

David Read Johnson Comes to Sesame – 21st March 2013

Andrew Royle

What are the similarities and differences between the Sesame Approach to dramatherapy and Developmental Transformations (DvT) an approach to dramatherapy which prioritises Improvisation and Play?

This question was explored at an evening hosted by Richard Hougham (Course Leader for The Sesame Dramatherapy MA) at The Royal Central School of Speech and Drama in March 2013. In attendance was David Read Johnson (U.S. Dramatherapist, Clinical Psychologist and creator of the DvT method). David is Director of the Institute for the Arts in Psychotherapy in New York and Co-Director of The Post-Traumatic Stress Centre in New Haven, Connecticut. The evening featured a talk on DvT by David, followed by an open conversation between Richard and David.

The following is a record of David's introductory talk on DvT and the conversation between Richard and David, including some comments from the audience:

David introduced himself and talked of his personal background. He grew up in the Mid-West (USA) and became a Physics undergraduate at Yale University, as he was interested in *certainty*. His father was an esteemed physician, but also an alcoholic. Because of this David experienced tension around his public and private identity and the ensuing shame and fear this caused. As he grew and developed distance from his home-life he became aware of not needing the certainty of physics. This is when his

interest in dramatherapy arose (though there was no official 'dramatherapy' established at the time). David said,

'this was the 1960s, a time of revolution, acid and Living Theatre.' David recalls it being an exciting time of change and of resisting certain social structures. It was also the beginning of The Creative Arts Therapies, both in the UK (with the pioneering work of Billy Lindkvist and separately Sue Jennings) and with his own work in the US where David had formed the National Association for Dramatherapy, at this time. David spoke of Billy's early work (the roots of Sesame) as being strongly influenced by the work of Carl Jung and also from Billy's explorations of tribal structures and societies (similar to Jennings). This has worked to provide the sense of a strong 'container/structure' as being at the core of Sesame. In a similar way, David referred to the influence of psychoanalysis on Eleanor Irwin's work in US, which in plumbing the depths of the unconscious is involved in a quest to explore the invisible. Similar to Irwin, David was influenced by Freud, but also he was influenced by The Grateful Dead.

David and Billy met at a conference in New Hampshire, US in 1974. David was 23 and Billy was 56. David was working in a psychiatric hospital at the time using dance, movement and touch. He attended Billy's workshop and saw significant similarities. They both prioritised the process inherent in physical movement and felt that the truth arose from a physicalised 'encounter' between the therapist and client. In this way, pointed David, DvT and Sesame both come from the same sensibility - which is to regard the therapist as a 'moving thing' as opposed to a 'thinking thing'.

David said that both he and Billy were interested in understanding the finer details involved in this process. David recalled a talk given by Billy on the implications of the therapist choosing to go clockwise or anti-clockwise around the circle. In this way, David regarded Billy as a 'technician'

whom undertook an inquiry concerning 'every little thing' we do (as therapists) in the encounter with clients. Since this meeting David has shared a friendship with Billy that continues today.

David went on to talk about his first forays into Improvisation, which though he appreciated the 'pure fun' of it, he found it initially 'terrifying'. He recognised, with Improvisation, the 'invocation for the unconscious (not a word that is used in DvT anymore) to reveal itself', since then he has spent the whole of his career, using Improvisation, as a way to figure out what happens when one person meets another. What happens, David explained, comes from the *relationship* (between the 2 or more people). Using an analogy, the relationship between therapist and client is like warming up a pot with food hardened onto the inside base. At it warms, the previously solidified matter can move and be stirred. In this way, it is the (therapeutic) relationship that provides the necessary heat.

David talked of the theoretical background to DvT as shifting from Existentialism, to Buddhism, to Post-Modernism and eventually to 'DvT-theory' (in as much as David is now creating new words that explain and conceptualise what happens in DvT sessions). Words such as *Po'a*, *h'ish* and *t'* (yes - just a single letter, with an apostrophe). All these 'words' are based on the central idea that 'Being is Unstable'. This idea (which is central to DvT) makes our interactions with others, whether it be in therapy or just generally (for example in our relationships) inherently unstable. This instability is symbolised by the apostrophes used in DvT theory, in that they point to an incompleteness (or instability) in the words themselves. Extending the example of personal relationships, David suggests that the instability in our relationships can lead to attempts by one party to force the other to 'meet our needs'. To this David replies, 'the world is not there to meet our needs'. This revelation, within intimate relationships can lead to violence and

explains why it is usually the spouse that is considered as the most likely suspect in US murder cases.

DvT for David is a 'laboratory' to work on the problems of relationship, at not constraining the other's freedom. It is an acceptance that there are certain instabilities or imbalances within relationship. David draws a parallel with the child learning to walk (like a propulsion or a lurch forwards), the child accepts there are certain imbalances inherent in walking.

'Therefore in DvT we do not talk about safety, we are interested in risk and the acceptance and management of risk'

In terms of the role of the DvT therapist, David offered another analogy – that of a Tennis Coach:

The Tennis Coach (as does the DvT therapist) will begin in very structured and unchallenging ways and gradually move into delivering more difficult and trying returns. Also, both therapist and coach will always be fully involved in the play. Here David drew a difference with Sesame, in that within a Sesame session, the therapist may find him/herself on the sidelines, perhaps if working with a myth or story. Also David regarded DvT as being a more 'stripped down' form of therapy than Sesame. Here, DvT (partly) takes its influence from Grotowski, for whom theatre is 'stripped down' to just Actor and Spectator (similarly in DvT the therapy is stripped down to Therapist and Client). The DvT therapist needs to ensure that the client feels safe enough for play, the emphasis is to push the client towards desensitisation (of the fear of instability). In particular, instabilities within one's intimate relationships, for David one of the most terrifying things to say or hear is the words 'I love you'. The softest moment can be the most challenging.

In contrast, David cited other approaches to dramatherapy that places the therapist as 'guide' or 'container' for the client to do the

inner work, e.g. 'talk to your mask or your role'. In this regard the client undertakes an internal exploration (of self) from which growth comes from the inner voyage. By comparison, DvT emphasises *otherness*, the other person – alterity. So, rather than the client's focus on the inward, it is the engagement with the Other (the therapist) that becomes the focus in DvT. It is not therefore about the therapist meeting the client's needs, but the therapist providing the Other, to enable the client to focus on the inter-personal relationship itself.

David went on to explain aspects of a DvT session. In DvT, 'everything happens in a state of play'. There is an agreement to pretend. The therapist does not come out of the play to discuss things, rather it is the therapist's job to empty themselves of treatment plans, agendas and even thoughts about the client. This enables the therapist to derive what to do next from the client. In this way, 'the client is the therapist's script'. The DvT therapist learns to really *notice* the client; however, this is not to notice what the client does in the play of the session, but what the client does not do. For example, if the client is being a snake, there are certain repeating forms (i.e. a slithering side to side movement), however the 'not snake' play or 'variations' work to show (or 'leak') the client's individuality. It is through noticing the *leakage* that the therapist and client enter a (more unstable) state of Becoming. Drawing from Existentialism, David quoted Jean-Paul Sartre's famous maxim that we are not who we are and we are what we are not. We are always pushed into the next moment, where new images arise, in this way we are 'thrown' (using Heidegger's term). This amounts to a 'prime discrepancy' in which the present moment remains uncatchable. Using another analogy, David pointed to DvT's view of the self not as an integer (a whole unit), but as an irrational number.

DvT occurs both with groups and in 1:1 sessions. In group-work, sessions usually begin with simple movement exercises, which the

group repeats and varies. Eventually images rise up within the group, which the therapist guides the group to personify (animals, figures, persons). In the move towards spontaneous free play, which characterises DvT sessions, David drew comparisons with Sesame's Main Event. In 1:1 DvT sessions, the therapist can make use of a 'witnessing circle', from which to enter and exit the play. In both Group and 1:1 sessions, the therapist leaves the room at the end of the session, there is no debrief or verbal processing. Unlike C.B.T. (Cognitive Behaviour Therapy), the emphasis is not on nailing the issue with certainty, DvT works to create a 'loose-ness' and to lessen the dependency on form.

David spoke of working with a variety of patients: geriatrics, schizophrenics, people with autism and 'normal' adults. DvT can be used with anybody that can play. Though DvT sessions can often be exuberant, this is not always the case. David spoke of his work with geriatric patients 'becoming like Butoh' – mime-like and still.

A question from the audience referred to the difficulties in engaging some children in play. The questioner referred to one child that she was working with had been very avoidant of coming to the therapy room, which had puppets, paper, cardboard boxes and other play-objects. David replied that DvT works in an *empty room*, the therapist offers him/herself to the client for play. The challenge for the therapist is how to pique the interest of the client. This can be done by chasing them, jumping on their back, fighting to the death or running away from them. 'We're on the move, we do not say anything'. Many traumatised children will not mind playing the perpetrator to the therapist's victim. Making it fun, ham-acting - the DvT therapist is looking for the smile to come onto the child's face. Some children want to be held, to be scooped up, this can then be dramatized within the encounter and some threat named whilst in the hug. The focus is to have the issue (or trauma) represented dramatically. In this way, the DvT therapist

needs to be less inhibited. To explain, David gave a metaphor of a cave. The position taken by the therapist is not to remain to the side and urge the client to go inside, rather, the therapist comes to greet the client from *the inside* of the cave, saying 'this is where I live'. The therapist appears as a gnarled figure and says 'follow me' and like Alice follows the rabbit down the hole, so does the client - it's not that Alice chooses to go of her own volition. In this way, David mused, it's not wise to invite the DvT therapist to a fancy party, 'we are not that civilised'. DvT functions to draw clients in, rather than push them forwards.

In response to another question regarding the therapist's own issues and the dangers of them becoming manifest in DvT sessions, David responded that the therapist is injured like a 'broken toy'. Each toy (and person) comes with an A.T.B (Average Time for Breaking). David referred to his own ATB as being 19 years, 'we all break at a certain point'. Yet children and clients still play with their broken toys. Therapists are often interacting with broken people and the therapist needs to model their own broken-ness (and their playability) with it. The therapist is the client's (broken) play-object. David referred to DvT training groups that have formed around the world. There are 2 Levels in the training and to 'progress' from Level 1 to Level 2 is to go down the levels; so, a sign of achievement in DvT training is that 'you're not afraid of how fucked up you are'.

Conversation between David Read Johnson and Richard Hougham

David: Do you have a question for me?

Richard: One observation or feeling I have concerns risk. DvT is risky, it works with an element of the unknown. The Sesame Approach, with its use of stories does provide some structure for sessions. The therapist will have a rationale for bringing certain stories. In this way it does have an agenda which forms the fabric

of a session. Part of the training of Sesame is of the therapist as storyteller. This provides a ritual element to the form of sessions as well as an improvisatory element (in that the client chooses what to do with the story, once it's told). In the improvisatory element, I agree with you that the action of a Sesame session is not dissimilar to DvT, but how does the form of a DvT session mitigate against risk?

David: The Storytelling form does 2 things, it provides a package or set of roles from history which allows for a safe entrance. The stories themselves are pathways (honed by history) to The Source, they have a power of their own – so why do we not use them in DvT? This is because, in DvT, we are trying to draw out the story, to excavate the story that lives in the individual. DvT doesn't go as fast in that sense, rather we knock at the door (of the client) and enquire as to what their story is about. Is there a difference in the end?

Richard: No, I guess the objective is the same and concerns the level of intimacy between therapist and client. The difference is in the fabric of the session. In Sesame the therapist guides, structures and plans more, in this way there are more building blocks in Sesame.

David: What, in the end, is the importance of the story, does it matter?

Richard: There is medicine in the story, in the distilled images of the story. The therapist develops a sensitivity towards the motivation for the selection of a story. In a humble fashion we are telling the story to allow it to vibrate, to bring back the oral tradition. But clients go off-piste. It's like in Hong Kong where they make scaffolding out of bamboo. What a client projects into it (the story) and adds to it is important, this is similar to the 'emergent' part of DvT theory.

David: The purpose of DvT is antagonistic – to disrupt the story. We want to take down the bamboo and interfere with the story-telling process. It's not that we don't respect story, but repeating forms are created. Sometimes the story has to change. We need to disrupt it otherwise we will see it looping. Coming out of a session, clients can become excited about the story, but what happens when the client begins to part from the story?

Richard: At the beginning of their Sesame training there is more of a 'holding on' to the story by therapists, later there would typically be more improvisation. Like DvT's shift between Existentialism to creating your own words in DvT, Sesame is a similar magpie, for example we draw from Rogerian (client-centred) theory too.

David: So, when clients move away from the story, what does it involve, do you catch the client with another metaphor?

Richard: You go with the story that is within the story. The therapist goes back in with an image, to punctuate.

David: In an aesthetic sense?

Richard: No, to stay connected with the client. The story that is told by the therapist is not the story that is being worked on by the client.

David: In DvT a story is played out, the therapist allows the client to play out their story. As the client departs from it, another one (story) emerges, but in DvT we think of this more as an 'arrangement'. In DvT images are also brought back to punctuate.

Richard: Both DvT and Sesame require that their therapists go through their own therapy. In Sesame there is an emphasis on Jungian analysis, the experience of this is an important stream of

the training. The importance lies not in this being behavioural or rational but in terms of the atmosphere of the images within Jungian analysis. This stems from Billy too.

David: Yes, this creates a cultural background that Sesame people share in, it forms the Sesame Approach and its soulfulness.

Richard: It helps to give the students an initiation into the unconscious, the ethical responsibility of the therapist is to get to know their shadow.

David: That's where DvT and Sesame agree. It is essential that DvT therapists are fully familiar with their shadow in order to be able to live in that imaginal space. The shadow side is being eradicated everywhere, particularly in C.B.T. which promotes that you can re-story your life (merely) consciously.

Richard: Yes, by using the frontal cortex

David: That's a similarity (of DvT and Sesame) in terms of an ethical stance, though it can create issues with funding, as we are going off-stream.

Richard: We're in an eddy.

Andrew Royle is a (Sesame Trained) dramatherapist and DvT Practitioner (Level 1). He works full-time in private practice in London.

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