By Heidi Landis, RDT-BCT, LCAT, TEP, CGP

In recent years, the field of trauma therapy work has grown tremendously, allowing for the exploration and emergence of innovative treatment approaches. On the one hand, trauma theory underscores the importance of exploring the narrative for healing and integration. On the other, there has also been much discussion about the risk of retraumatization when working directly with the trauma narrative. I do know that in order for there to be safety in working with the trauma narrative in any kind of therapeutic work, scaffolding, therapeutic rapport and containment are critical. Trauma–focused CBT, for example, focuses first on psychoeducation about trauma and the teaching of affect regulation skills before the therapist and client even begin to engage the narrative itself.

In our own field, trauma work and trauma-informed interventions have become buzzwords. Last year marked the publication of Trauma–Informed Drama Therapy (Johnson and Sajnani, 2014), outlining different methods, theories, and practices in traumainformed drama therapy with a variety of populations and settings. I have the privilege of working at Creative Alternatives of New York (CANY), where we practice our own model of trauma-informed drama therapy. In regards to what we do, one of the questions I continually ask myself is: where is the place of the trauma narrative in an approach like ours, which works primarily in metaphor? I am also a psychodramatist, so I am familiar with working directly with the trauma story in action. But at CANY, we work in settings like schools, where clients have a drama therapy group and then head immediately to class, or shelters, where we see clients for a very limited amount of time – sometimes as little as two or three sessions. Although this is not ideal for me as a therapist, it is often out of our control. We have learned, however, that short term work can be foundational for the client. It allows them to attain some coping and affect regulation skills that can be a basis for work down the road, and to deal with triggers in the beginning stages of therapeutic work.

In my work at CANY, the question remains: can the trauma narrative be addressed directly in short term therapy, or in situations where the larger system isn't trauma-informed? In my experience, I have come to believe that the answer is yes. The metaphor not only contains the trauma, but also allow clients affected by trauma to safely access their narrative with less risk of re-traumatization.

As I write this, I am reminded of Dominick LaCapra, an American-born scholar of European history, best known for his work in intellectual history and trauma studies.

LaCapra's (2001) notion of "working through" a trauma as an "articulatory practice" aligns with current trauma theory's notion that the trauma narrative needs to be fully explored (Van der Kolk, 2014). Trauma theory pioneer Bessel Van der Kolk (2014), further explains that there is "crucial importance to the capacity to reproduce memories in words and to integrate them to the totality of experience" (p. 167). LaCapra also talks about the difference between "working though" and "acting out," distinguishing between these two forms of remembering trauma. Working through is an action-based process

whereby clients engage with their traumatic experience (e.g. through writing and play) and emerge with an integrated trauma narrative. Acting out, for LaCapra, is a process based in denial, in which traumatized persons, chronically and without insight, repeat behaviors associated with their trauma. LaCapra believes that acting-out is an inevitable and often necessary part of the healing process; working through counters acting out and results in what he calls a "redemptive narrative." In an interview at Cornell University in 1988 on redemptive narratives, LaCapra (2001) states:

If you take the conventional narrative structure itself – with a beginning, a middle, and an end, where the end recapitulates the beginning after the trials of the middle, and gives you (at least on the level of insight), some realization of what it was all about – there's a sense in which the conventional narrative is redemptive. (p. 156)

Although LaCapra (1999) is specifically concerned with historical trauma and how societies come to terms with and make sense of these traumas (or don't), he states:

A crucial issue with respect to traumatic historical events is whether attempts to work through problems, including rituals of mourning, can viably come to terms with... the divided legacies, open wounds, and unspeakable losses of a dire past. (p. 698)

In other words (or my words) can ritual, metaphor and projection contain the trauma narrative? Again, I believe they can. But as in other trauma treatments, the *process* is the key.

So what's my process? Our CANY model of trauma-informed drama therapy is based on three core principles:

- 1. Creativity as health
- 2. Group as therapeutic agent
- 3. Metaphor as a healing tool

Through metaphor and, ultimately, through processing the metaphor as a group, the trauma narrative gets explored in multiple ways. Are clients specifically creating a reenactment of their trauma narrative? No, but they are creating what I have begun to call a "parallel story" in which the trauma narrative is explored at a safe distance; a distance that the client chooses, giving them a voice in their own treatment. Although the parallel story encompasses all three of our principles, the focus here is on metaphor and the ability of the group's collective unconscious to create the parallel story.

In many of the groups I run, the unconscious creation of the parallel story and the processing after the enactment are the direct links to the safe recounting of the trauma narrative.

Take for instance a group of refugees that I currently work with in one of CANY's partner sites. This drama therapy group is included in a larger program that deals with cultural orientation. Group members have generally only been in the United States for a

week or two before they join our group. They are being placed in a therapy group when their presenting issues are primary needs and logistical concerns; their main focus is on immediate needs such as social security cards and securing a job. Although they are encouraged to attend the group weekly, appointments, job interviews, and housing crises often take precedence. We are lucky if we see clients more than a handful of times. These clients are very newly arrived refugees and for most, delving into their traumatic histories and the very recent ejection from their countries and familial ruptures is not a) their focus of necessity or b) safe to explore in 60 minutes one time per week. By most standards of treatment, trauma work shouldn't fit here because it would seem there is barely time to begin the group process. However, I assert, it can and does. Through the aesthetic distance metaphor provides, clients have begun the process of working through their fresh trauma narratives in a short-term and non-trauma informed setting. The idea of the parallel story can be seen in the following narrative case from one of my recent drama therapy groups.

Fedu's Story*

One of the clients, who I will call Fedu (*name and identifying information has been changed), was from Africa. Fedu's English was fairly strong and he helped to translate for other members of the group. Although Fedu was an accommodating group member, he avoided taking space for himself; instead he presented as more concerned with making sure others knew what was happening by translating and encouraging them to participate. He rarely shared from his own perspective. During one session, we asked the clients to create a list of relationships. Each group member added a relationship such as Mother/Father, Teacher/Student, and Brother/Sister. When Fedu was invited to share a relationship he guietly said Government/People. As soon as the words came out of his mouth, Fedu seemed to become uncomfortable and sank down further into his chair. However, other group members began to nod and commented that this was an important relationship to consider. We asked the group to choose one of the relationships on the list they would like to work with and the overwhelming response was government/people. We asked Fedu how he felt about working with this choice and he nodded and said "I think it will be good." We asked the group: "If we were to create a story about this relationship, what would it be about?" At this point, Fedu sat up in his chair, raised his hand and said, "This story should be about a Utopian society where everyone has everything they need and the government is fair to everyone." The rest of the group again nodded in response. We asked the group who they would be in this Utopian society – what character would they play? What job would they have?

One member took on the role of a teacher, another a soccer player, and a third an inventor. When we got to Fedu, he was quiet for a minute and then said, "I would like to be the King. But I am a kind king and I listen to everyone, and I am fair." We then watched this scene play out in this utopian society with Fedu playing the role of the benevolent king, enacting his hopes and wishes of a fair and just leader.

Knowing the history and crisis of his country makes the story that Fedu created that much more powerful. When the scene continued the following week, one of the group leaders

took on the role of a reporter who could not believe that such a place exists in the world. This choice of role was carefully thought out. It provided Fedu and the other clients an opportunity to express their beliefs, and perhaps even to stand up to those who didn't believe in peace, all through the safety of the metaphor. As the reporter entered the scene with skepticism, Fedu stood up and said, "This is a place where everything is happy all the time, there is no war, no government strife, and no struggle for money." The reporter asked where everyone came from and Fedu replied, "We are from all over the world. We are from unhappy places and we have come together here to find happiness. Even our soccer teams don't fight because they are here for the love of the games. If you don't believe us, you should go to the streets and talk to the people – and hear their stories – then you will know."

The created/parallel story had become the metaphor for the group's journey to find a safe place. After the drama ended, the group was able to reflect on this utopian society and begin to tell their own stories of struggle. Fedu commented that it was nice to be in that society, but he understood that struggle was what caused us to grow. He reflected that the struggle he had endured in his country allowed him to have the strength to survive as a refugee, and eventually make it to New York City. He showed us scars from bullets in his legs, and told us how he fled the violence. Most importantly, he took space and allowed others in the group to support him, the way he had been doing for others in the short time he had been in the group. Fedu was in the group for a few more weeks before he got a job, but his presence and attitude had shifted. He was still helpful to others in the group, but he took a more active leadership role, perhaps internalizing the benevolent king that he had played so well.

In this instance, it was the parallel story and the group process that allowed the clients to feel safe enough to touch the trauma narrative in a new group. Those that did not feel safe enough or ready to reflect on their own narrative could continue to use the distance of the projected story to talk about, work through, and internalize pieces of their own stories. I view the parallel story as the narrative that allows clients to access their traumatic history in a context that allows for both acting out *and* working through. In LaCapra's words, a redemptive narrative can emerge. The integration of both stories – real and metaphorical – allows for trauma treatment in non-traditional settings.

Working with clients to access the trauma narrative is an important piece of the recovery puzzle. The approach with which this narrative is explored and the context in which one is working must be considered. Then the therapist, particularly the drama therapist, can use the tools that they have to allow the client to take ownership of their own story without risk of re-traumatization.

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