

The Time to Say Goodbye: Lived Experience of Forced Termination from a Drama Therapy
Perspective

Weng Ian (Jojo), Lam

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

Montreal, Quebec, Canada

9th May 2017

© Weng Ian Lam 2017

CONCORDIA UNIVERSITY

School of Graduate Studies

This research paper prepared

By: Weng Ian Lam

Entitled: The Time to Say Goodbye: Lived Experience of Forced Termination from a
Drama Therapy Perspective

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:

Jason D. Butler, PhD, RDT/BCT

Department Chair:

Yehudit Silverman M.A., DTR, RDT

May, 2017

ABSTRACT

The Time to Say Goodbye: Lived Experience of Forced Termination from a Drama Therapy Perspective

Weng Ian (Jojo), Lam

This phenomenological study looked into the lived experiences of drama therapists during forced termination in therapy. Through in-depth interviews, it aimed to understand how forced termination impacts both the therapist and client, from the therapist's perspective, and how drama therapists handle the termination process. The study illustrated that handling termination can be a challenging process for the therapists, where a lot of complex emotions arise. So, in order to facilitate better termination, thoughtful planning and self-care are needed to better prepare oneself to go through the process. Moreover, negotiating between professional boundaries and personal boundaries appeared to be an essential practice while handling the ending with clients. Finally, drama/creative art therapy interventions are found to be helpful in processing the difficult feelings and wrapping up the therapeutic process.

ACKNOWLEDGEMENTS

I want to offer my sincere gratitude to my clients. They motivate me to keep learning and growing as a better therapist.

I want to offer a special and deep gratitude to my research supervisor, Jason D. Butler, to have my back along the research journey, with his affirming smile and inspiring comments to keep me rolling.

I want to offer a big thanks to my research participants, who share their valuable stories with me. I am truly grateful to have these important conversations, which has soothed me and also helped me to deeply reflect on my work.

I want to thank my dear teachers in the faculty who are supporting, understanding and warm. A big thanks to your guidance, care, and playfulness.

A special thanks to my dear cohort and my friends for their understanding and support on this path, the hugs and the hands on my shoulder mean a lot.

Thanks to my lovely family to support my decision to study aboard, and have faith in me. I love you.

Table of Contents

List of Figures	vi
Chapter 1. Introduction	1
Chapter 2: Literature Review	4
FORCED TERMINATION IN PSYCHOTHERAPY	4
FEELING EXPERIENCED BY THE CLIENTS.....	4
FEELING EXPERIENCED BY THE THERAPIST	5
DRAMA THERAPY AND TERMINATION.....	6
HANDLING TERMINATION.....	7
Chapter 3: Study Design	10
METHODOLOGY.....	10
PARTICIPANTS.....	11
DATA COLLECTION.....	12
DATA ANALYSIS.....	12
ETHICAL CONSIDERATIONS	13
MAINTAINING QUALITY.....	13
Chapter 4: Findings	16
PERCEIVED CLIENT S' RESPONSES AND PERCEPTIONS.....	16
THERAPIST S' RESPONSES AND PERCEPTIONS	18
HANDLING TERMINATION.....	22
SELF-CARE.....	27
POST TERMINATION THOUGHTS	28
Chapter 5: Discussion	30
SELF-REFLECTION	31
Chapter 6: Limitation and Future Recommendation	33
References	34
Appendix A.....	38
Appendix B.....	41

List of Figures

Figure 1. Overview of the lived experienced in forced termination from a drama therapy perspective.

Figure 2. An overview of the therapists' responses and perceptions in forced termination.

Figure 3. An overview of the therapist handling forced termination.

Chapter 1. Introduction

Forced termination refers to the termination initiated by the therapist because of extra-therapeutic parameters, such as trainee therapists with limited time in internship, clients' limited insurance coverage, short term limited psychotherapy, therapist changing job, therapist having health issues, and therapist's retirement. There is literature that explains how to handle ending in psychotherapy on a theoretical level (Råbu, Binder, & Haavind, 2016). However, descriptive studies that explore the experience during the forced termination process are rare (Roe, 2006; Siebold, 1991), and there even fewer studies that employ the therapist's perspective on this particular exploration (Novick, 1997). Therapy is usually a deep and intimate relationship and that is why made it difficult when it has to come to an end. However, we know from the literature that termination is a powerful moment in the therapy process because many strong emotions come up from both parties and it is also a potential moment for important personal growth (Bostic, Ed, Shadid, & Blotcky, 1996; Chernus & Chernus, 2015; Novick, 1997; Quintana, 1993; Roe, 2006; Seritan, 2005).

I have worked as a talk psychotherapist in my hometown in China before I left to Canada for further studies. Therefore, I have encountered an intense forced termination process before. During forced termination, therapists, who usually have more than one client, can be very emotionally loaded while ending many relationships at the same time. I have become more aware of the great impact of this act on myself as well as I had clients who have great emotional vulnerability to loss. Many therapists in training indicate an inadequacy and frustration when it comes to the preparation of forced termination; however, some also expressed the experience as a catalyst for motivation and heightened focus in the therapy process (Zuckerman & Mitchell, 2004). Similar to the therapists in training, the unsettled feeling left with the prior termination process has motivated me to understand more about the forced termination process from others' experience as a source of learning as well as self-reflection.

Being a young therapist, I understand the importance of self-reflection as a way to better inform my future practice. The competency of handling forced termination process increases with practice and years of experiences (Bostic et al., 1996). So, I have realized the need to share the experience of this final process in psychotherapy with other emerging or new mental health practitioners, in order to better facilitate termination in drama therapy, or even psychotherapy in general. Through an in-depth understanding from others' experiences, new therapists can have a

clearer picture and get better informed about the experience and feelings that can possibly arise. It is an intense process with complex emotions and previous literature also emphasizes the countertransference that therapists can encounter. Through gaining experiences from others' practice, young therapists may be able to better facilitate this ending process, and to obtain a better self-care and psychological wellbeing. Self-care is essential to mental health practitioner as Baum (2007) found that the perceived efficacy of termination is closely related to the therapist's feeling at the end of the process, i.e. a more positive self-feeling indicates a more satisfied termination process with clients.

Having a previous background in traditional talk psychotherapy and being an emerging drama therapist, I am very interested in knowing more about the termination process in drama therapy. The current literature regarding termination in therapy mainly comes from a psychoanalytic perspective (Fragkiadaki & Strauss, 2012; Novick, 1997; Novick & Novick, 2006). Răbu et al. (2016) indicated that the agreement between the therapist and the client about an end in therapy seems to be an embodied, sensed affect, rather than a use of meta-communication or argument, meaning that the feelings during termination are processed more indirectly rather than directly through extensive discussion. So I further wonder if the use of drama therapy techniques, e.g. role-reversal, future projection, projective play, and dramatic ritual, will bring out any different experiences in the termination process. Landy (1991) pointed out that it is helpful to bring in distance to explore difficult emotional topics with roles when the whole body is involved in emotional expression. More importantly, there is a lack of studies that specifically explore the termination process in drama therapy. When initially searching through the psychology related database for study related to "termination" and "drama therapy," it yields only a few studies and they focus on the whole therapeutic process, e.g. case study, rather than specifically on the termination process. More importantly, when a termination is not handled properly, it is likely to ruin the therapy progress, or even results in more destructive consequences for the client (Novick & Novick, 2006; Murdin, 2015). Besides, the therapists are likely to experience distress when a termination is not well handled (Murdin, 2015). So there is a need to explore and understand more about the ending process in this specific profession. The stories gathered in this study may better inform the mental health field if any drama therapy intervention is found useful in aiding the ending process; if it does, it may also open up a gate into future research regarding termination.

The exploration of forced termination in this phenomenological study focuses more on the unpredictable and abrupt ending initiated by the therapist which may include the therapist changing jobs, the changes in systems or institutions, the therapist having health issues, or the therapist's retirement. The study tries to understand the experience through the lens of the practitioners to explore the feelings and memories from the previous termination processes. There was an in-depth interview to understand how forced termination impacts both the therapist and client, from the therapist's perspective. Through the exploration, it was also possible to examine if there is any similarity or difference in the experience of the drama therapy and the traditional talk therapy approach through comparing the data from this study and the previous literature on the traditional talk therapy approach. Therefore, the following primary question was to be explored in a greater depth in this study:

- What is the lived experience of drama therapists during forced termination in therapy?

There are some subsequent questions following this central question, and some of them include:

- How do drama therapists experience countertransference during the forced termination?
- How do drama therapists explore transference and countertransference in the forced termination using the drama therapy techniques?

Chapter 2: Literature Review

Forced Termination in Psychotherapy

Novick (1997) mentioned that the number of mutual terminations is very small compared to forced terminations in the real world. Sometimes, therapy ends abruptly when clients do not feel ready and get too intimidated with the therapeutic process, yet there are times when termination is initiated by the therapist when the therapeutic goal is not yet met, and it is defined as forced termination (Joyce, Piper, Ogrodniczuk, & Klein, 2007). Forced termination is a termination initiated by the therapist because of extra-therapeutic parameter that often introduces tension into the therapist-client relationship (Bostic et al., 1996). The word “termination” carries negative connotation and sends out unpleasant feeling (Maples & Walker, 2014) because the word ‘terminal’ refers to death (Novick, 1997), yet it can be something more than an end in psychotherapy (Quintana, 1993). Quintana (1993) described it as a process that contains both crisis and potentials for personal growth and development.

It is similar to a crisis with many unstable factors as Bostic et al. (1996) compared the termination process with Kubler-Ross (1969) mourning stages, where there is much emotional distress related to denial, anger, depression, and bargaining. On the other hand, Corr (2015) emphasized that one needs to be extremely careful when applying the stage-based theory because every grieving process is unique and does not necessarily follows the same staging sequence; Copp (1998) further added that it is a multi-dimensional experience when the impact does not only happen psychologically, but physically, spiritually, and interpersonally. However, when seeing termination with the mourning stages, it can also be a powerful growth process if the clients can move to the acceptance stage, as optimally it guides them to become autonomous through gaining self-knowledge, emotional strength, and the ability to recognize and express the inner feelings (Roe, 2006). Murdin (2015) described the pain experienced during termination as a key for one to cope with bereavement. Hudgins (2013) referred to the termination as a process for empowerment, when the client successfully incorporates tools acquired in the therapy to his/her own life, and decreasing the dependence on the therapist. It is a stage of gaining independence and growth, when clients experience positive feeling during the final process (Roe, 2006).

Feeling Experienced by the Clients

According to the definition of forced termination in this study, it is a decision initiated by

the therapist, so clients are usually put in a more vulnerable situation. Bostic et al. (1996) described some common responses to termination process include anger, anxiety, finding substitute objects, desire for premature closure and acting out. These responses are signs of distress. Clients experience negative feelings as they are losing a meaningful relationship (Roe, 2006). For some vulnerable clients who have encountered big or early traumas, the emotions during the termination process can be very complex with feeling of unbearable loss, rage, guilt and betrayal (Chernus & Chernus, 2015). The feeling of loss during the forced termination induces a mixed feeling of fear and rage (Murdin, 2015). Sometimes when a feeling is not expressed directly, it may take the form of somatization and passive fantasies and behaviours (Novick & Novick, 2006). These painful feelings can also be defended against by avoidance, which can lower the intensity of the pain, yet possibly losing a valuable therapeutic opportunity (Bostic et al., 1996). On the other hand, clients who feel safe and supported in the therapy space, and are able to process their struggles during the termination process report a better termination experience; the reciprocal acceptance of sadness during this vulnerable moment can transform the sense of abandonment, rage, and devaluation in the clients into an insightful moment of being understood and appreciated (Roe, 2006).

Feeling Experienced by the Therapist

Not only the client, but also the therapist can be affected in the termination process. Felton (1983) mentioned that it is possible for the client and therapist to reenact their own painful family drama during the termination process. Forced termination can possibly activate the early traumatic experiences of separations and losses in the clients, but it is also important for the therapist to be aware of the countertransference being triggered (Siebold, 1991; 2007; Seritan, 2005; Bostic et al., 1996; Fragkiadaki & Strauss, 2012; Chernus & Chernus, 2015). The countertransference experienced in the ending process may bring the therapist to deny their importance to the clients, to shift away from distressing or painful topics, to speed up the final process, not to address or follow up with missed appointments, to bring up previously unsettled issues, to expect specific feeling arising from the clients etc. (Bostic et al., 1996). Joyce et al., (2007) indicated that therapists also experience guilt, as they feel responsible for the clients' negative feelings and behaviours. Furthermore, Novick (1997) described the therapists' fantasy of having a transformed and more equal relationship, such as friendship or even intimate relationship with the clients after termination. While the therapist may also experience distress

and fantasy materials related to the termination process, personal therapy or supervision is highly beneficial to the well being of psychotherapist during the final process (Fragkiadaki & Strauss, 2012; Novick, 1997).

Drama Therapy and Termination

Jones (2007) mentioned that theater and drama are essential to our everyday life, and the drama itself contains a powerful healing potential. Drama therapy can be offered as an individual or group therapy and it is practiced widely in various setting, such as hospital, clinic, school, community center, rehabilitation center, and prison etc. The North American Drama Therapy Association refers to drama therapy on their official website as:

Drama Therapy is an active, experiential approach to facilitating change. Through storytelling, projective play, purposeful improvisation, and performance, participants are invited to rehearse desired behaviors, practice being in relationship, expand and find flexibility between life roles, and perform the change they wish to be and see in the world. (North American Drama Therapy Association, n.d.)

Drama therapy is rooted from multi-disciplinary sources, and the core conceptual sources include theater, psychodrama, dramatic play, dramatic ritual, and role-play (Emunah, 1994). Some of the techniques that could possibly aid the termination process among these five major sources will be discussed below.

Projective play. Play is fundamental to the lives of children and Erikson (1950, as cited in Emunah, 1994) refers to play as having the “auto-therapeutic nature.” Projective play projects a dramatic scenario using objects like dolls, puppet, toys and mask because it can provide a greater distance for the exploration (Landy, 1986). The greater distance often provides a safe boundary for individuals to explore highly threatening material or intense emotions (Emunah, 1994). As a result, the projective play technique can be a useful intervention during the termination process to explore the difficult emotions using a safer distance.

Role-reversal. This is a technique from psychodrama that uses role-playing. A new perspective can be obtained through the act of role reversal when one allows him/herself to see things through the others’ eyes, allowing empathy and mutual understanding to be developed and enhanced (Dayton, 2005). If this technique is used in the termination process, clients and therapist can possibly increase the understanding and empathy of one another, and because of this, they may be able to explore and process the hidden thoughts and feelings through taking on

the other's role.

Future projection. This is also a technique from psychodrama. It enables one to play out a future scene that s/he experiences with distress or excitement, it is also a rehearsal of one's future life so that s/he can reduce anxiety through learning to make better choices or trying different future options (Dayton, 2005). Using future projection in termination may be effective to lower the client's anxiety in separation. It may also serve as a way for the client to gain hope and to become more independent.

Dramatic ritual. In drama therapy, clients create a drama ritual through pattern and content of their own experience; dramatic ritual can be referred to the use of enactment to handle distressful experiences, and the experience of creating a ritual can help clients to contain or transform a problematic relationship (Jones, 2007). When used at the end of a therapeutic process, it helps clients to review and evaluate the process, give feedback, experience accomplishment, and express both joy and sadness during the end of the process; and more importantly it helps clients to communicate messages that cannot be expressed through words alone (Emunah, 1994). Therefore, it may enable the client to have a more structured way to contain and resolve the difficult feeling regarding the ending process.

Handling Termination

Therapists can take on an active role to work with clients to facilitate a good enough termination experience possible (Hudgins, 2013). As separation is very painful for some clients, they may interpret that the therapist is leaving them for something more preferred, and this thought will possibly trigger the painful feeling and the defense utilized for previous traumatic experience (Bostic et al., 1996). Some therapists attempt to work through this trauma by offering more adaptive defenses, and to differentiate the present from the past experiences that may enhance the client's capacity to integrate the good and bad part of the therapist, i.e. the caring and the abandoning part (Bostic et al., 1996).

Talk psychotherapy. Siebold (1991) emphasized the need to address the transference and countertransference factors because it can further complicate the termination process if left unaddressed. So, personal sharing and being transparent about the feelings experienced is important in the ending process. However, it is significant to consider the clients' best interest while sharing. For example, in Siebold (1991)'s practice, the act to share her personal future plan with her clients is not related to the guilt, but a thoughtful disclosure for the clients' best interest.

As it is important to maintain a strong alliance towards the ending process for the client to preserve the gains in therapy (Råbu et al., 2016), the therapist may disclose something about him/herself to the client to present oneself as an authentic person in the relationship (Fragkiadaki & Strauss, 2012).

Novick and Novick (2006) also suggested a few things for the therapist to process internally when dealing with the termination with clients; the suggestions include allowing the client to mourn, dealing with one's own sense of loss, and being reflective to avoid sudden change or putting extra pressure on the relationship. On the other hand, Bostic et al. (1996) mentioned the way therapists frame the ending process is also important to lead the client to regard the process more positively. For example, instead of describing the ending like "not finishing together," the therapist can put it as "accomplishing a piece of work" to encourage the continuation of growth. It is a process of consolidation rather than termination (Maples & Walker, 2014). The therapist can also frame it as a continuous process of growth after the last session, through constant reflection of the work done together.

Drama therapy. It stems from multidisciplinary sources and may serve as a useful intervention on top of the psychoanalytic theories for terminating a therapeutic relationship. Although studies on drama therapy that explore the termination process are sparse, there are several studies that briefly described how to aid the clients during the ending process. While handling the termination process with a group in a psychiatric facility, Emunah (1983) invited the participants to develop skits from two simple lines "I have to go" and "I need you to stay," Emunah stated that the developed scenes could prepare the clients to confront the situation after they leave the facility. Starr and Weisz (1989) described psychodrama as a powerful tool to prepare clients for termination, examples such as future projection, mirror and behind the back were suggested. Aside from future projection that is described before, both mirror and behind the back help to facilitate a review of the process by creating scenes where clients are able to witness their changes before and after entering therapy from the other members' perspectives (Starr & Weisz, 1989). Cedar, Crockford, Elias and Jackson (2015) made use of art making for processing termination with a four-year drama therapy project with older adults, a group book was made by assembling the photos taken when the clients developed their stories and characters with props and costumes towards the end of the process. At times, performance was made at the end of the therapeutic process by integrating the scenes that have been developed (Dix, 2015). Oon (2010)

brought up the use of fictional roles with a little girl during termination to explore and resolve difficult issues.

The studies above show some examples of how drama therapist handle the ending process, yet the processes are not described in detail and the examples given are not specifically talking about forced termination. Therefore, more in-depth materials regarding the forced termination process in drama therapy will be explored in this study to offer a rich descriptive phenomenon.

Chapter 3: Study Design

Methodology

The study employed a qualitative phenomenological approach to understand the process of the experience through face-to-face interviews with two drama therapists to describe the lived experience of the forced termination process. A phenomenological approach is adopted to elicit rich and in-depth information of the lived experience (Creswell, 2014). Although Halling, Kunz, and Rowe (1994) discussed the potential distortion or self-deception of the participants during the interview to ameliorate their influence on the study, and Creswell (2014) also mentioned the data collected through interview is indirect and filtered through the view of participants, Halling et.al (1994) concluded the phenomenological method as follows:

This method is a profound avenue to experiencing knowing as a communal activity—an activity that has at its heart the respect for the other and the phenomenon and gives rise to knowledge that is shared and that brings us together. It overcomes, in a large measure, the dichotomy between the classroom and the outside world, between research and lived experience, and between research and clinical practice. (p. 128)

van Manen (2016) mentioned that human experience could hardly be captured adequately through scientific methods, objectifying themes, and the laws of logics. van Manen (2016) further explained “phenomenology is a core component of development in the professional human sciences, in many countries on most continents” (A Phenomenology of Phenomenology, para. 2) and it is a “meaning-giving method of inquiry” (Hermeneutic Phenomenology is a Method, para. 7). Therefore, this method is chosen as an effective way to spread the knowledge to other mental health fields. Moreover, since the forced termination process has shown to illicit complex emotions in both the therapist and the client, the use of phenomenological research is important in this study as it returns to the psychological matter with an open attitude to capture the lived experience with richness and complexity (Wertz, 2005). Furthermore, van Manen (1997) indicated the essence of phenomenon as follows:

The phenomenological inquiry is not unlike an artistic endeavour, a creative attempt to somehow capture a certain phenomenon of life in a linguistic description that is both holistic and sensitive. (p. 39)

Therefore, this approach is specifically chosen to explore the lived experience of the drama therapy process as Jones (2007) describes phenomenology as “a way of creating dialogues

between philosophy, theory and practice in dramatherapy” (p. 71). Phenomenological inquiry and the drama therapy process appear to intertwine on many levels. Jones (2007) pointed out that drama therapy also adopts an integrative approach with arts and science in a transformative manner. The two fields share some core values such as holism, creativity, and they seem to be a good fit together.

Participants

In order to foster a deep and reflexive experience during the interview process (Fragkiadaki & Strauss, 2012), qualified practitioners, Registered Drama Therapist (RDT) from the North American Drama Therapy Association (NADTA), with more than 5 years working experience were invited to participate in this study. It was a convenient sampling and the participants were self-selected. Two drama therapists who have experienced abrupt forced termination in a non-school setting were recruited through personal email invitation. In general, therapists experience a lot of forced terminations in schools because the therapy process usually ends with the ending of the school year, which is more expected. Therefore, a non-school setting was chosen because the forced termination process is more unexpected and possibly evokes more difficult feelings. The participants were invited to meet individually to explain the project and obtained informed consent (see Appendix A), followed by a one-to-one semi-structured interview. If participants did not feel comfortable answering some of the questions, they would have the right to say no, or stop the interview at any time. The rights were clarified prior to the interview process, during the explanation of the consent form. The interviewing process lasted around 60 minutes.

The two drama therapists interviewed come from different backgrounds, as they work with different populations and use different approaches in therapy. One works with people, including children, teenagers and adults, and families, who have experienced traumas using the trauma-informed approach and developmental transformation (DvT), which is a specific approach in drama therapy. The other works with children and teenagers using both drama therapy and the non-directive play therapy approach. More importantly, the forced terminations they have experienced are also different. One had forced terminations with clients because there were changes in the system and she was forced to leave the agency. Although she had to leave, she continues working as a drama therapist after being switched to another agency. The other had forced terminations with clients because of a personal goal, and there was a change in identity from a therapist to another role.

Data Collection

The interview is a process for phenomenological reduction, and it stays genuinely descriptive rather than hypotheses testing (Wertz, 2005). The interview was carried out on a one-to-one basis, and it was semi-structured. It started from four close-ended questions to gather some background information, followed by a few open-ended questions to elicit stories from the participants (Creswell, 2014). There was an interview guide to assist with the process (see Appendix B). The interviewer was the researcher in this study. One interview took place in a classroom in a university setting, and the other interview was carried via the Internet. In both cases, confidentiality was assured. The interviewing techniques and skills that Jack (1999) introduced was adopted in the process, the techniques include open listening with focused awareness, and attend to the processes of thoughts of their participants, in order to detail the variety and richness of the stories of the participants. Moreover, reflexive bracketing was practiced during the inquiry process to monitor the preconception and assumption of the researcher (Gearing, 2004). Gearing (2004), Kong et al., (2003) and Motari (2008) stated that it is essential for researchers to be reflexive to acknowledge their suppositions and are consciously aware of how they can influence on the phenomenon during interview. The whole interview process was audio recorded for transcription and data analysis. The two interviews were separated into two transcripts, i.e. transcript A and transcript B.

Data Analysis

The audiotaped interview was transcribed verbatim for the data analysis. Then, a thematic network analysis was carried with the transcription. Attridge-Stirling (2001) summarized thematic network analysis to three main stages, 1) the reduction or breakdown of the text; 2) the exploration of the text; and 3) the integration of the exploration. In the first stage, the data were organized and aggregated into a small number of themes, i.e. the data were organized and categorized into small chunks to describe the essence of the lived experience (Creswell, 2014), the chunks of data were then identified to different themes, and the themes were arranged and organized to form a network (Attridge-Stirling, 2001). In the second stage, the themes were further analyzed to see if there was any interconnection, even implicitly, that were present in all the protocols and networks; in the third stage, the networks were synthesized to form a rich narratives for the experience (Attridge-Stirling, 2001; Wertz, 2005). The data and findings were discussed with the research supervisor of the study to gain more objectivity through having more

than one perspective to expand the vision. The data were described to show the lived experience during the forced termination process from the two drama therapists' perspectives. Through the data analysis, I have had a more thorough understanding of the stories of how drama therapists experienced the forced termination process, such as the emotional experience in the ending process, and the intervention they used to process the countertransference. Also, by looking at both the current literature about force termination process, which focuses more on psychoanalytic perspective, and the data of this study, there was a deeper understanding of any similarities and differences from the two approaches.

Ethical Considerations

Interview process. Since the participants could potentially disclose information about their client population, they were reminded in the beginning of the interview to use pseudonyms for describing any client interactions and to not share any identifying information. Some emotions arose in the interview process, which is normal for the phenomenon explored. Both participants appeared to be emotionally intact after the interviews. Also, when the participant talked about things that were not relevant to the study, they were redirected and the information mentioned was not included in the research.

Data protection. The interviews were audio recorded and the audio files were stored in a portable hard disk at the researcher's home with password protection. The identity of the participants was protected with pseudonyms, and only the primary researcher and the supervisor have the access to the participants' identity. As the entire recording was transcribed, the audio recording has been destroyed, and the transcription will be destroyed five years after the end of the study. Research participants have the right to review the transcript of their own when requested, and the right was explained at the end of the interview. As direct quotes from the interview were included in the study, the participants were invited to read over them before completing. Both respondents requested to have a look on the quotes and personal information chosen for this study. The study adheres to the North America Drama Therapy Code of Ethics (Sept, 2013) and was approved by the Research Ethic Unit at Concordia University, Montreal, Canada.

Maintaining Quality

I have previous training in talk psychotherapy, and am now receiving training in drama therapy. With my personal training background, I have my prior assumption that the experiences

of termination in drama therapy would be different than those in talk therapy. I have imagined it to be different mainly because of the new exposure to my current training and my fantasy regarding the drama therapy process, when some therapeutic tools such as role-play and embodiment are incorporated in the termination process. I believe in drama therapy, as the use of body and the form of expression has helped me to express many suppressed and hidden feelings, and has fostered my personal growth. However, this is my inclination towards drama therapy and personal bias. I was aware of this bias as the experience varies according to individual differences. My second assumption is related to my previous termination process as a talk therapist and the recent termination process as a drama therapy intern. Being a new mental health practitioner and my prior experience of terminating many clients at the same time, I have encountered many unsettled and difficult feelings during the forced ending process. Therefore, I assume most therapists would experience similar feelings like me during the forced termination. However, I understand everyone and every process is different, and not every therapist necessarily experiences uneasy or unsettle feeling during termination. This is my own bias.

Some of my difficult feelings in previous termination arose during the interview process when hearing stories from the participants, and during data analysis. However, I have tried to be reflexive and bracketed my own difficult feelings during the interview by being aware of my emotional state, consciously brought my attention back to the story once I was drifted away by the emotions. The difficult emotions that arose were kept for later processing via an art journal to ensure the quality of the study. In the data analysis, I took a break either drew on the art journal or did meditation, when there was too much difficult emotion arising.

I kept these possible biases in mind, as I was the researcher, the interviewer and the one to analysis and interpret the data. Therefore, I was careful of my own assumptions and biases during the whole research process, minimizing the confounding factors on the data and the interpretations. In order to minimize my bias and to manage my subjectivity, I had practiced to be reflexive, meaning to incorporate different concepts, including research ethics, reflexivity, transparency, and cultural review (Gearing, 2004). I kept an art journal for self-reflection (Morrow, 2005). In the journal, I recorded my thoughts, emotion and biases that have arose during the interviews and data analysis in order to bring up self-awareness. Drawing on the journal has made me more aware of my own emotions and biases, thus allowing me to better bracket the difficult feelings, and become more careful in data analysis. Moreover, the analysis

of the data was discussed with the research supervisor to obtain a more objective point of view.

Chapter 4: Findings

The stories from the interviews are categorized into five main themes, including the perceived clients' responses and perception, the therapist responses and perception, self-care, handling termination, and post termination thoughts. There are some interconnections found among these five themes (see Figure 1). The figure is a flow chart showing that the therapists' perceived responses and perceptions from the clients possibly influence the therapists' response and perception in the termination experience. Importantly, the way therapists perceived in the termination process can also influence how they handle termination with their clients. However, self-care appears to be an important key to mediate between the therapists' perception and the way they handle termination. After handling the termination process, there follows the post termination thoughts, where the therapists have reflections and feelings related to the process. The five main themes are going to be discussed in the following paragraphs.

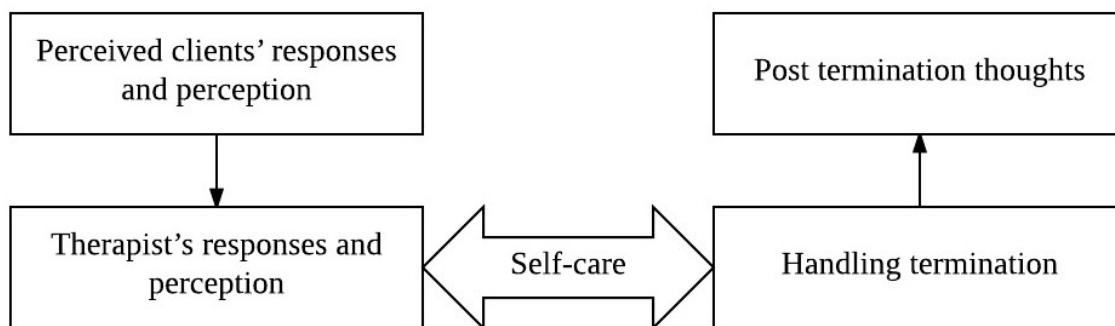


Figure 1. Overview of the lived experienced in forced termination from a drama therapy perspective.

Perceived Clients' Responses and Perceptions

The perceived clients' responses and perceptions refer to the observed responses, and feelings that are discussed with the therapist at the end of the treatment process. There are responses that are more commonly expected by the therapist, while there are also unexpected responses. Moreover, the responses from the clients vary when the reasons behind forced termination are different. Various responses are going to be discussed in details in the sections below.

Common initial responses. According to the data, there are some common responses observed in clients when they first hear about termination. Usually they appeared worried, as there is a certain level of dependency and supports from the therapists, so they feel anxious with

losing the support. There was also a sense of not being held and feeling lost on their own, right after knowing the news. There was also a sense of fear in ending the therapeutic relationship and they began to question their relationship with the therapists. There was a fear that they do not matter to the therapists anymore, thinking that they are only a case or a paycheck.

Unpredictable responses. Sometimes the therapists receive responses that are unexpected. One respondent mentioned a client who seldom showed sadness became very sad when she first heard the news about termination.

She immediately flooded with tears, which I was surprised about that, that wasn't something that she did commonly, which has an emotional impact on me that was different than some of the other clients. So it was an unexpected response, wasn't the response that I anticipated from her. (Transcript A, p.4)

However, there were also times when the therapists are worried if the clients would become too overwhelmed or vulnerable when they first heard the news about ending, and it turned out that some clients were fine or appear not disturbed with termination.

Like the person I was most worried to tell, took it okay, like my mind will freak out, but like... was okay. And I thought she was going to be hospitalized for sure, and she wasn't, you know. (Transcript A, p.10)

An unpredictable sad response from the client appears to have more emotional impact on the therapist, which will be explored in more detail in the following section.

Personal reasons behind termination. The perceived clients' responses and perceptions differ based on the reason behind termination. One therapist had forced termination because of further education, which is a personal reason. Since the therapist had control over her choice, the responses she received from her clients have another level, including anger, suspicion, and mistrust. As it is an ending decided by the therapist, it can possibly trigger the sense of abandonment from the clients. For the clients who have experienced trauma, experiencing a termination initiated by the therapist can lead to trauma reenactment, showing the difficult emotions listed above (Bostic et al., 1996). On the other hand, clients may also show understanding and appreciation for the therapist's personal reason behind ending. The therapist's personal choice can be something the clients long for in their life and therefore they understand and can empathize on the reason behind ending. One respondent said the following when she recalled the termination process with one of her clients.

For some clients that didn't matter, for her I think that really mattered. She was a university student at the time. So she, as I said was like super smart but because of all these abuses, have not been able to go to school, and part of what she was doing when we were doing our work together, was she was back in school, almost full time which was great. So I think for her it really mattered that the reason that I was leaving was to get more schooling, like that was something she can respect and understand. (Transcript A, p.3)

Systemic reasons behind termination. This is a situation when the therapists do not have control over because the termination is required by the bigger systems, such as the changes of the government policy, the hospitals, the insurance company etc. When the system is shaky and there is no definite decision or procedures given yet, the clients show more vulnerability and worries with the unknowns. It seems difficult for the clients to transition before the therapists provide a more concrete frame. The responses from the clients are mainly worries, and there seems to be less difficult emotions, such as anger and mistrust, on a relational level.

Therapists' Responses and Perceptions

Therapists are also affected emotionally while handling termination. The difficult emotions perceived from the clients can trigger strong feelings and even trauma re-enactment in therapists (Felton, 1983). The therapeutic alliance with a client appears to be one of the factors that determine how therapists feel during termination. Moreover, the feelings and experiences seem to differ when the reason behind termination comes from a personal factor versus a systematic factor. The therapists' feelings and different factors will be discussed in the sections below (see Figure 2).

Therapeutic alliance. The way therapists feel and perceive in the termination process appears to be influenced by the therapeutic alliance. When the respondents were invited to tell a story about the termination process, the stories they chose to share were between clients whom they had worked with for a long period of time and had strong therapeutic alliance with. They described the therapeutic process as intense but also positive. The clients mentioned in the stories have made positive progress and changes through therapy and the therapeutic processes were described as successful. Both respondents felt that they have done good work with the clients.

Feelings and perceptions. There are a lot of complex emotions and thoughts experienced by the therapists during the termination process. Some of the thoughts and feelings are common when therapists experience the termination process, some are specific according to the

circumstances, such as whether the termination happens because of a personal choice, which one has control over, or it comes from a systemic change, which one has no control over.

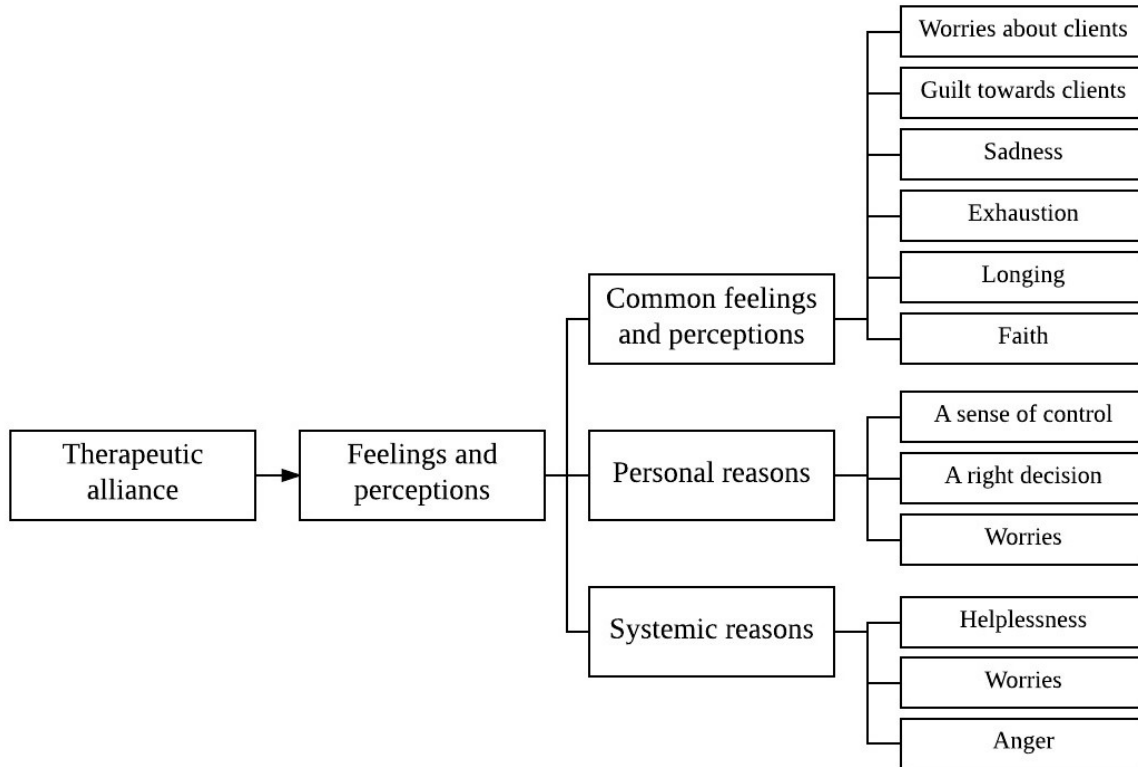


Figure 2. An overview of the therapists' responses and perceptions in forced termination.

Common feelings and perceptions. The themes discussed below appear to be commonly experienced by therapists in the ending process. Most of the feelings and thoughts are related to the clients, but some are on a personal level.

Worries about clients. The therapists' worries mainly come from the unknown nature of the termination process. Firstly, they are not sure if the future plans and arrangement made for the clients would work out. Secondly, they are worried about the way clients will handle it. When the clients appear anxious and worried, it also affects the therapists to worry more about certain clients. Because of the unknowns, a respondent also described the experience as very unsettled and destabilizing, and the other respondent said she felt nervous before seeing the clients.

Guilt towards the clients. Guilt appears to be a common feeling experienced by the therapists, as they feel responsible for the clients' negative feelings (Joyce et al., 2007). Even for therapists with more experienced practices, they also reported feeling sorry or guilty towards

their clients. The feelings also appeared to be intensified with the unexpected sadness expressed by the clients. One respondent also mentioned feeling like a failing parental figure in the ending process.

With her I felt a little bit guilty. I guess I felt uncertain and I felt a little bit more emotionally caught than I think I did with some of the others that I could feel, especially when she flooded with tears, I felt like ooh... like I could feel my heart started to feel like a little bit heavy with that ending. (Transcription A, p.4)

Sadness. The sense of sadness comes from both the feelings toward the client and also leaving the workplace. One respondent mentioned feeling sad about leaving the colleagues and the workplace as she had been working with the team in the same setting for a long time. The other respondent mentioned feeling the departure when she was preparing for her future study, and said she suddenly realized it is the time to say goodbye to her clients whom she had worked with for a long time, and had become emotionally attached to. Therefore, she said the process was not easy for her.

Exhaustion. Since both therapists interviewed had forced termination because they were leaving the workplace, they mentioned having to say goodbyes to many people, including both the clients, and the colleagues. One respondent mentioned feeling very exhausted from the excessive goodbyes processing the endings with many clients at the same time.

It was exhausting. Like I would come home every day and just be like whooo... like in the last couple weeks, when I started doing the final session, in the last three weeks really when I was like goodbye, like everyday when I run in was like goodbye all day everyday. (Transcript A, p.9)

Longing. The longings include the wish to do more for the clients, hoping for the clients to fulfill their dreams, and also thinking about the clients in their personal time during or after termination. Both respondents mentioned thinking about their clients during or after termination. One respondent mentioned having reminiscence of her client when she was packing, and the other mentioned thinking about and finding a way to connect with her clients when she was reading children's books. One has talked about having a dream of her client, hoping the client can achieve what she wants in her life. Another has talked about wanting to do more for the client.

You know you feel like, if I just have a little bit longer, by just a little more time you know,

we could work right through that. But for me it's just about, I mean it's letting go. I mean when you work with children, I think you become very attached to them because it's such...they're so vulnerable, and they're so open. (Transcript B, p.6)

As previously mentioned that some clients may fear that they are only a case and do not really matter to their therapists, one respondent mentioned hoping the clients know that they do matter for her.

I still resonate and remember very strongly, and you are still part of my psychic life, you know? Like their stories matter and our relationships matter years later, and like nine months later it's still as strong in my mind, it's like I'm seeing them every week. (Transcript A, p.11)

Faith. The therapists have faith in themselves and their clients, thinking what they have done in the therapy matters and it is going to have a positive impact on their life. One respondent made an analogy,

And our time is over, but the work that we've done will stay with the person, they'll stay with the child. So that's a metaphor that I sort of like that there will be a ripple that will come away from the work that the client will take away with them. (Transcript B, p.12)

Moreover, another respondent stated that she believes there is no perfect termination in therapy and it is said to be a continuous learning process. Both respondents have mentioned and believe that letting go at the end of therapy is important, both for them and for the clients.

Personal reasons behind termination. Asides from the common feelings described above, sometimes the feeling and perception of the therapist differs when the reason behind forced termination comes from a personal reason. The respondent who left the agency for a personal reason reported feeling more in control handling the process and believed leaving the agency and ending the therapies was a right decision, but she also felt worried about herself. In handling the termination process, she said she was able to make plans and arrangement for the clients ahead of time, and therefore felt more in control. She also believed that leaving the agency was a right decision, both for her and for the client. She described the forced termination as a good timing for the clients to foster their independence. She said probably one reason for some clients to stay in therapy for a long time might be related to her, and therefore she thought it was probably a good opportunity for her and for the clients to let go. However, she also felt worried as she is leaving the profession, and there was a sense of losing the identity.

Systemic reasons behind termination. The therapist’s feelings and perception appear different in some ways when the forced termination happens because of the system. The respondent who has experienced this systemic forced termination reported feeling helpless, worried and angry. The sense of helplessness appears to come from not having a sense of control. She reported there were rumours around the exact date for her to leave the agency, and therefore she felt uncertain about the next step. Since there was unknown that she had no control over, she expressed feeling worried and fearful about the uncertainty. She also reported being caught by these worries and fears at times and could not be fully present in the session. The anger appeared to be a very significant and disturbing feeling in the termination process. The therapist mentioned having a lot of frustration and was angry at the system because the clients’ needs were neglected and put aside.

Handling Termination

While handling termination, the therapists first plan the termination according to different clients’ needs, then they communicate with the clients about the ending and help to process the feelings and thoughts, finally there are some procedures to follow after the last session, in the post termination process. Each of these steps is important and will be discussed in the sections below (see Figure 3).

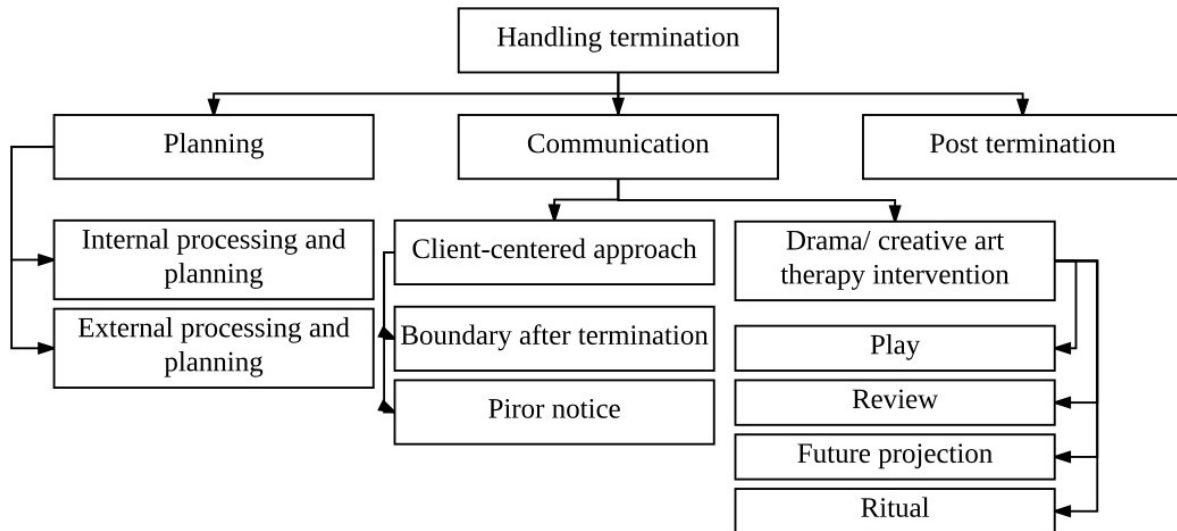


Figure 3. An overview of the therapist handling forced termination.

Planning. Before going into the sessions with clients, one respondent mentioned the need to be thoughtful because of her high caseload, and she mentioned the planning and the process of

termination can be differed according to one's clinical orientation. Planning the termination process happens both internally and externally, where the therapist thinks thoroughly and keeps asking questions, while bringing the questions and thoughts into discussion with others.

Internal processing and planning. There are a few things highlighted from the interviews, such as having the awareness of potential trauma reenactment on the clients, the need to maintain a safe space, and setting a professional and personal boundary. Experiencing a forced termination process can trigger a feeling of being abandoned and betrayed, and the client may feel extreme anger and sadness due to the sudden loss (Chernus & Chernus, 2015). Therefore, one respondent mentioned the importance to be aware of this potential trauma reenactment and to understand the reason behind it. The need to maintain a safe space was also brought up as an important theme. There are a lot of feelings experienced by the therapist in the process and both therapists mentioned the need to compartmentalize feelings at work and try not to allow one's difficult feelings to interfere with the space.

One respondent also brought up the need for knowing how to set personal and professional boundary for each client. There does not seem to be a golden rule and the boundary is said to be different for different clients, according to the therapeutic value. There are several types of boundaries mentioned, i.e. a hard end, or continuing relationship that includes one-way contact, and two-way contact. A hard end refers to ending the relationship without any further contact; a one-way contact relationship refers to allowing the client to contact without giving any feedback or reply; a two-way contact relationship refers to continuing back and forth conversation with the clients after termination. Before deciding a suitable type of boundary, one respondent highlighted the importance to first be aware of one's countertransference toward the clients, and question if setting this boundary is therapeutically helpful and beneficial to the client. Second, she also mentioned a therapist needs to question him/herself if it is possible to handle this of boundary in the future.

External processing and planning. While planning for the termination, one respondent emphasized the need to know the culture in the agency and to discuss the plans with supervisor. She stressed that the process does not happen in a vacuum and should not happen without consulting other people. The other respondent also brought up her need to communicate with her colleague and therefore receiving support from the team.

Communication. The way to communicate the ending with clients is influenced by one's

therapeutic approach. Moreover, the way to communicate the boundaries with the clients was also highlighted in the interview. Furthermore, there are some drama therapy interventions used by both therapists in the termination process, which will be discussed more in details in the following session.

The client-centered approach. The clinical approach from both respondents appeared to be highly client centered. Since having a good relationship is the key in therapy, they emphasized the need to be direct and honest while telling clients the reason behind the sudden termination. Moreover, both of them mentioned following the needs of the clients. So they did not make decision for the clients, but rather let the clients choose what they wanted in this ending process. Furthermore, empathizing and validating the clients' difficult feeling are described as important during the ending process.

For most of my clients I did tell them that at some point and I'm you know I apologize for not having a more definite date, or knowing exactly what would happen. But I let them know that there were changes that were happening in the hospital and that at some point, within the next few months I would be leaving the [agency]. So I'd always sort of, I wanted to let them know so that they could also decide, especially with the older clients, that the teenagers. So that they had the chance to decide if they wanted to open a whole lot of stuff, or if they wanted to just work in the moment and deal with sort of the symptoms of what was going on. (Transcript B, p.7)

Boundary after termination. Following along with transparency and honesty in handling termination, one respondent also talked about the importance of communicating the limitation, i.e. the professional and personal boundary, openly with the clients. As some clients may experience trauma reenactment and perceive the therapist's leaving as something personal, one respondent mentioned it is important to explain the reason behind the boundary on a systemic level,

Letting them know what you can do and cannot do and why, because it's the rules of the center, that's the rules of the training program I'm in, or whatever. You don't have to just hold it as you; you can put it on the bigger structure. (Transcript A, p.15)

Different type of boundaries after termination, i.e. a hard end, a continuous relationship, is brought up earlier, and the therapist needs to decide what kind of boundary is therapeutically helpful for the clients. For example, one respondent said for clients who have difficulty

maintaining boundary, it would not be helpful to continue the relationship as it probably makes it more difficult for the clients to form relationship with the new therapist, thus interfering the next therapeutic process; on the other hand, sometimes it may not be helpful to have a hard end with certain clients, and allowing the relationship to continue within a healthy boundary is a helpful transition for the clients.

After knowing what kind of boundary is good for the client, there is a need to clearly and empathically let the client know what is possible and what is not possible, while validating the difficult feelings of the clients at the same time.

“This is gonna seem strange because you’ve shared some of the most intimate things with me, and it is one of the strange thing coming to counselling, which is because of some professional rules and ethics, like I won’t be allowed to contact with you, unless you’re coming to see me here...But I want you to know, um, that doesn’t mean that you will disappear from my mind when you walk out of this door...So I’m not gonna forget that time when we were playing XYZ.” Humm, you know, that’s gonna stay with me for a very long time. (Transcript A, p.13)

Even though it can be a continuous relationship, there is still a firm boundary because it is no longer the same kind of client-therapist relationship, and it should not interfere with the clients’ new therapy process.

“In terms of the rules here, I’m not really allowed to reach out, when you are no longer a client here. But you can send me, you can reach out to me if you like,” and you can give them your, if you have a center email, or a professional email, that is not a personal one, “and I will read everything that you write, or I will listen to every, like voice mail that you leave, so I want you to know that, if you need to express something, that is still possible for you.” And then you are not continuing necessarily the same therapeutic dynamic, but it doesn’t savage the relationship. (Transcript A, p.12)

Prior notice. Having early notice was also highlighted. One therapist said having at least a month’s notice before the session ends is a common practice. However, she also said it is important to look at individual needs as people who have experienced trauma probably need more time to process the difficult emotions arose. An abrupt and unpredictable end can easily trigger the feeling of being abandoned and trauma re-enactment. Therefore, having enough time for processing is crucial and all the communication and exploration of difficult feelings do not

happen in the last minute.

Drama/creative arts therapy intervention in termination. In the interview with the two drama therapists, they brought up some drama therapy interventions, which they have found useful in processing the difficult feelings at the end and solidifying the therapy progress. However, one therapist said there is not a cookbook, and the intervention chosen and the ways to use it differ according to different client's needs.

Play. The respondent who uses DvT emphasized play as a very helpful tool to process the end for both the client and the therapist because it fosters the honesty through a playful way. DvT is an intervention that focuses on playing the unplayable, meaning that things that are difficult to talk about and discuss in daily life can be explored through play, which is not as intimidating as in real life. She explained that as play is an unstable process, it could help the clients to practice handling things, e.g. ending and loss that are also unstable in their life.

A lot of playing with the unplayable a lot, you know like, towards the end, sort of like you know, very dramatic like, "you're abandoning me, you are just like my mother" and at the beginning it was real, and then it became playful. It became part of like the way she was processing. (Transcript A, p.7)

Review. Review is a common practice to acknowledge the end and the progress made in the therapy process. A review in creative art therapy can be supported by story telling or reviewing the art works.

I had a lot of his art and we looked at some of the things he'd made, and all the paintings he drew because he was like handfuls of painting. I did remind him you know about stories we read, and things we had showed mom, and when I came to his house. And you know, so we do a lot of reviewing and that was why I thought it was really nice and interesting that mom brought in the baby book because it had it was really reviewing right from the start of his birth. (Transcript B, p.6)

Future projection. This is a technique to bring the client to explore the possibility in the future and to bring in hope. In drama therapy, it usually happens as an exercise instead of talking, and sometimes it happens with enacting a scene. One drama therapist mentioned inviting some clients to write a letter to them 10 years later in the future.

Ritual. This is a practice to contain the clients and to bring in a more complete closure of the therapy process. The therapist mentioned having a message board for the clients to leave

memories and thoughts at the agency. The ceremonial nature of these actions to write something on a piece of paper, put it up on the message board, and to look at it with all the other pieces of papers create a dramatic ritual, which helps the client to process and transition with the ending.

Post termination. Different agencies have different cultures around post termination, but follow up to participate in the handover process to the new therapist appears helpful to clients dealing with transition. After one has left the agency, one respondent mentioned if one is choosing to maintain a relationship with the client, it is important to maintain the boundary and never do anything that was not previously agree on. The possibility of future encounter with the clients is discussed. One respondent mentioned that after some years, when a client has finished his/her personal work, she could see a possibility to work together if they end up working in similar fields.

Self-care

After looking into the lived experience of both drama therapists, the level of self-care appeared to be an important process to mediate between the feelings and perception in termination and the way one handles the termination process.

Processing. Processing the feelings mean allowing space to experience all the emotions, both pleasant and unpleasant, rather than suppressing them and lead to more sufferings (Rollin, 2016). Having the awareness of one's own stress appears to be an initial step for processing to happen. Besides having the awareness, one respondent has brought up playing in session as a very helpful way to process the therapist's own feelings. She believes that play is always relational and through playing with the client, the therapist can also have a space to alleviate the difficult emotions through playing different roles in the client's life. The other respondent mentioned the importance of receiving validation of the difficult feelings from others. Even though one cannot share the stories that happen in the therapy session, the dramatic medium contains the transformative power and can allow one to share the feelings without breaking any confidentiality. One respondent mentioned participating in a playback group has helped her a lot in processing the difficult feelings and experiences, after they were heard and validated through playing back by movements and sounds from others.

Letting go. To let go brings in happiness (Finely, 2010), and "happiness comes to those who understand you can't seek it any more than you seek the air you breaths." (Finely, 2010, p.26) As mindfulness and meditation are becoming more popular and effective in the field, the

practice always encourages one to be ware of the present moments and let go of the disturbing thoughts through breathing. There is consensus from both therapists that letting go plays an important role in how one feels and how one handles the termination process. It happens in two levels, the psychological level and the physical level.

Psychological level. Letting go of the struggle and having a sense of acceptance appears significant. One therapist mentioned accepting the loss as part of life, and therefore not struggling to make any of those difficult feelings go away, but accepting them. She also anticipated the process of loss, so she knew there would be pain and it takes time for both her and the clients to process the loss.

Physical level. It is a ritual for the mind and body to let go and a practice to be in present moment. As previously mentioned, maintaining a safe space for the clients is vital in the termination process, so there are some techniques to take care of the body and mind before entering into the therapy space. One therapist mentioned having a short self-massage, a cup of hot tea, doing a body scan to introspectively pay attention to where the body holds up tension, or practicing meditation can help the self to retreat from the chaos, and to obtain a clearer mindset.

Having these thoughts and exercises to take care of the self seems to be important to a therapist while handling termination. As mentioned earlier, handling termination can trigger a lot of difficult feelings on a therapist, so there is a need to pay attention to and take care of the self during this process, in order to facilitate a better ending with the clients and to maintain a better well being of the self.

Post Termination Thoughts

Continuous learning process. The need to continuously learn to negotiate between the personal and the professional boundary was highlighted. It appeared vital to know what one's personal style is, versus the clients' need, so that one can be able to make what is best for oneself and for the client.

Self-discovery. The forced termination process has allowed the respondents to discover more about one's limitation. One mentioned realizing that she was not in control of the bigger system and what she had control over was herself only. Moreover, she has become aware that dealing with uncertainty is difficult and frustrated for her. She mentioned once she started talking about that experience, she found getting irritated again. Another mentioned learning the need to trust her own intuition. She said she has learned that if there is something that does not feel right,

she has to trust this feeling and pay more attention to the decision made.

The need for processing. Both respondents agreed towards the end of the interview that there is a need to talk about the termination process. One said she has not shared much with others about her process and has realized feeling better after talking about it in the interview. The other mentioned realizing the need to acknowledge these important processes in therapy because these are important therapeutic work, and she feels like it is important to let more people know about them.

Chapter 5: Discussion

The understanding of lived experiences in forced termination come from two experienced drama therapists. According to this study, the feelings experienced by the clients and therapists during the forced termination process are similar to what is reported in the literature. For example, clients usually feel worried about the transition; and if some clients have had traumatic experiences, they would be more prone to have intense feelings related to the sense of abandonment, such as anger, mistrust, fear, and sadness, which are also comparable to the experience of loss and grief described in the literature. Besides the difficult emotions, the therapists also carry a sense of faith and hope in their clients, believing that the work they did continue to have an impact on their clients' life after termination. There are also other aspects that worth a second look, i.e. the therapeutic alliance, and the reasons behind forced termination. There seems to be stronger feelings experienced by the therapists in the ending process when the therapeutic alliance is strong. Moreover, the feelings experienced by both the clients and the therapists differ according to the reasons behind termination. Clients appear to feel more angry with the personal reason when the therapist choose to leave the job, while the clients appear predominantly worried about the systemic reason when the therapist has not much control over the situation.

When handling termination, there are three steps from the findings: planning, communication and post termination follow up. The therapist plans while consulting with the supervisor and following the culture of the agency, and the plans are made according to clients' individual needs. Similar to the existing literature, the therapist communicates with his/her client about the end in a transparent and open manner. The therapist also makes prior notice to allow enough time for clients to process and work things through before the real end. In handling termination, the use of drama therapy intervention appears to be a highlight in this study. "One of the achievement of psychotherapy might be to enable the expression of hostile and negative feelings without the fear that they will be deadly" (Murdin, 2015, p2) and play is said to be a tool that can facilitate this powerful process, especially when it is used in termination. Play can allow the clients to express the frustration, fear and sadness about ending the therapeutic relationship in a non-threatening way. The other drama therapy interventions such as future projection, ritual, and review were also commonly used in termination.

Communicating with the clients about the boundaries appears to be another highlight in

handling termination. Sometimes the therapeutic relationship ends without clearly talking about the boundary because it usually involves touching on the difficult feelings about the loss. Consequently, it becomes an ambiguous professional loss, causing more anxiety and distress for the therapist (Skovholt & Trotter-Mathison, 2016) and I believe the clients experience similar feelings as well. Therefore, the need to clearly and empathically communicate with the clients about the boundaries was emphasised in the responses. There are also different kinds of boundaries, a hard end, a one-way contact, and a two-way contact relationship, and the boundary is set according to what is most therapeutic beneficial to the clients.

Practicing self-care is also emphasized in this study. From the literature and the findings, the therapist also experiences many difficult emotions in the termination process. If those difficult feelings are left unattended, they probably play a negative consequence on the termination process, as the therapist is less aware of things such as the countertransference and potential burnout. Therefore, it is important to practice self-care and process those feelings. Through processing and being reflective, the therapist can begin to mentally let go of the distress through accepting and practicing mindfulness, and become more present with the clients in the ending process. One respondent mentioned that it is not an easy task. It looks like a life long journey to discover and learn about oneself, so as to make a better decision by finding a balance between the self and the others.

Self-reflection

Being a young therapist, I constantly blame myself for not doing a good job in the previous terminations; so I find it very reassuring to listen to the stories and know experienced therapists also shared similar experiences as me. On the other hand, I have found it very helpful in knowing more concrete ways to communicate and set boundaries with clients. I have learned about professional rules and ethics from two graduate school programs, the first one teaches talk therapy and the second one is the drama therapy program that I am currently in. However, the professional rules and ethics stayed as a rule and I do not find enough discussion in the classroom setting about how to communicate with clients about the end of the relationship. I wish I could have learned about these experiences earlier, so that I could tell my clients that I understood their feelings, express to them that I remember specific moments with them, and tell them they matter to me. I understand there is no perfect termination and I am still learning how to do a better job next time. Moreover, I am glad that I am an emerging drama therapist, meaning

that I can make use of a lot of drama therapy techniques to handle difficult moments, such as forced termination, with clients in a playful and non-threatening way. I believe play is a gift to give to the clients in the ending process. Finally, it is important for me to have the reminder of self-care, especially in difficult situations that accepting loss and imperfection and practicing the bodily rituals are the keys for me to continue on this meaningful work.

Chapter 6: Limitation and Future Recommendation

There are only two respondents in this study and their experiences may not be representative of the bigger picture. Although forced termination is a specific form of termination in therapy, there are still different reasons behind it, e.g. therapist changing job, changes from the system, and therapist's retirement etc. Sometimes therapists feel more in control over the situation when it is a personal choice to leave the workplace, while sometimes it is also a forced choice for the therapists who have no control over it. In a future study, it would be nice if I could recruit more participants to obtain a richer description of the phenomenon and to see if there is any difference when the therapist has control over the end versus not. Moreover, I was the researcher, the interviewer and also the data analyst at the same time. In the research process, I was prone to re-experience difficult feelings from the previous terminations. Although I have tried my best to be reflexive in the process, it may still add biases to the study. Therefore, having separate people to be the researcher, the interviewer and the data analyst is recommended in future studies in order to facilitate a more objective process.

There are a lot of practices for students to learn to facilitate therapeutic progress with clients, yet there are usually not enough practices for students to learn how to hold an end in therapy. When an end is not handled properly, it can possibly bring harm to the client. Therefore, I think it would be very helpful if there could be more concrete discussions and exploration in school settings about the ending process in therapy. In the drama therapy field, it is recommended to explore handling termination through play, which is a valuable tool to process difficult emotions in an honest and non-threatening manner.

References

- Attridge-Stirling, J. (2001). Thematic networks: An analytic tool for qualitative research. *Qualitative Research, 1*(3), 385–405. <http://doi.org/10.1177/1468794107085301>
- Baum, N. (2007). Therapists' responses to treatment termination: An inquiry into the variables that contribute to therapists' experiences. *Clinical Social Work Journal, 35*(2), 97–106. <http://doi.org/10.1007/s10615-006-0066-0>
- Bostic, J. Q., Ed, D., Shadid, L. G., & Blotcky, M. J. (1996). Our time is up: Forced terminations during psychotherapy training. *American Journal of Psychotherapy, 50*(3), 347–360.
- Cedar, L., Crockford, S., Elias, J., & Jackson, J. (2015). Roundabout and the Big Lottery a four year dramatherapy project for older adults. *Dramatherapy, 37*(1), 47–59. <http://doi.org/10.1080/02630672.2015.1129431>
- Chernus, L. A., & Chernus, L. A. (2015). A self psychologist approaches retirement: 'Forced' termination with highly vulnerable clients. *Clinical Social Work Journal, 44*(2), 150–159. <http://doi.org/10.1007/s40571-015-0079-y>
- Copp, G. (1998). A review of current theories of death and dying. *Journal of Advanced Nursing, 28*(2), 382–390. <http://doi.org/10.1046/j.1365-2648.1998.00794.x>
- Corr, C. A. (2015). Let's stop "staging" persons who are coping with loss. *Illness, Crisis & Loss, 23*(3), 226–241. <http://doi.org/10.1177/1054137315585423>
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th Edition). Thousand Oaks, CA: SAGE Publications. <http://doi.org/10.1007/s13398-014-0173-7.2>
- Dayton, T. (2005). *The Living Stage: A step-by-step guide to psychodrama, sociometry and experiential group therapy*. Deerfield Beach, FL: Health Communications, Inc.
- Dix, A. (2015). Telling stories: Dramatherapy and theatre in education with boys who have experienced parental domestic violence. *Dramatherapy, 672*(October), 1–13. <http://doi.org/10.1080/02630672.2015.1055778>
- Emunah, R. (1983). Drama therapy with adult psychiatric patients. *The Arts in Psychotherapy, 10*(2), 77–84. [http://doi.org/10.1016/0197-4556\(83\)90033-3](http://doi.org/10.1016/0197-4556(83)90033-3)
- Emunah, R. (1994). *Acting for real: Drama therapy process, technique, and performance*. New York: Routledge.
- Felton, J. R. (1983). Growth through defeat and the reenactment of a family drama. *Clinical*

- Social Work Journal*, 11(4), 362–367. <http://doi.org/doi:10.1007/bf00755902>
- Finley, G. (2015). *The secret of letting go*. Woodbury, MN: Llewellyn Publications.
- Fragkiadaki, E., & Strauss, S. M. (2012). Termination of psychotherapy: The journey of 10 psychoanalytic and psychodynamic therapists. *Psychology and Psychotherapy: Theory, Research and Practice*, 83(5), 335–350. <http://doi.org/10.1111/j.2044-8341.2011.02035.x>
- Gearing, R. E. (2004). Bracketing in research: A typology. *Qualitative Health Research*, 14(10), 1429–1452. <http://doi.org/10.1177/1049732304270394>
- Halling, S., Kunz, G., & Rowe, J. (1994). The contributions of dialogal psychology to phenomenological research. *Journal of Human Psychology*, 34(1), 109–131. <http://doi.org/0803973233>
- Hudgins, L. (2013). Closing time: Clients' shared experiences of termination of a music therapy group in community mental health. *Qualitative Inquiries in Music Therapy*, 8, 51–78.
- Jack, D. C. (1999). Ways of listening to depressed women in qualitative research: Interview techniques and analyses. *Canadian Psychology/Psychologie Canadienne*, 40(2), 91–101. <http://doi.org/http://dx.doi.org/10.1037/h0086829>
- Jones, P. (2007). *Drama as therapy: Theory, practice and research. Second Edition*. New York: Routledge.
- Joyce, A. S., Piper, W. E., Ogrodniczuk, J. S., & Klein, R. H. (2007). Therapist-initiated termination. In *Termination in psychotherapy: A psychodynamic model of processes and outcomes* (pp. 157–165). Washington, DC, US: American Psychological Association. <http://doi.org/10.1037/11545-008>
- Kong, T. S. K., Mahoney, D., & Plummer, K. (2003). Queering the interview. In A. J. Holstein & J. F. Gubrium (Eds.), *Inside Interviewing: New lenses, new concerns* (pp. 91–110). Thousand Oaks, CA: SAGE Publications.
- Kubler-Ross, E. (1969). *On Death and Dying*. New York: Scribner Classics.
- Landy, R. J. (1986). Projective techniques. In *Drama therapy: Concepts and practices* (pp. 135–152). Springfield, Illinois: Charles C. Thomas. <http://doi.org/http://dx.doi.org.molly.ruc.dk/10.4135/9781412963909.n342>
- Landy, R. J. (1991). Role as the primary bridge between theatre and drama therapy. *Dramatherapy*, 13(2), 4–11. <http://doi.org/10.1080/02630672.1991.9689795>
- Maples, J. L., & Walker, R. L. (2014). Consolidation rather than termination: Rethinking how

- psychologists label and conceptualize the final phase of psychological treatment. *Professional Psychology: Research and Practice*, 45(2), 104–110.
<http://doi.org/10.1037/a0036250>
- Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of Counseling Psychology*, 52(2), 250–260.
<http://doi.org/10.1037/0022-0167.52.2.250>
- Mortari, L. (2008). The ethic of delicacy in phenomenological research. *International Journal of Qualitative Studies on Health and Well-Being*, 3(1), 3–17.
<http://doi.org/10.1080/17482620701747392>
- Murdin, L. (2015). *Managing difficult ending in psychotherapy*. London: Karnac Books Ltd.
- Novick, J. (1997). Termination conceivable and inconceivable. *Psychoanalytic Psychology*, 14(2), 145–162.
- Novick, J., & Novick, K. K. (2006). *Good goodbyes: Knowing how to end in psychotherapy and psychoanalysis*. Maryland, USA: The Rowman & Littlefield Publishing Group, Inc.
- Oon, P. P. (2010). Playing with Gladys: A case study integrating drama therapy with behavioural interventions for the treatment of selective mutism. *Clinical Child Psychology and Psychiatry*, 15(2), 215–230. <http://doi.org/10.1177/1359104509352892>
- Quintana, S. M. (1993). Toward an expanded and updated conceptualization of termination: Implications for short-term, individual psychotherapy. *Professional Psychology: Research and Practice*, 24(4), 426–432.
- Råbu, M., Binder, P., & Haavind, H. (2016). Negotiating ending: A qualitative study of the process of ending psychotherapy. *European Journal of Psychotherapy & Counselling*, 15(3), 274–295. <http://doi.org/10.1080/13642537.2013.810962>
- Roe, D. (2006). Clients' feelings during termination of psychodynamically oriented psychotherapy. *Bulletin of the Menninger Clinic*, 70(1), 68–82.
- Rollin, J. (2016, November 25). Three reasons to let yourself feel your emotions. Retrieved May 08, 2017, from <https://www.psychologytoday.com/blog/mindful-musings/201611/3-reasons-let-yourself-feel-your-emotions>
- Seritan, A. L. (2005). Of rose gardens and forced terminations. *Academic Psychiatry*, 29(1), 29–32.
- Siebold, C. (1991). Termination: When the therapist leaves. *Clinical Social Work Journal*, 19(2),

191-204. doi:10.1007/bf00755046

Siebold, C. (2007). Everytime we say goodbye : Forced termination revisited, a commentary. *Clinical Social Work Journal*, 35(2), 91–95. <http://doi.org/10.1007/s10615-007-0079-3>

Skovholt, T. M., & Trotter-Mathison, M. (2016). *The resilient practitioner: Burnout and compassion fatigue prevention and self-care strategies for the helping professions*. New York, NY: Routledge.

Starr, A. A., & Weisz, H. S. (1989). Psychodramatic techniques in the brief treatment of inpatient groups. *Individual Psychology: The Journal of Adlerian Theory, Research & Practice*, 45(1/2), 143–145.

van Manen, M. (1997). *Researching lived experience: Human science for an action sensitive pedagogy*. Ottawa: The Althouse Press.

van Manen, M. (2016). *Phenomenology of practice: Meaning-giving methods in phenomenological research and writing*. New York: Routledge.

Wertz, F. J. (2005). Phenomenological research methods for counseling psychology. *Journal of Counseling Psychology*, 52(2), 167–177. <http://doi.org/10.1037/0022-0167.52.2.167>

Zuckerman, A., & Mitchell, C. L. (2004). Psychology interns' perspectives on the forced termination of psychotherapy. *The Clinical Supervisor*, 23(January 2015), 55–70. <http://doi.org/10.1300/J001v23n01>

Appendix A



CONSENT FORM

Study Title: The Lived Experience of Forced Termination from a Drama Therapy Perspective

Researcher: Weng Ian (Jojo) Lam

Researcher's Contact Information: jojo.lamwi@gmail.com

Faculty Supervisor: Jason Butler

Faculty Supervisor's Contact Information: Jason.butler@concordia.ca

I understand that I have been asked to participate in a research project being conducted by Weng Ian (Jojo) Lam of the Drama Therapy Program of Concordia University under the supervision of Jason D. Butler of the Department of Creative Arts Therapy of Concordia University

You are being invited to participate in the research study mentioned above. This form provides information about what participating would mean. Please read it carefully before deciding if you want to participate or not. If there is anything you do not understand, or if you want more information, please ask the researcher.

A. PURPOSE

The purpose of the research is to explore the lived experience of drama therapists during the forced termination process in therapy. The exploration of force termination in this study focuses more on the unpredictable and abrupt endings initiated by the therapist which may include the therapist changing jobs, the changes in systems or institutions, the therapist having health issues, or the therapist's retirement. The study tries to understand the experience through the lens of the practitioners to explore the feelings, memories and interventions used in the previous termination processes.

B. PROCEDURES

If you participate, you will be asked to give examples of your experience during forced termination processes in drama therapy

In total, participating in this study will take no more than 60 minutes.

C. RISKS AND BENEFITS

You might face certain minor risks by participating in this research. These risks may include:

Emotions arising in the interview process because of the phenomenon explored.

While the intention of this research is not to benefit you personally, you may benefit from passing your knowledge and experience to the other therapists, and therefore help to facilitate better practice in the field.

D. CONFIDENTIALITY

We will gather the following information as part of this research:

1. Brief information regarding previous clinical experience, such as number of years of work as a therapist and what populations you have worked with.
2. A story about previous forced termination in drama therapy

I will not allow anyone to access the information, except people directly involved in conducting the research. We will only use the information for the purposes of the research described in this form.

We will protect the information by using pseudonyms. We intend to publish the results of the research. However, it will not be possible to identify you in the published results. We will destroy the information five years after the end of the study.

F. CONDITIONS OF PARTICIPATION

You do not have to participate in this research. It is purely your decision. If you do participate, you can stop at any time. You can also ask that the information you provided not be used, and your choice will be respected. If you decide that you don't want us to use your information, you must tell the researcher before March 1, 2017.

There are no negative consequences for not participating, stopping in the middle, or asking us not to use your information.

G. PARTICIPANT'S DECLARATION

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I agree to participate in this research under the conditions described.

NAME (please print) _____

SIGNATURE _____

DATE _____

If you have questions about the scientific or scholarly aspects of this research, please contact the researcher Weng Ian (Jojo) Lam. The contact information is on page 1. You may also contact their faculty supervisor.

If you have concerns about ethical issues in this research, please contact the Manager, Research Ethics, Concordia University, 514.848.2424 ex. 7481 or oor.ethics@concordia.ca.

Appendix B

Interview Guide

Study: The Lived Experience of Forced Termination from a Drama Therapy Perspective

Researcher: Weng Ian (Jojo) Lam

Participant: _____

Introduction: As I have mentioned previously, my study is looking at the lived experience of forced termination in drama therapy. I am interested to know more deeply of the process by gathering examples of the phenomenon from you. Before starting the interview, I would like to collect some background information.

Background information

1. For how long you have been practicing drama therapy? _____ Years
2. What is/are the setting(s) you have worked in as a drama therapist? (Please choose multiple options if applicable)
 - Health clinic
 - Psychiatric Hospital
 - Private practice
 - Community center
 - School
 - Other
3. How frequently have you been required to terminate with a client that is abrupt, meaning that it is unplanned, and happens because of life transitions, e.g. therapist changing job, therapist's health issues and other personal reasons of the therapist? _____

-
4. What is/are the reason behind your abrupt forced termination? (Please choose multiple options if applicable)
 - Retirement
 - Changing job
 - Changes in the systems or institution
 - Personal health issues
 - Other, please state _____

Interview questions

1. Please tell me a story about a moment in therapy where you were forced to terminate with a client? What was your relationship with this client? How did you address that to your client? How did your client response? How did you experience it? Are there some difficult feelings? If

yes, please explain.

2. Did some feelings during the termination process resonate with your own personal experience outside of the therapy space? If yes, how did you handle the feelings? What is something that you have learned about yourself in this process?

3. Was there any drama therapy intervention that you found helpful in processing the termination? If yes, please describe.

4. Please tell me a story about another termination process that is not forced? What are the differences? By comparing, what do you think is important to be aware of as a drama therapist during any forced termination process?