure from domestic violence. There is a focus on the use of personal storytelling in drama therapy to re-conceptualize identity, an identified essential attribute in the process of positive change. Case study vignettes from a drama therapy group held at a Montreal crisis shelter are used to illustrate how drama therapy enabled women the opportunity to make meaning of identified feelings, and claim ownership over thoughts and values. Through the combination of theory and practice this research provides an understanding of women survivors' identities and the specific life experiences they bear, as well as how drama therapy can help re-conceptualize identity.

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I would like to begin by thanking Bernie Warren who gave me the crayons that allowed me to color outside of the lines. Thanks also to my advisor Jason Butler for guiding the telling of this story. I would also like to thank my Mother, Father, Renée, Toné and Nonna Marlene for their endless support. Thanks to the three musketeers for eagerly celebrating each milestone. Finally, a special thank you to Laura, Ivy and Jennifer for sharing their stories and finding the strength to search for their own puzzle pieces.

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In this climate of profoundly disrupted relationships she must develop a sense of self in relation to others who are helpless, uncaring, or cruel. She must develop the capacity for initiative in an environment which demands that she bring her will into complete conformity with that of her abuser. And ultimately, she must develop a capacity for intimacy out of an environment where all intimate relationships are corrupt, and an identity out of an environment which defines her as a whore and a slave. (p. 101)

Judith Lewis Herman, *Trauma and Recovery*, 2001

Women survivors of violence have endured horrible life experiences. They are often victims to many different types of assault leaving them in psychological turmoil and feeling invisible to both their perpetrator and themselves (Burks, 2006). Many researchers (Dienemann et al., 2007; Hoff, 1990; Lundberg-Love & Marmion, 2006; National Research Council, 1996) categorize identity as a key component of recovery. For the purposes of this research, identity is defined as a person's sense of their own individuality. This paper will explore how drama therapy can be utilized to aid women in reclaiming lost parts of themselves and developing ownership over their identity. Through drama therapy and its emphasis on identity an organic exchange of life experiences and the events that shaped the becoming of oneself occurred within the group. However, for the women involved because this was the first telling of these experiences they were also attempting to create meaning. This research regards the potential that drama therapy has in helping women survivors of violence explore and work through their experiences in order to liberate an identity outside of the violence.

The primary purpose of this research is to present my understanding of the efficacy of drama therapy as an intervention for women survivors of domestic violence.

In order to illustrate this suggested effectiveness, vignettes will be drawn from an ongoing drama therapy group held at a sixty-day crisis shelter for women survivors of domestic violence in Montreal, Quebec. Women enter the shelter immediately after leaving the violent relationship. During their stay at the shelter, the women attended mandatory services aimed to assist in future planning with an assigned social worker, and meetings about the consequences of domestic violence. The drama therapy group met every Wednesday afternoon for an hour and a half over the course of a month. The group was gathered on a volunteer basis and after its establishment remained closed.

I first met Ivy on the back porch smoking a cigarette. She sat slouched in a plastic chair, her long brown hair covering most of her face but as our eyes met her smile was very inviting. I approached her and learned she was a forty-year-old American woman seeking safety from a six-year abusive relationship. She excitedly accepted the invitation to join the drama therapy group. I was introduced to Jennifer in the dining room of the shelter sitting on a large wooden chair watching her youngest daughter play in the common room. She was expressionless in her face and very quiet, though there was a strong sense of determination about her I could not ignore. She informed me she was a thirty-seven-year-old mother of three with a violent history though she most recently left a four-month abusive relationship. I explained the drama therapy group to her and she hesitantly agreed to try it. Lastly, I met Laura. Her social worker encouraged me to invite her to the group. I went to Laura's assigned bedroom, which was the door labeled "3". I knocked and a tall thin woman apprehensively answered. Laura introduced herself as a forty-two-year-old woman whom had recently escaped a six-year abusive relationship. She also informed me she was a visual artist and would gladly be a member

of the drama therapy group. Ivy, Jennifer and Laura became the three members of the ongoing drama therapy group.

The group's intended duration was six weeks however group termination was sudden as it's members left the shelter early. "The sense of rupture that brought the women to the shelter, consequently, also often characterizes their departure" (McLellan, 2009, p. 2). Jennifer was asked to leave because she had broken too many of the shelter rules. Laura left because her perpetrator had learned of her residence at this particular shelter and she was transferred to another. Ivy left the shelter last because her visitor's visa to Canada had expired and she demonstrated no effort to extend this, she moved back to the United States. The group lasted a short four weeks before the departure of its members. As a result, this research is based on a smaller sampling of data than originally anticipated.

Life at a shelter is one of true communal living. Women enter, often with their children and are assigned one room for their entire family, having to share beds with their children or if a woman arrives alone, shares with another woman. Common spaces include a sitting room where social worker consultations often occur, a family room usually filled with children watching cartoons, and a kitchen where the chores, group meeting posters and information regarding general survivor circumstances are posted. Although every effort has been made by the onsite workers to make the shelter feel like home, with the transitory nature and mandatory rules, it is four walls with a roof and temporary safety. The shelter's occupants are diverse in ethnicity, religious beliefs, languages spoken and age. But despite their diversity they share the same reason for referral – surviving domestic abuse.

Chosen Methodology's

The primary question being raised in this paper is how can drama therapy be used to aid women survivors of violence re-conceptualize identity? In order to address this question I will also be discussing what social influences, specific to the women in the group, have influenced their identity. My methodology is a hybrid of theoretical research and a group case study. The theoretical component is rooted in understanding violence, victimization, the effects of power and control, and trauma. The impact on identity will be outlined as experienced by the women and used to assess the healing art of drama therapy. Using this methodology the theory is the data, integrated to support the focus on identity and the therapeutic choices made. The research incorporates a synthesis of sources to better illustrate the development of the group process.

The second methodology chosen within the hybrid is a group case study. Contributions made from Ivy, Jennifer and Laura will be written as vignettes to exemplify how the drama therapy was utilized to explore identity. Most of the vignettes will focus on Laura's development as her contributions best illustrated the theory. Typically, a case study gathers information that is rich and detailed (Berg, 2004) however because of the group existing for such a brief period, the vignettes simply provide illustration for the reader. The drama therapy process resulted in the sharing of life experiences and since case studies focus on description, illustration and explanation (Berg) became essential in serving the research question. I have chosen this methodology as it allows description of the interventions used but also because it provides the reader with the thoughts, feelings and experiences of the participants' explorations of identity.

Research Participants

The fusion of theoretical and case study frames this research by capturing and communicating the participant's stories. Clients shared stories of psychological trauma in which the affliction of their abusers has left them feeling powerless (Herman, 2001). As a researcher at a women's shelter, I was responsible for providing a professional service respectful of the legal and civil rights of the women so all names and identifying information has been kept confidential. Upon containing consent I thoroughly read each client's case file to learn cultural, religious, and political differences in order to better understand their contributions. As well, in initial interviews each woman identified her own goals within the drama therapy group and I was able to share my research intentions. The correspondence of both goals ensured that constructive outcomes benefiting this community as well as my research objectives could be achieved.

Role of Researcher

The role of the researcher in theoretical research is to accurately collect texts in order to provide knowledge toward the given topic (Junge & Linesch, 1993). My role within this methodology also required I represent and analyze the emerging themes and links in order to present them comprehensively.

My work as a researcher within a case study was not to discover absolute truths, but to share a reality within a social scientific frame to build further understanding (Stake, 1995). In this research, the participants were made available through an agency, which required negotiations with individuals who managed the organizations. These gatekeepers manifested in many forms, as counselors, social workers, and family therapists. Once permission to begin research was granted, the women were required to give informed consent before participating. From a reflexive stance, it is worthwhile to

explain that throughout this research I simultaneously assumed the role of a therapist. I have been governed by supportive supervisors and consulted the National Association of Drama Therapy (NADT) code of ethics for clear boundaries on maintaining this dual role. Article 8 in the NADT Code of Ethics (2007) specified that drama therapy researchers respect the dignity and protect the welfare of participants in research. Its contents explained the implementation of ethical professionalism, informed consent, empathic neutrality and participant's rights.

Through exploration of the question posed, I hope to contribute to the growing field of drama therapy. This research aspires to demonstrate the power of how drama therapy can relieve emotional turmoil when suffering from violence and begin the rebuilding of an identity. Through this research I hope to contribute to the credibility of using drama therapy with women who are oppressed by violence.

The first chapter defines what is meant by the term violence when discussed in the context of domestic abuse, the cycle of domestic violence according to Lundberg-Love and Wilkerson (2006), and from the perspective of trauma theory the physiological effects of such violence. Chapter one also begins to explore the healing that occurred through the drama therapy. The second chapter explains the social construction of violence, more specifically, the victimization of women. Chapter two emphasizes the importance of the group process, the witness's influence on a positive identity. The third chapter explores identity, the selected component of study in this research, and the therapeutic applications of drama therapy. Each chapter will include vignettes from the women and the stories shared in the drama therapy group. A final chapter will discuss the perceived effects that the drama therapy process had with the women in the drama

therapy group. As well a presentation of the implications and suggestions for future drama therapy research and practice when working with this population.

Chapter 1

Understanding the Violence

Violence Against Women

In order to fully understand what is meant by the term domestic violence it is important to define all that this word encompasses. Violence against women is “aggressive behaviors that adversely and disproportionately affect women” (National Research Council, 1996, p.9). However, the term has been used to describe a range of acts. There are many possible manifestations of domestic violence. This research will focus on five forms specific to the women within the case study: financial, physical, psychological, sexual and verbal. Utilizing these five forms of violence, the abuser is able to control his partner. The forms of violence the abuser chooses to use in the attempt to control his victim do not necessarily follow a linear progression, or an escalating series of culminating attacks.

Financial violence occurs when the abuser forbids his victim to work, forces the victim to work beyond her capacity, by controlling her choice of work, refusal to inform her of the financial situation or withholding money from her (Provincial Reunification of Shelters and Transition Homes for Women Victims of Conjugal Violence, 2000). Often the abuser will deny his victim access to the finances and this impairs her self-sufficiency. Financial dependence often makes it difficult for a victim to leave their abuser.

Physical violence is an act carried out with the intention of causing physical pain to another person (National Research Council, 1996). This can range from punching,

strangling, slapping, or throwing objects. An abuser often resorts to physical violence when he feels the need to gain total control over his victim (Provincial Reunification of Shelters and Transition Homes for Women Victims of Conjugal Violence, 2000).

Psychological violence is “an ongoing process in which one individual systematically diminishes and destroys the inner self of another. The essential ideas, feelings, perceptions, and personality characteristics of the victim are constantly belittled. Eventually the victim begins to experience these aspects of the self as seriously eroded” (Burks, 2006, p.15). While working with women survivors’ of violence it often became evident that the abuser had robbed their sense of self. The abuser reflects back to his victim an image of uselessness, which diminishes the woman’s self-worth and identity (Provincial Reunification of Shelters and Transition Homes for Women Victims of Conjugal Violence, 2000).

Sexual violence is forced sexual activity including genital exposure, harassment, forced sexual touching, exposure to pornography and rape (Lundberg-Love & Ward, 2006). Sexual violence can often be the hardest for survivors to disclose; this form of violence destroys the choice and privacy of a woman’s sexuality – a piece of her identity.

Verbal violence can manifest in the form of screaming and shouting, threats, manipulation, blackmail or insults. The abuser succeeds control by instilling tension into his victim so that she is in a constant state of fear forced to abide by his demands in order to prevent further tension building or completion of threats and blackmail (Provincial Reunification of Shelters and Transition Homes for Women Victims of Conjugal Violence, 2000).

During the second group drama therapy session, I asked the women to define what abuse meant to them. Each woman was encouraged to write on a large sheet of paper her current understanding of what abuse meant to her and read aloud her contributions. Ivy, a woman who presented herself in the group with strength and assertiveness said, "Abuse is everything that monster did to me!" This activity allowed the women to dialogue about what they had suffered. Their responses indicated it was the first time they were asked how they felt about what happened to them.

The Cycle of Violence

Domestic violence distinguishes itself from other types of violence as it occurs between two partners invested in an emotional and sexual relationship. Domestic violence can occur within heterosexual and homosexual relationships, and either a man or a woman can take on the role of the abuser or the victim. However the research and discussion in this paper addresses domestic violence within heterosexual relationships, because this was the type of violence at the shelter, in which the man is the abuser and the woman is the victim. In these relationships the man takes on the role of the dominator maintaining control over his victim (Provincial Reunification of Shelters and Transition Homes for Women Victims of Conjugal Violence, 2000).

Lundberg-Love and Wilkerson (2006) identify a three-stage cycle that may be used to understand how the victim experiences the domestic violence and its effects. The *tension building stage* occurs after much loving in the courtship, yet the woman often senses something is wrong. The tension may consist of outbursts of rage, intimidating behavior, or threatening silences. This creates anxiety for the victim wondering what will happen next. *Acute-battering incident* is the second stage in which a violent act occurs that bursts the tension leaving the woman confused and in shock. The violent act may be

any one of the forms discussed above. The acts of violence are brief and the woman understands she cannot control them. These initial acts of aggression often leave the victim feeling angry and shameful. At this time the abuser begins justifying his behavior. He finds excuses and explanations for his violent acts. The victim often considers accepting the excuses, or doubts her own perceptions debating whether it was in fact an intentional violent act. The final stage is *absence of tension*; during this time the batterer apologizes for his acts of violence and reduces his behavior by ultimately putting the blame and guilt onto the woman. The woman often rationalizes the events that have just occurred by reflecting on the romance in the early courtship, which Laura, Ivy and Jennifer reminisced as *caring, honest, and full of sharing*. This reconciliation is accompanied by glimmers of hope that the abuser may change. This cycle is often repeated in domestic violent relationships (Lundberg-Love and Wilkerson, 2006).

The Effects of Domestic Violence and Remembering the Trauma

Judith Herman (2001) in her book *Trauma and Recovery* classifies trauma as “an affliction of the powerless” (p. 33). During trauma, events that involve threats to life or bodily integrity, the victim is made to feel helpless by an overwhelming force. The common denominator victim’s feel during trauma is loss of control (Herman). In domestic violence if an abuser inflicts acts of violence to maintain control over his victim, as explained in the cycle of violence above, domestic violence is trauma.

The ordinary human reaction to danger is a complex system of reactions that involves both the body and the mind. Threat arouses a person’s nervous system causing the person in danger to go into a state of alert (Herman, 2001). Threat also concentrates a person’s attention to the event and alters their ordinary perceptions – bringing on intense feelings of fear (Herman). These changes to arousal are the body’s normal way of

responding to threat and preparing for appropriate reaction. What happens to the body and mind when a person experiences a traumatic event? “Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning” (p. 33). Trauma forces accommodation, in which the individual modifies, established cognitive schemas in response to the disruptive environmental stimuli (Lubin & Johnson, 2008). Traumatic reactions occur when the human system of self-defense sees no action of availability and becomes overwhelmed and disorganized. When the victim is accommodating to their perpetrator the state of intense fear shatters operational thought (Lubin & Johnson) and begins to destroy the mental map that makes up who we are. Traumatic events produce lasting effects to arousal, emotion, cognition and memory. The victim of the traumatic event may experience various opposing emotions without a clear memory of the actual happenings (Herman, 2001). Laura demonstrated these opposing emotions while trying to recall events of the violence during the first session of the drama therapy group:

At the beginning of the first session Laura entered the playroom with a big smile on her face. She greeted the drama therapist and said, “I’m an artist and I am very interested in drama therapy to help restore the artistic side of myself”. She sat beside Ivy and they began chatting while waiting for Jennifer to arrive. Her affect was very positive and she seemed to have a bounce in her step. Her positive, relaxed attitude was not particularly usual at the crisis shelter.

As Jennifer entered the group I asked that the women form a circle, facing each other. As a warm-up to preface the story telling activities of the day’s session I asked each member to recite “I am..., I feel..., I want...” filling in the appropriate responses in

that moment. Laura volunteered to go after witnessing Ivy successfully complete the activity with authority. Laura began with hesitation and a soft voice. The happy, un-phased women whom entered the session a moment ago was no longer present. Laura thought about her responses for a long moment and finally said, "I am Laura, I feel blocked, and I want to be heard." Fighting tears she explained that her abuser had silenced her for so long. Laura began to cry with intense sadness and through the tears expressed she has been looking for a space to explain what has happened to her, to try and tell her story. As she cried, her eyes looking downward, she repeated the activity "I am Laura, I feel blocked, and I want to open up and be heard!" As the rest of women sat in an understanding silence Laura exhaled, looked up me and said, "I did it". Laura was beginning to tell the story of how her abuser made her feel blocked. The violence she endured was disconnected from her emotions and she was irritable and fragmented. Her voice had been ignored for six years and in the drama therapy session that day was asked to recall this experience, relieving the amnesia and allowing her emotions, cognition and memory to begin to tell. Through this activity Laura was able to identify feeling statements and begin to allow the recognition of her opposing feelings, something she had not done. This recognition began the acknowledgement of the trauma and its influence on the self.

After the traumatic experience has been lived the survivor is often left caught between negotiating the two extremes of amnesia or of reliving the trauma, between intense emotional moments and no feelings about the event at all (Herman, 2001). During a traumatic incident the victim will often separate elements of the events attempting to reduce the impact of the trauma (Rothschild, 2000). This process of dissociation often

involves the splitting of sequence and physiological reactions cutting off accessibility to emotions (Rothschild) By finding the narrative components of the traumatic experience and the psychological response one can bring the event back into consciousness to be worked through (Rothschild). Story telling can be a memory process. As we tell a story, we are putting together what we can recall of the experience – talking is remembering (Schank, 1995). “We need to tell someone else a story that describes our experience because the process of creating the story also creates the memory structure that will contain the gist of the story for the rest of our lives” (p. 115).

Each human being carries with them a collection of stories. These stories accumulate over a lifetime of experiences. When using drama therapy with women survivors of violence one must take into account the deep emotional wounds that exist from living under the constant threat of violence (Pierce, 2008). Drama therapy allows the opportunity to share and acknowledge what has happened to them and assist in the exploration, identification and expression of their losses, feelings, thoughts, needs and values (Pierce). The identification of feelings, thoughts and values is the building of an identity. In order to do so, survivors must break free of the fear, isolation, anger, resentment or shame felt during and after the violence. Drama therapy may involve the sharing of traumatic stories, which can be extremely powerful for survivors in order to gain an enlightened perspective.

Domestic violence can appear in many ways to maintain control over a victim. It is important to understand that the cycle of violence is an ongoing experience between the abuser and victim in which the violent acts are rationalized and the victim is left doubting her perceptions of the violence. The affliction of violence onto the victim

revolves around maintaining their control, and can be classified as traumatic. The victim sees no action of availability often overwhelmed by the events or repressing their occurrence. Drama therapy can serve to acknowledge what has happened and creates the space to explore all the associated emotions, as seen with Laura, who needed to recall the memories and accumulate them into identity pieces.

Chapter 2

The Social Construct

Victimization of Women

There is no single factor to explain the causes of domestic violence, or why its victims are particularly abused. Research has focused on the inter-relatedness of economic, cultural, legal and political factors attempting to profile the vulnerability of victims in domestic violent relationships (Khan, 2000). What is certain is an unequal power relation between the male and female, the role of the woman in the family, control over sexual intimacy, and a lifestyle that promotes the superiority of males (Khan).

Women's social victimization, that is violence against women enforcing male dominance, is a contributing factor of domestic violence. It is a process that unfortunately develops in societies where men are able to legitimize the use of violence. This legitimization is socially reinforced by an environment of fear and reduces women to a less powerful state. In Canada, women are taught from childhood to be concerned about their appearance and how others view them. Provincial Reunification (2006) suggests there are constant media and advertising reminders as to the importance of being attractive, youthful, and slim. Fashion and cosmetic industries within their advertising impose a specific model of femininity that enforces this phenomenon – and women suffer from the discriminating sexualization of their bodies. A woman's sense of her body has

not been hers to control in order to find her self but has been surveyed first through other's view of her body (Wykes & Gunter, 2005). As a result women are vulnerable to the opinions of others and this susceptibility can manifest itself within relationships between men and women. This particular form of victimization does not affect all women equally and has been argued largely by feminist theory (Frye, 1983; Jagger, 1995). Nevertheless, women victims involved in violent relationships often doubt their perceptions and the men are strengthened in their sense of entitlement.

During a group activity the women were invited to pass a foam "anger ball" around and express when they feel angry. Jennifer a usually resistant group member grabbed the foam ball with both hands and squeezed it rigidly, she took a deep breath strengthened her grasp of the anger ball and shared, "I get angry when people who should care, don't care." Jennifer released her grip and threw it to Laura; "I get angry when people don't listen to me". Laura tossed it to Ivy; "I get angry when people try to manipulate me". During this activity the women shared their feelings of victimization. Anger for these women was an emotion of self-protection. I observed that their anger had manifested because of the violence and victimization they had experienced. Rothschild (2000) explains that anger as a result of trauma can interfere with interpersonal relationships and be harmful to ones sense of self.

During the second week of the drama therapy group the women were asked by the drama therapist to define abuse. The women hesitated and seemed at a loss for words. The drama therapist wrote, "What is abuse?" on a large sheet of paper and put it down in front of the women. Laura picked up a purple marker and wrote "CONTROL". She then further explained that the man truly 'wears the pants' in violent relationships. She

shared, “when my ex would become abusive and it happened very often – mostly when he was high on cocaine or drunk, it was like he was negotiating between losing control and gaining control. His temper would flare and I knew he was losing control. The only way he thought he could regain control was by abusing me. He would threaten my life or throw objects at me. During the abuse he persistently wanted me to feel lower than him I often felt like I was drowning”.

In these situations of domination, the abuser becomes a powerful person in the life of the victim; Herman (2001) explains that the psychology of the victim is often shaped by the actions of the abuser. The male abuser will demand that his victim prove complete compliance by sacrificing her other relationships. Through the use of power and control the abuser instills fear, increased by episodes of violence in order to convince his victim that he is supreme, and that her survival rests upon agreeing to his indulgences and through total obedience (Herman).

Social Influences

The amount of control that women remain captive to during their violent relationships drastically impairs the foundations of what constitutes an identity (Herman, 2001). When the women of the drama therapy group were asked during initial interviews who the people were that influenced their self-descriptions, all identified the name of their abusers. “As an individual moves through life, the interpersonal interactions she engages in shape and guide her sense of self and her values in the world” (McLellan, 2009, p. 8). Getting to know the women in the drama therapy group was challenging, as there were multiple defenses to battle before genuine acquaintance occurred. It became obvious that there was a lack of trust in interpersonal relationships, which can be understood due to many of the relationships experienced in their lives having proven

dangerous. There is a significant amount of damage to the survivor's faith in others when the traumatic events she has endured existed because of the betrayal in an intimate relationship (Herman, 2001). Yalom (2005) emphasizes the importance of interpersonal relationships and their correlation to therapeutic effectiveness. "Change both at the behavioral level and at the deeper level of internalized images of past relationships does not occur primarily through interpretation and insight but through meaningful here-and-now relational experiences that disconfirms the client's pathogenic beliefs" (p. 27). In the immediate aftermath of the violence, rebuilding some form of trust and safety is of great importance. By having healthy encounters the women were able to see themselves in the eyes of another, which validated their genuine qualities and encouraged the rebuilding of the self.

Recovery of the disconnection from others can take place within the contexts of relationships (Herman, 2001), within groups. The capacity to choose new relationships restores a sense of identity, which helps the reformation of trust. Within the drama therapy group each woman shared her heart-wrenching stories of abuse, how she is coping now, how she views herself, the violence, and forgotten love. "As the survivor offers her story, the group bears witness and shares in her experience as a community, serving to contain the chaos and isolation of abuse" (McLellan, 2009, p. 8).

The Importance of the Witness in Drama Therapy

Active witnessing is understood in drama therapy as an important involvement in the healing of an identity (Jones, 2007). The capability for drama therapy to provide a means of exploration of the self is maximized when a person is able to have their journey witnessed by others. Active witnessing in a social construct provides acknowledgement and support for the storyteller.

Laura and Ivy entered the drama therapy room laughing together. They sat and continued talking about what was making them giggle profusely. As the check in began regarding how the past week had been both women answered together sharing they attended a festival in a local park. Laura told the group she felt great having a friend to go out with. Ivy shared the story of their wacky day involving not having enough money for the bus, and forced to walk all the way there. Two hours later they arrived to a sea of people playing music, eating food and dancing. Once they arrived and enjoyed the activities both were attracted to the mountain at the edge of the park. Together they decided to walk up the mountain. Another hour later when they finally reached the top, they sat down side by side. After each women had contributed her piece to the development of the story and they had laughed so hard their faces were red Laura said, "I think I am taking the control back in my life". She described that she can see the light at the end of the tunnel. I moved into the session's activities and explained to the women that today they would tell the story of what it was like to leave their abuser. Using a technique called the empty chair (Blatner, 1996) each woman was invited to put herself into a chair and tell herself what she had survived. Ivy agreed to go first. I helped her envision herself sitting in the chair – posture, clothes, and mood and then stood beside her while she told the story of how it felt to leave. She began, staring intensely at the chair, "Hi Ivy", I praised her courage, "You know you didn't deserve to be treated the way he treated you. You know you didn't deserve to be controlled the way he controlled you." Laura, who was sitting at the back of the room, got up and stood on Ivy's left side she began nodding and staring at the chair. Ivy continued, "Stop fearing loneliness Ivy, because you would rather be alone than unhappy right? And do not let that monster hold

the most precious gift of life, your son, above your head like bait. Do everything you can to get custody of him so you can look forward to life again.” This specific facilitation helped Ivy acknowledge the difficult story of leaving and strengthened the developing relationship with identity. Having social witnesses sharing similar stories granted the courage for Ivy to face herself.

Members of a cohesive group, like Laura and Ivy feel a sense of belonging, when individual group members value the group they can value, accept and support each other (Yalom, 2005). The drama therapist as a witness holds just as much importance as the group members. The way the drama therapist responds to the telling of stories needs to be so the trauma of the story is not relived. “The therapists way of dealing with the vividly present past would allow troubling experiences and modes of relating to others to be reworked and integrated” (Gersie, 1997, p. 201). The sense of belonging offered by group members and the therapist confirms the formation of identity. The telling of trauma in the context of the therapeutic space and the receiving of new responses allows for the reparation of once troubled relationships while building new healthy relationships (Gersie). This required that the drama therapist negotiate the regulation of intimacy and aggression, most obviously disrupted by the violence, and show tolerance for the woman’s needs for closeness and distance in her attempts to regain autonomy. Ivy and Laura often asked for hugs after an intense session whereas Jennifer maintained her distance as emotions arose. The drama therapy group encouraged the participants, with the help of the drama therapist and each other to rediscover a healthier inner viewpoint and promote a self-reflective stance on their lives. The relationships developed throughout the process, especially between Laura and Ivy, granted self-orienting

opportunities and strengthened the willingness to begin to tell once forbidden personal stories.

There is no single factor to identify what makes women vulnerable to violent relationships, however the victimization of women can be considered a societal contribution unintentionally serving the violence. Victims held captive by the power and controls of their abusers comply obediently often sacrificing themselves and all other relationships. This leads to severe mistrust in others because victim's problematic circumstances stem directly from intimate partner betrayal. The rebuilding of an identity can occur in group drama therapy by bearing witness to each other's stories. This allows for containment of the chaos and the opportunity for re-building of interpersonal relationships, a mirror to see the importance of oneself.

Chapter 3

Identity and the Therapeutic Application of Drama Therapy

In a domestic survival assessment, researchers found that a main factor included in readiness to change was self-identity (Dienemann et al., 2007). Dienemann and her colleagues developed the Domestic Violence Survivor Assessment (DVSA) to measure survivor movement toward a violence free life. The findings, after its implementation in a county agency for program evaluation, indicated psychotherapy as a comprehensive approach to assisting women survivors of violence. Further, that psychotherapy holds the potential to clarify identity, by facilitating the positive and negatives of the abusive relationship (Dienemann et al.). As explained abusers tend to attack their victims emotionally. The term 'emotional vampire' has been used to describe what the abuser does when they enter a room. They attempt to suck the emotional life-blood out of their victims (Burks, 2006). Most often women who have been battered by their partner have a

significantly harder acceptance of themselves (Hoff, 1990). Women victims can come to believe that they are unable to take the action to liberate and as a result become realigned with the idea that the violence is inevitable (Lundberg-Love & Wilkerson, 2006).

Survivors are vulnerable because their sense of self has been shattered. The survivor needs to rebuild a positive view of the self (Herman, 2001). “The re-creation of an ideal self involves the active exercise of imagination and fantasy” (p. 202). These capacities can be set free within the use of drama therapy.

Shedding the Victim Identity

In order for a client to offer experiences they need to be willing to share within the drama therapy. Life stories have natural breaks, pauses, gaps, and losses especially ones of traumas as explored above in Chapter One, Effects of Domestic Violence section. The importance lies in the need for connection, often manifesting in the playspace, between therapist and client, or client and client to render life’s happenings and non-happenings into a communicative form. “The facilitation of a client’s articulation of initially unspeakable experiences requires the establishment of an emotional space in which the inadequacy of words and sighs or groans is acknowledged and normalized” (Gersie, 1997, p. 202). The client’s attempts to share a story are therefore welcomed and supported.

I handed out a list of Haiku poems and asked the women to read through the list and find one that resonated with them. After a few moments the group members were ready to share which one they had chosen and provide an explanation as to why. Jennifer began seeming unusually eager, “A tree branch adrift, all those tangled banks upstream, and yet you are here” (Scatterhaiku, 2008). Jennifer told the group she couldn’t stand living in this communal home. Having to attend these meetings that didn’t help her, and

the only reason she is here is because of her children. But with all of this going on and the violent victimization she has endured "I know God is with me." Ivy told the group she chose the same poem, she read the poem aloud and then agreed with Jennifer. "I have to fight for custody of my son because he cannot be raised by that monster, I know God is with me in my journey." Jennifer and Ivy exchanged a hopeful look supported by their belief in the same God. Laura finished the activity, selecting a different poem. She read out loud "Homecoming: Nothing familiar, not these tracks, this place, this self, must find my way back" (Scatterhaiku). Laura began to cry, she sighed and tried to regain control as she explained her sense of loss in the world and her desire to finally find her own voice.

There is encouragement within the safety of drama to take space and speak one's own story without fear of threat, in an environment of reparation (Gersie, 1997). It is a difficult task, to tell, and explore problematic life stories. The facilitation and intervention choice should suggest active engagement in order to develop new ways of being (Gersie).

Often after a person has been a victim to violence and lived under a constant threat of trauma the imagination can become limited by a sense of helplessness (Herman, 2001). It requires courage to break free from the confining reality of being a victim she must dare to confront her fears. This part of recovery allows free reign, to trial and error, while admitting and tolerating mistakes (Herman). During the drama therapy group I invited the women to share their fears, with hesitation and much support the women admitted.

"I'm afraid of loneliness"

"I'm afraid for my son. Growing up in that environment and thinking treating women badly is alright"

"I'm afraid to find someone as abusive, just like him"

While inviting the women to renounce the parts of their selves that were wounded by the violence the drama therapist also allowed the space to dare to confront her wishes. This was facilitated through one on one dialogue and was spoken with ease.

"I wish to turn negatives into positives no matter what the situation"

"I wish to learn"

"I wish to be creative and spontaneous"

"I wish to be a loving and caring human being"

The women began to gain possession of themselves. These activities allowed for the survivor to shed her victim identity. While creating a space that put the women in a position of power the simple telling of fears and wishes allowed for an appreciation of newly developed transferable resources (Herman, 2001).

I Am Me

All of us have experiences, which we use to interpret and understand the events of our lives (Gersie, 1997). The use of drama therapy provides a container for the client to recount problematic events and process the retelling of still painful experiences. When we are given the opportunity to tell a story, we share how we thought, felt, and perceived the world. As a way to facilitate emotions the drama therapist asked the women to lie on the floor and listen to descriptions of fear and joy. These descriptions were taken from Richard Stone's *The Healing Art of Storytelling* (2004). I asked each woman to personally experience the feelings as the descriptions were read aloud. After the

descriptions were given, a sculpting exercise was led in order to explore the untold stories that emerged.

The drama therapist began the guided visualization, "It's impossible to live without fear, but it can also be the most crippling of emotions. What were your worst fears when you were growing up? (Pause) Were there things in your room that scared you? (Pause) Do you recall a time when you feared a specific thing?" (Pause) I asked the women to enter back into the play space and share their childhood fears. Laura volunteered to begin sculpting the image of her fearful memory. She molded the therapist into the role of fire, wild and spreading. She then sculpted herself as her childhood home - right in the line of the fire. The embodiment lasted a few moments and I asked her to step out of her role as the house as I stepped out of the role of the fire. She was invited to share the story of this image. Laura began to share that when she was a child she often dreamt that her house would be attacked by fire. We explored the dream together and assumed the sculpted tableau once more, this time switching roles. Suddenly Laura broke from the sculpture and very curiously looked at me, I encouragingly mirrored this emotion back to her. After a brief moment of contemplation Laura spoke, "I was thinking, after sharing this dream and embodying the element of fire...in my abusive relationship I was the role of the house". She explained further, that her ex boyfriend had a substance abuse problem that fueled the violence, which she then compared to the fire, and her (as the house) constant desire to protect him from "the fire". She admitted in that moment, for the first time in the group the unhealthiness of the relationship and acknowledged no longer wanting to live under the threat of the flames setting her on fire.

Through the metaphoric sculpture Laura was able to develop her own explanations and interpretations of her experience in an abusive relationship. She also developed the hope for a new course of action based on her insight gained from the new understanding of her story. This was made possible through the use of sculpting. Renée Emunah (1994) explains telling and provocative sculptures are not uncommon and assist in identification and communication of hard to reach stories. As the drama therapist I asked Laura to step outside of the scene in order to acknowledge each part and move toward acceptance of the sculpture. Through this coaching Laura was able to make revisions and examine the symbols of the house and fire. The examination included studying the dynamics between the characters in the sculpture and allowed her to visualize her hopes for inner change and self-acceptance.

The second guided visualization was exploring joy. "Running, playing, riding a bike, swimming, and even learning. What were the things that made you happy as a child? (Pause) What were your favorite pastimes? (Pause) Sports? Games? Imaginary journeys? Whom did you like to spend time with?" (Pause) Again I asked the women to rejoin the play space and share some joyful memories from their childhood. After sharing Laura asked the group if she could sculpt again – the other members agreed to be a supportive audience. Laura told the group that her favorite memory as a child was going to the family cottage. When she was there she would often perform outdoor plays. She explained that she demanded the attentiveness of her audiences, often comprised of her mother, father, and their friends. She began by sculpting the drama therapist into a wicked witch perched over her sculpted as a child holding a baby. After we stepped out of the tableau I asked questions about the wicked witch, the child and the baby. As Laura

answered she developed the understanding that the wicked witch was her stepmother. After her adoptive mother died when she was seven her father immediately married a family friend in attempt to provide his children with a mother figure. This new mother did not want to satisfy her assumed role and often ignored Laura's needs. The child in the tableau was her trying to protect the fragile baby – the memory of her mother. She realized that these plays she would dramatize as a child were her attempting to process her neglectful family life and the trauma of losing her mother. Laura shared a childhood experience that revealed the dynamics within her family; these familial influences largely shape who we become.

Drama therapy's potential for healing finds itself in many forms. Jo Salas (1999), co-founder of Playback theatre, urges that people need to have their stories told. "From the telling of stories comes our sense of identity, and our place in the world, and our compass of the world itself" (p.111). As seen in Laura's second sculpture, which was very deep and complex, an increased degree of self-revelation can occur. Drama therapy helps people to make sense of their lives, and to assimilate changes in the self and their identity (Reynolds & Vivat, 2006). In drama therapy stories are not just told in a liminal play space, they are re-told, worked through and manipulated for an end result that could not otherwise be experienced in real life. It is often only when we tell our stories of what has happened that some order can emerge from the plentiful details (Salas, 1999). Weaving personal experiences into stories, creates meaning, and restores a sense of belonging to our world (Salas).

Ownership of One's Identity

A closure activity facilitated at the end of each drama therapy session asked the women to journal regarding a specific theme that emerged from the group. The journaling exercises were often guided but not limited to questions asked by the drama therapist.

At the end of the third session each group member was asked to write in their journals about a time in their lives when they faced danger and triumphed over it and indicate what they think this says about them. After writing the drama therapist asked if anyone would like to share. After Ivy and Jennifer shared, Laura told us that when she found herself pregnant and alone at 21, much like her childhood dramatization protecting the little baby, she ordered God in her obvious time of need that if this were going to happen to her he would have to stick by her side throughout her journey as a mother and to help her be a better mother than she was given. She then shared that her son is now 21 and she is still close to him. She remembers feeling "powerful" in her order and as she reflects back on her capabilities as a mother feels proud.

Together the client and therapist construct or reconstruct an identity that acknowledges the core values and internal strengths of the client, restoring a sense of agency (White & Epston, 1990). Every person has many stories; some are about wellness or liberation and others about oppression or sadness. When a "problem saturated story" (p. 39) dominates, our view of the world is often only seen through this problematic lens. This process of working through with the client allows for knowledge of the self to form, and acts as a tool of empowerment toward re-conceptualizing a positive identity (White & Epston). Treating identity as a mental puzzle, resolvable by assembling various pieces of information.

Sharing within the drama therapy group process was facilitated using many different techniques. Halfway through the group process client's were asked to write letters to their future selves or to write about something they were looking forward to. Sharing between the client and therapist while being thoughtful of the meaning of past experiences can lay a foundation for the stories to come (McLellan, 2009). This encourages knowing who we were, who we are, and the potential of who we hope to become. After exploring the emotion of fear, recognizing defenses, externalizing understandings of love and abuse the women were given the opportunity to begin to identify who they hope to become. In the letter writing example below Jennifer chose to keep her letter private.

Laura wrote, "Dear Laura, I'm writing to you now to let you know how proud I've been seeing you grow. You have been through a lot and look at you now! The woman in you is beautiful and strong. You have become someone inspiring, positive. Just as being your real self."

Ivy wrote, "Being myself and taking chances. Change for the better and be the best mom I can be to my son! Love myself as well as others. Take care of me!"

Identifying future hopes, as in the letters above, enables the process of knowing oneself now in order to achieve the aspired. This acted as a form of empowerment, encouraging the creation of an intimate relationship with oneself (Reiter, 2009). The recording of thoughts and feelings is a testament to life experiences and allows for reflection and insights. Reiter explains that writing promotes mastery and containment, words on a page hold and release and contribute to cathartic expression. Writing in drama therapy allows for the attending to particulars of thought, conversation, and actions

(Gersie, 1997). Emunah (1994) emphasizes that drama therapy connects limitation to aspiration, the link between who we are now and who we want to be. These expressions contain not only our past and present selves, but allow room for the presence of our future selves for the potential to play with modifying our life script (Emunah).

Women victims of violence can come to believe that they belong in these violent relationships. This shattered sense of self can be repaired; the ideal self can be liberated within the power of taking ownership over ones identity. Establishing a space for the survivors to render the hard happenings of their lives sets the stage for the difficult task of re-constructing problematic life stories and looking to the future. This environment of reparation grants the permission to work through problematic thoughts, feelings and experiences. Drama therapy creates order of ones life, establishing a place in the world, an identity.

Chapter 4

Final Discussion

The purpose of this study was to describe the drama therapy process and its impact on identity conceptualization for survivors of domestic violence, allowing the reader to gain insight regarding treatment using this modality. With the use of the vignettes I was able to discuss how I perceived the experiences of the women during the brief time we spent together. Using drama therapy with women who experienced violence allowed for a reparative telling of traumatic life stories. Johnson (1987) outlined the usefulness of the creative arts therapies when treating trauma.

According to Johnson (1987),

Treatment of victims of psychological trauma involves a three-stage process: First, the patient needs to gain access in a safe and controlled way to the traumatic

memories, to overcome denial or amnesia of the events. Second, the patient needs to engage in a lengthy working-through process in which the trauma can be acknowledged, re-examined and conceptualized, resulting in a modification of its intensity. Third, the patient needs to rejoin the world of others through interaction with other trauma victims, to find forgiveness from others for what happened, and be able to go on with one's life. (p. 9)

This study supports his analysis of this process. Ivy, Jennifer and Laura entered the drama group victimized and defeated however throughout our process together began to find the forgiveness needed to re-conceptualize their identities. They were provided a space that allowed for the flooded, jumbled, imperfect tales to be told. The drama became the container to talk about the trauma, and each woman gained ownership and control over her own story allowing her own identity to begin to take shape. The working-through process was brief, however the sharing that occurred indicates the need and desire for this kind of outlet and supports identity as an aspect toward positive recovery. Lastly, the interpersonal relationships that developed through the witnessing of each other's stories became instrumental in rebuilding trust and seeing the importance of ones presence in the eyes of another.

Regarding future research, knowledgeable of this study's limitations, I would recommend a longer group process allowing the researcher and participants a more in-depth processing, one that could potentially declare efficacy. As Ivy once said during one of her difficult days, "This is not a sprint, it's a marathon". The use of a group case study provides detailed descriptions but these testimonies are not generalizable. With future studies in the field of qualitative drama therapy research perhaps a standardized

evaluation program could be administered measuring personal assessment of identity at the initiation and termination of the group evaluating any change.

My intention while selecting this research was to comprehensively represent the process of drama therapy and its link to identity. By providing a forum for sharing, drama became the artistic expression that allowed Ivy, Jennifer and Laura to eventually tell their stories of healing. My understanding is that drama therapy allowed for safe integration of violent pasts and the beginnings of re-conceptualizing – meaning making of present selves. What I witnessed was that drama therapy served as a vehicle, for the telling of personal stories that were either too traumatic to remember or that required every ounce of energy to forget, revealing lost parts of themselves. With each story told, a new piece of the identity puzzle was found. By no means did our brief process allow for the completion of the puzzle but all three women began the jigsaw.

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Appendix

Consent Letter of Information

Drama Therapy Student:

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Practicum Supervisor:

Academic Supervisor Jason Butler
 DTHY 623/4 – Section A
 Advanced Drama Therapy Practicum Supervision I &II

Background Information:

One of the ways creative arts therapy students learn how to be drama therapists is to write a research paper that includes case material and examples of creative work produced by clients during the drama therapy sessions. The purpose of doing this is to help them, as well as other students, to increase their knowledge and skill in giving drama therapy services to a variety of persons with different kinds of problems. The long-term goal is to better help individuals who enter into therapy with drama therapists in the future. Another way creative arts therapists learn is to video record a session to review their work with their supervisor. These recordings and the information in them is held confidential and deleted once viewed in supervision.

Permission:

As a student in the Master's in Creative Arts Therapies Program at Concordia University, I am asking you for permission to photograph and/or videotape your creative work. I am also asking for your permission to consult your appropriate file for the duration of the therapy.

Confidentiality:

Because this information is of a personal nature, it is understood that your confidentiality will be respected in every way possible. Neither your name, the name of the setting where the drama therapy took place, nor any identifying information will be divulged. Any example of your artistic work will be completely anonymous and your identity will not be revealed.

Advantages and Disadvantages:

To my knowledge, this permission will not cause you any personal inconvenience or advantages. Whether or not you give your consent will have no effect on your involvement in the drama therapy or any other aspect of your treatment. Also, you may withdraw your consent at any time with no consequences and without giving any explanation. To do this, or if you have any questions, you may contact my supervisor.

Appendix

Consent Signing Form

Authorization for photography, moving pictures, tape recordings, etc. related to Creative Arts Therapies.

I, _____

Authorize _____ Chlöe Frisina _____

To take any: (circle appropriately)

- | | | |
|-------------------|-----|----|
| • Photographs | Yes | No |
| • Movies | Yes | No |
| • Tape recordings | Yes | No |
| • Artwork | Yes | No |

Which faculty deem appropriate, and utilize and publish them for medical, scientific and educational purposes, provided that reasonable precautions are taken to conserve anonymity. One hour recording which will be used for supervision this Fall semester (September 2009-December 2009) will be deleted following viewing.

However I have the following restriction(s): (please list if necessary)

Signature of Client

Date:

Signature of Witness

Date: