

USING THE CREATIVE THERAPIES TO COPE WITH GRIEF AND LOSS

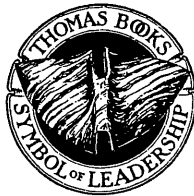
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Chapter 17

A HEALING RITUAL IN GRIEF USING DRAMA THERAPY

VINCENT DOPULOS

The healing properties of ritual and ceremony are ancient (Gennep, 1909), cross-cultural (Turner, 1969), and evidenced in current clinical application (Larsen & Young, in Thompson, 2014). Sheila, a bereaved mother had come to me due to the sudden death of her 23-year-old, only son. She engaged with me in a process of creating the elements of and collecting the objects for a ceremony she would come to enact inside my office. The ceremony lasted three hours. The preparation took place over eleven months.

A review of literature on the topic reveals an exploration of the use of creative arts in grief using several modalities. Thompson and Neimeyer (2014) cover the use of music, creative writing, theatre and performance, dance and movement, visual arts, and multimodal approaches. Excellent practitioners in the field write compelling accounts of case study and theoretical models. These approaches are distinct in their modality and deep reaching in the application of the varied forms of art as a therapeutic tool. In *Dying, Bereavement and the Healing Arts*, Bolton (2008) approaches the application of the arts in healing from the perspective of artists that are not trained as therapists. These are the stories of artists moved by the grief of others who are drawn to offer art making as a tool for the relief of suffering. It is a very moving account of artists feeling called to share what they have to offer which is the creation of art objects. The editor identifies the difference in power and usefulness of doing the work described in the book with a trained and qualified creative arts therapist. "People do deep emotional, spiritual and psychological work when they create art products, especially when they are supported by an experienced arts therapist or arts in health practitioner"

(Bolton, 2008, p. 16).

Richardson (2012) details a developmental model for the addressing of grief rituals in her work with indigenous Canadian families. The author outlines the use of natural medicines drawn from the land, and spiritual traditions drawn from centuries of practice. She describes an application of ritual already present in the culture as a way of addressing isolation and despair to heal community members in grief. In an article by Repar and Reid (2014), the authors measure the effectiveness of an art-based encounter in the reduction of stress and health issues resulting for workers in a hospice setting in South Africa. The authors institute a series of creative processes for workers to understand and express grief, confusion, and pain. The results suggest a significant beneficial effect on workers in several different capacities at this hospice facility. The authors conclude by asking questions that examine the potential to generalize the results they found for other populations within the health care profession.

Introduction

Sheila began therapy with me nine months after the death of her son. We began by acknowledging and exploring possible meanings to this timing. She expressed ambivalence at the idea of even symbolically “giving birth” again. The tragedy she was living through felt completely unbearable to her. In *A Broken Heart Still Beats* (1998), a bereaved mother describes the process as: “With reality comes pain, and the pain, when it comes, is stunning. The pain is actually physical, mostly in your stomach and chest. Your chest feels crushed and you can’t seem to catch your breath. I remember feeling pinned like a butterfly, or somehow eviscerated” (McCracken et al., 1998, p. 52).

Sheila was not there when her son, Sean, died. She was not in the same state. There were many painful aspects of the reality of this death for her. There was nothing in her day-to-day world or in her world of dreaming at night that was not about the death of her son. Yet, this one aspect seemed to be the most painful. Sheila was living with the overwhelming feeling of not being present to comfort and care for her son as he was dying. Additionally, Sheila did not know if her son was in pain or frightened in the last moments of his death. She felt enormous shame, guilt, and sorrow in being absent at this most important moment. She wanted, deeply, to have provided for her son, what now was never going to be able to take place. Marcia Karp (2000) in her case study on trauma describes one of the “basic psychodramatic concepts . . . is to complete those actions or relationships which life may never permit” (p. 68). I wanted to work with Sheila to create an embodied ritual. Through ritual, ceremony and performance she would be able to enact sym-

bolically what did not, and now could not, happen.

When I introduced the idea of an enactment where she could address what never happened with her son her response was, "What if I cannot do it?" Sheila did not easily embrace the idea. Also, she said she would have no idea how to do that. Cassidy, Turnbull and Gumley (2014) outline four themes that are central in how drama therapists facilitate change. These are: "working alongside, establishment of safety, client choice and control, and clients actively involved with the therapist and in their own material" (p. 357). These themes outline approaches that eventually made it possible for Sheila to begin to design and finally perform this ceremony.

I began by suggesting that Sheila take time during our sessions, or in-between them, to think about geographic places that were important to her son. We began to focus on places of meaning for Sean: places he spent a great deal of time, places he visited and greatly loved, places that Sheila went to think about her son, and finally ancestral places. It was after a few months of conversations on places of meaning as well as objects of meaning that Sheila came to a newly found conclusion on our work toward a ritual. Her statement to me was, "I think I will begin by gathering water." As Sheila thought about places of meaning for her son the theme of water seemed consistent. Her son spent fifteen years going each summer to a camp that had a lake he spent a good deal of time in. Sheila owned a home in the country that a stream ran through which is a place Sheila went to think or write about her son. Her son's death took place in close proximity to a river.

Elements of the Ritual

Mircea Eliade (1958) has identified that "water symbolizes the whole of potentiality; the source of all possible existence" (p. 188). A few pages later he states: "water becomes the supreme magic and medicinal substance" (p. 193). Sheila's choice seemed to represent a turning point (Redfern, 2014) in her engagement with creating the ritual. It was now her imagination that had found an element from nature often used in sacred ritual. To me, this felt like the beginning of Sheila taking ownership and creating this ritual.

These elements of taking time in developing ideas and allowing Sheila to identify places and choose the element of water relates to Cassidy et al. (2014) "establishing safety" and "client choice and control" (p. 357). The authors describe offering the client possibilities the client can choose from. This creates a sense of ownership and intimate connection to the artwork being created. The client is engaged in choosing the content as well as direction the drama may proceed. Sheila was overcoming her fear of the creation of a ritual by identifying simple elements of meaning: location, history, water. She

had begun the work of creating the ritual by gathering.

A turning point in Sheila's readiness to create and perform the ritual came during a session in which she brought a poem written by Paul Mariani (2005). The poem describes the death of a young man from AIDS. At the end of the poem, the poet describes a mother watching as a priest is the one "to walk across death's threshold into that room. And now . . . to see him lift her son, light as a baby with the changes death had wrought, and cradle him like that, then sing him on his way" (p. 32). Sheila's response to me after she read these words was, "Why was this denied us?" She was referring to her shared experience in the poem of not holding her dying son. She was expressing the pain and longing in not being present so that she could feel in her arms the body of her son in the moment of his dying. I felt pain and sorrow as she described this moment as well. I felt a sensation in my body of the pain of something longed for beyond description along with the knowledge that it cannot be had. Yalom (1985) describes "one fundamental procedural point: the analyst must enter the patient's experiential world" (p. 17). Landy (1986) as well identifies a necessary quality to the therapeutic work being for the drama therapist to "be willing to enter into his client's experience" (p. 61).

Awareness of deep longing for something that cannot take place is an essential experience in working with people in grief. This is the feeling of wanting the person back after they have died. The clinician knows and the patient comes into the awareness that this is a deep longing and that the fulfillment of that longing is physically impossible. This is the paradox of mourning at the center of grief. It is essential for clinicians to be cognizant of the presence and irresolvable nature of this paradox. Winnicott (1991) refers to this in his study of children. "What emerges from these considerations is the further idea that paradox accepted can have positive value. The resolution of paradox leads to a defense organization which in the adult one can encounter as true and false self organization" (p. 14).

Winnicott (1991) is describing a psychological structure of rigidity. In the therapeutic encounter with grieving people, what is longed for is a capacity from the therapist to tolerate the often excruciating truth of living inside this paradox. Sheila had asked me an unanswerable question. The question was: "Why was this denied us?" I could not answer this question, nor could she. It came from her deep longing to understand. Why could she not hold him? She was encountering this irrefutable truth with a question she was asking of me as well as God and all of existence. The clinician's responsibility in this moment is to be present physically, emotionally, and intellectually to the impossibility of this moment. It is also, as Winnicott suggests, to in no way attempt to resolve the impossibility of this longing. It was in this moment that Sheila said, "I would like to schedule a time to do this ceremony." She also

said she would like to do it sooner rather than later.

Sheila knew that the performance of the ritual would be an improvisation. I had made that clear in our first conversations. Her first response to the idea was an expression of discomfort in not knowing what to do. Her ability to now schedule this ceremony came out of this moment of shared not knowing. The poem had raised up in her an important question. She spoke the question and experienced the discomfort and unanswerable nature with another person. This level of importance, toleration of shared not knowing, and sense of safety gave way to desire in her to schedule a date to enter into the ritual itself.

The time that Sheila used for spiritual practice and specific focus on her son was each morning at sunrise. It was agreed we would perform the ceremony at my office on a Saturday at sunrise. In the weeks prior to the scheduled date, I asked Sheila to collect objects she felt would be useful in the performance of the ritual. I told her these could be anything at all and she did not need to give the selection a great deal of thought. I encouraged her to allow her instincts to choose the items.

Enactment

She arrived at my office just before sunrise on our agreed upon date. She brought a cloth bag of items. Before she opened the bag, we sat on the floor together. I had moved all the furniture out of the center of the room in preparation for our work together. We had discussed that in the ceremony she would place the objects she brought in a way they could be viewed all at once. It was my intention to be able to move physically around or through the objects. While we sat with her objects in the bag, Sheila began discussing her experience she had with other people leading up to our meeting. I did not know how we would begin to create this ceremony and, of course, neither did Sheila. Jacob Moreno is referred to as the “originator of a number of action-oriented approaches . . . one of which is psychodrama” (as cited in Landy, 2008, p. 47). Moreno (1953) states the “warming up process is the operational expression of spontaneity” (p. 14). Sheila and I were warming up to the work ahead. She had entered the therapy space with a completely different configuration of furniture. In addition, she had never been in this space at this time of day before and we were about to commence on a journey completely unknown to both of us. Our warm up of speaking about what it took for her to get here felt useful and calming. She spoke of explaining to her friends and family why she was not available for other invitations. Also, she told people she would be doing a piece of work about her son and she did not know what it would be. A part of our warm up was revisiting that we

did not know the structure of the work about to happen and checking again for the sense of safety and acceptance in the not knowing. It felt important to not rush to action, but instead allow as much time as needed to feel relaxed and talk about what it took for Sheila to arrive that morning.

The first objects Sheila took from the bag were the three vials of water. I asked her what she thought she would like to do with this water she had collected. Her response was that she did not feel they should be separate. We chose to pour the contents of the three vials into a wooden bowl in the center of the room. Sheila then began removing the other objects she had brought from the bag. It became clear immediately that these were items of deep meaning. Some of the objects were a letter hand-written by her father to her mother while he was overseas during World War II, a birthday card to her from her son where he writes: "after all these years, you are still the one I turn to for help," a collection of pictures from friends of her son sent to her for the memorial service. The final object was the baptismal clothing her son had worn on the day of his baptism.

I then suggested we arrange the objects she had brought in a circle around the water. Sheila spoke with me of what each object was as she placed them on the floor. When all the objects were laid out and the circle was complete, she stepped back to look at it as a whole. She began to move in and out of the circle and make small adjustments to the way objects faced or how they were placed. This is a moment of change I have noticed often in the practice of the creative arts therapies. The individual's concentration begins to deepen considerably at this moment. The person makes slight adjustments to the position or placement of objects in a sand tray, objects arranged on the floor, or shades of color or marks in a painting. It is a moment that has consistently represented a turning point into a much deeper level of aesthetic awareness and exploration. This idea has been articulated by Hagman (2005):

Once a mark is put on the canvas or other raw material, inner fantasy changes in response to the external image; this is followed by further action to express fantasy through increasing manipulation of the image. At this point, the distinction between inner processes and outer art object breaks down.
(p. 73)

Sheila continued to move in to adjust objects and away to observe the circle as a whole. This process felt similar to when a person's attention is drawn in toward an art object. This can be a play in the theatre, an art object in a gallery, or a piece of music in a concert hall. The element of time seemed to be forgotten and our focus increased. We became less and less aware of outside elements or factors and moved deeper to explore the meaning of the

objects. I asked if she would like to walk the entire circle with me. When we came to the baptismal clothing our progress was halted. This object seemed to hold particular importance emotionally as well as an artifact in Sheila's history.

She said the clothing seemed to represent a kind of "innocence" to her. Also, she spoke of it representing the moment that her son was baptized into the faith of the family. She questioned now, as part of this ceremony, if it was representing her son being baptized, or passing into something else. Redfern (2014) writes of "reintegration" (p. 367) as a common goal for the clients of the drama therapists he studied. The reintegration was brought about differently depending on the structure and technique used by each therapist. It remained, however, a common goal. Sheila asked, what felt to me, to be an important question addressing her need to reintegrate the memory of her son. What would her son's baptismal clothing represent his being baptized into now? Another form of this question could be: Will this ceremony be another baptism for him? In sessions following this ceremony, Sheila spoke of the "movement" of her son's spirit or presence moving on. It was a sense for her of freeing her son. She expressed a sense of confining him by certain types of memorializing or only thinking of him as he was in life or in the moments of his death. Sheila wondered if her own deep grief was holding her son fixed in some way. She was working through a need to move the feelings she held about him in death.

The possibility that seemed to be forming was that this recognition of 'baptism as change' could facilitate Sheila's reintegration of herself as whole. She was recognizing that though her son was no longer here with her, it may be possible for her to be whole even with this part of herself missing. Redfern (2014) follows his discussion of "Reintegration" with "Moving Forward: Honoring the Loss and Support for the Future" (p. 367). It is here he describes a way of honoring the loss and taking on a process of reframing the future. This clarifies for the client the idea that the present and the future are not the same as the past, and this newness holds potential for new ways of living.

Following on this idea of reintegration and moving on, I asked Sheila how we might utilize the water she had collected in relation to the objects forming the circle. We chose to have me carry the water that she had poured in the bowl as she walked the circle again. At each object she would stop and either use some of the water to sprinkle upon the object or touch the object with the water on her fingers. This action became a kind of consecration of the object. The *American Heritage Dictionary* (2000) defines "consecrate" as "to make or declare sacred" (p. 391). She embodied a sacred action through the use of water collected from places of meaning on objects of deep meaning in the course of a ritual of remembrance and reintegration of her deceased son.

She would speak either directly to the object itself or to the person who created the object. One example was a photo of her father with her son, approximately age five, on his knee.

She picked up the photograph and held it in front of her as I stood next to her with the bowl of water. Her father had died suddenly of a heart attack several years before. Sheila was not able to make it to her father before he died. She loved her father very much so this was a related experience of grief. Engaging in this ritual allowed Sheila to visit again these unresolved feelings of loss. At this moment standing and holding his picture, she spoke directly to him. She said how sad it was for her to not be there with him when he died. In previous sessions, Sheila had spoken of missing this moment. Further, she said how much she would have liked to bring her father a glass of water. She imagined that he might have been thirsty and did not have the strength to get up. At this moment in the ritual, she reached over to the bowl, dipped her fingers into it, and touched the image of her father. In this way, she was able to symbolically do what she had never been able to do in life: bring him water. As she touched his forehead in the photograph she said, "Sean loved you so much and I miss you very much."

Sheila used the water differently on the different objects around the circle. Using the cards she had laid in a pattern on the floor that were from friends of Sean's to Sheila after Sean died, she dipped her fingers into the bowl and sprinkled water over the cards in silence. Inside the birthday card Sean sent Sheila the year before he died, he included a leaf he had collected. When Sheila came to this object she picked up the leaf and dipped it into the bowl of water. She then placed it down again on the card allowing the water to stain the card. This felt related to the act of baptism represented by the baptismal clothing. Each object on the circle received water from the bowl in some form.

The last place on the circle we came to was a grouping of a pillow, a stuffed animal toy bear, a photograph of Sean standing in a doorway at an age close to his death, and a feather. The bear was Sean's childhood toy from two years old. The feather Sheila collected on a day after Sean had died. Sheila asked for a sign that Sean was okay wherever he was. As she had finished the question in her mind, this feather fell directly in her path. She had kept the feather as a comfort. It represented a message that though she did not know if he suffered or not at the time of his death, now he was okay.

Sheila described to me how she wished she could have laid her son's head on the pillow as he was dying. Sean's childhood bear was propped behind the pillow and leaning forward. The shape created by this relationship between the pillow and the bear was one of the bear "looking over" the pillow. It looked as if the bear was "watching over" the pillow with the feather

laying on one side and the photograph on the other. Sheila stood with me looking at this arrangement for several minutes. I then asked her what she felt we should do. Her response was immediate. She said, "I could put my forehead on that pillow."

Sheila knelt down and slowly moved each object off of the pillow. She then leaned forward, put her head on the pillow, and softly cried. I knelt next to her holding the bowl of water and placed my hand on her back. We stayed in this position for an indeterminate amount of time. She was enacting a moment she longed for very deeply. Something that did not happen in life that caused her enormous pain because it had not taken place, was taking place symbolically. It was not her son's head that was lying on the pillow, it was her own. It was her relatedness and connection to her son and the emotional pain she was feeling now that was being comforted by the pillow. In this moment, Sheila was enacting what Moreno and Fox (1987) describe as a "co-conscious and co-unconscious" (p. 63) exchange of roles. This exchange and connection symbolically with her son facilitated a catharsis (Blatner, 1988; Landy, 1986; Moreno, 1953) of healing for Sheila. Sheila was not using the water she had collected from places of meaning with these objects. She was instead using her tears to put water on the pillow. This represented a different kind of baptism. She was offering her tears as a baptism of sorrow and accomplishment of an act she longed for but could not perform. Baptism is used in the Christian faith as an act of cleansing of the soul. Sheila was creating an act of cleansing of her own soul for an act she felt great pain at not being able to commit.

In silence, Sheila replaced the objects on the pillow and we rose to a standing position. This silence felt profound and healing enough that I chose not to speak. I was reminded of the story of Orpheus. In one of the great myth stories of ancient Greece, Orpheus (Hillman, 2007) the son of one of the nine Muses, makes the journey to Hades because he cannot bear the loss to death of his bride Eurydice. Orpheus is a great maker of poetry and music. But his grief is so great he can make no music after his bride of two days has been bitten by a snake and died immediately. Sheila had written poetry for many years but after her son's death she had written nothing. She felt writing poetry might be something, like the life of her son, that had left her and would not be returning. Orpheus struggles with the gods to be granted the opportunity to bring Eurydice back to the world of the living from the dead. What he is charged with is to walk ahead of her on the path and not look at her until they have left the Underworld and come into the light of the world of the living. Before they reach the light Orpheus looks back. Eurydice fades back to the Underworld and Orpheus must come back to the living alone. Hillman (2007) describes the moment:

As he let go, or she let go, as he looked back because she was letting go, did he see that it was not her he desired but the longing inspired by her image? To keep the loss of her, loss as keepsake—that is what sounds through her Orphic voice. At that moment begins Orpheus's fateful chastity, chastity as that energizing fidelity to the beloved image . . . the chastity of longing required by the poetic calling, giving it wings that expand through the widest cosmos and make possible a cosmological, an Orphic, imagination. (p. 307)

Sheila had gone to a place of feeling that was very deep. The qualities of Hades Underworld seemed similar to Sheila's experience of not being there to hold and comfort her son while he was dying. It was a dark, terrible feeling that she carried in her everyday life. This feeling was cold, lonely and painful to her. It was also a great unknown, the only thing she knew of it was that it was terrible. In this moment of our standing, after she slowly and carefully replaced the objects on the pillow, it seemed Sheila had returned from the Underworld of her own pain alone. She was capable now of entering the light.

Sheila stood, looked down at the pillow then lifted her head and looked around at the entire circle, taking it all in. This was a moment of completion. I asked her if she would like to take one more walk around the circle. We did not speak on this time around the circle. This walk was a completion of the circle with our bodies. Additionally, we were acknowledging the new found meaning of these objects in our working with them throughout the morning. When we had completed the walk, I asked her if there was anything she felt she would like to do or anything we had not completed. She said it felt complete for now.

As we looked at the entire circle, I was struck by its power as one object. I asked Sheila if she would be willing to imagine this circle as an art installation perhaps located in an art gallery. I asked her what this installation would be called, what would its title be? This is a technique taught to me by Robert Landy, Ph.D. in 2007 through a series of open workshops he and Emily Nash led in New York. In these workshops the group would create a single drama or several smaller dramas in the course of a full day. When the drama was complete, Landy would ask the person whose drama was performed by the group what the title of this drama should be. The effect was often a sense of "integration and understanding" (personal communication, 2007) of the experience on the part of the person who just performed or witnessed their work. By titling the work, often the person identifies what had meaning in the drama, how the drama made sense as a whole, and the connection this particular drama made to their life.

Sheila named the drama, "An Effort Toward Gratitude." The ideas prompted by this title came up several times in our sessions together after the

ceremony. Gratefulness is an enormously difficult feeling to even imagine having as a result of tragedy. Another example of this “Effort Toward Gratitude” is in an experience she had in her workplace. She was with a group of her colleagues when one person was behaving in a way that was disruptive and stressful to the group as a whole. Sheila was not thinking of Sean when she instinctually approached and responded to the person to connect and calm them. Her colleagues later acknowledged her ability to be present and compassionate and help the situation resolve. When speaking to me of this incident in a session the following week, her response was, “I would be happy never to have known how to do that if I could still have Sean.” Sheila recognized that the tragic loss of her son had taught her things and affected her in ways she would never have anticipated. She felt a capacity to handle interactions and situations that would not have been the case before. She felt she knew something now from her encounter with this loss that brought her ways of being not possible before. As with all people who have endured tragic loss, it is not something they would ever have chosen. The pain and injustice are sometimes unbearable. But in Sheila’s case she was able to work her way toward what she characterized as “gratitude.”

To be able to perceive our life as whole and having the potential for happiness after a trauma is one of the goals of healing. Judith Herman (1992) identifies the need for victims of trauma to “reclaim their world” (p. 196). Herman describes acknowledging the destruction of the way life before the trauma and the need for the person to discover a new way of life in the present. This can be a long process of learning and allowing all the mourning along with the acknowledgement that these feelings are genuine, appropriate and can be respected and witnessed.

It appears then that the “action of telling a story” in the safety of a protected relationship can actually produce a change in the abnormal processing of the traumatic memory. With this transformation of memory comes relief of many of the major symptoms of post-traumatic stress disorder. (Herman, 1992, p. 183)

Processing

In sessions immediately following the ceremony, Sheila described having a feeling of “emptiness.” She wanted to make clear this was not a feeling of being “wiped out” or “rudderless.” The experience for her was a sense of being “spacious and clean.” Sheila’s description of “spaciousness” may be her finally feeling released from the sensation of being trapped in the trauma of her son’s death. Peter Levine (2010) describes what a person moving toward posttraumatic stress experiences. “It is my observation that a pre-

condition for the development of posttraumatic stress disorder is that a person is both frightened and perceives that he or she is trapped. The interaction of intense fear and immobility is fundamental in the formation of trauma" (p. 59).

Sheila described the feeling of the ceremony as "ancient." One of the elements she was referring to was our creation of a circle with the objects she brought. Sheila and I referred to this as a mandala. Jung (in cited in Storre, 1983) describes the mandala as "the archetype of wholeness" (p. 236): "The fact that images of this kind have under certain circumstances a considerable therapeutic effect on their authors is empirically proved and also readily understandable, in that they often represent very bold attempts to see and put together apparently irreconcilable opposites and bridge over apparently hopeless splits" (p. 238). There was no technology used during the ritual. The primary elements used in the ceremony were: water, a wooden bowl to hold the water, objects from childhood and the present and the use of our bodies in walking, speaking, and placing of objects. Victor Turner (1969) describes the value, function, and emotional depth of symbols used in a Ndembu ritual called Isoma. "They are . . . a set of evocative devices for rousing, channeling, and domesticating powerful emotions, such as hate, fear, affection and grief. In brief, the whole person, not just the Ndembu "mind," is existentially involved in the life or death issues with which Isoma is concerned" (p. 43).

Sheila also described coming away from the ritual with a sense of "modulation." Landy (1986) defines a concept in drama therapy called "Aesthetic Distance" (p. 100). This balance is achieved between two extremes. One extreme is the experience of "underdistancing" or the overwhelmingly painful or frightening effect of issues or experiences. The other is the "overdistanced" experience of having no contact or feeling regarding something we have a sense is of true importance. In Aesthetic Distance, we are conscious of and sensitive to the issues that hold sorrow or pain for us. We can also feel a sense of understanding and a capacity to work with what has brought us this pain. As a result, we can then live our lives in an informed and potentially empowered way.

Referring to her life after her son died and before performing the ritual, Sheila described her experience as either "exuberance" or "exhaustion." This was the experience of her inner life but it was also prompted by others. Sometimes, though rarely, people knew what had happened to her son and would be capable of being loving and present. More often people would be of two types. One was to not have known of the accident and respond in an overwhelming expression of shock and what felt to Sheila like an assault. The other, they knew of the accident but had no idea how to speak or even be

with Sheila in the knowledge of the death of her son. These either awkward or overwhelming moments comprised the majority of her experience. The enactment of this ritual created an experience for Sheila of Landy's (1986) Aesthetic Distance. It modeled for her a way of being with the devastating experience of her son's death and the pain of not being present to comfort him when he was dying.

Conclusion

Dennis McCarthy (2012) describes how the experience and exploration of the thing we are most afraid of, in the safety of the therapeutic environment, can bring about the change we may have never thought possible: "The metaphoric description of what has hurt us and what still hurts seems to contain within it the way forward" (p. 24). Sheila found, in the engagement with objects of great meaning, how to modulate the feelings they generated. She was able to approach a fear and sorrow of immeasurable proportion and enact it symbolically. This provided what McCarthy calls "a way forward." She described the work as an "uncovering of meaning without the swing of exuberance and exhaustion."

The experience of grief is an entrance into the liminal. This is similar to our experience of birth. We may have many ideas about the experience of birth and perhaps a great deal of feelings. When we look back on the experience we will notice it is beyond both. This is the entrance into the liminal. Like grief, it moves on the threshold between our normal waking consciousness and another, deeper experience of connecting with another. This kind of depth experience between ourselves and another might open a connection to any other being who has entered this liminal space. At the center of this experience are the components of spontaneity and the unknown. Ritual and ceremony create structures for our entrance into the unknown. Spontaneity is the tool of their exploration. The creation of Sheila's ritual along with its enactment, exploration, and spontaneity, constituted a healing ritual in grief.

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Biography

Vincent Dopulos MA, LPC, RDT is a Licensed Professional Counselor and Registered Drama Therapist in private practice in Montclair, New Jersey. He received his MA in Drama Therapy from New York University in 1996. He created and implemented a bereavement model for groups of adults for Barnabas Health Systems in Livingston, New Jersey. His work with dying people and their families is informed by his study with Roshi Joan Halifax. More information on Mr. Dopulos is available at www.counselingloss.com