A Thematic Analysis of the Experiences of Drama Therapy Patients

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ABSTRACT

Although there is growing literature regarding dramatherapy, quantities currently remain limited. This is particularly true regarding the experiences of the client. This study therefore aims to explore the experiences of dramatherapy patients through a qualitative approach by utilising semi-structured interview techniques. In order to develop a detailed understanding of individuals experiences, six participants who ranged in age from 20-32 were recruited. This sample was selected using a combination of purposeful and chain referral sampling. Subsequent to interview conduction and transcription, Braun and Clarkes (2006) guide was implemented in the generation of a thematic analysis. Four themes were identified from the interview transcriptions: *Preconceptions, Distinctiveness, Self-Discovery,* and *Personal Development.* The findings from this study provide an insight into understanding and exploring experiences of dramatherapy from the client's perspective. This study provides a foundation for future research in this field. This study also highlights strengths, limitations and scope for future research.

KEY WORDS:	DRAMATHERAPY	THERAPY	CLIENT FOCUSED	EXPLORATION	THEMATIC ANALYSIS

Introduction

Dramatherapy

Dramatherapy is a form of psychotherapy which incorporates the full spectrum of creative arts in the therapeutic relationship (BADTH, 2011). It provides clients with the opportunity to explore experiences in life which they may have found challenging through an indirect approach. Dramatherapy is a process that is carried out either individually or within a small group over a number of weeks. Whilst dramatherapy is often identified purely as a psychotherapy due to its therapeutic nature, it may also be recognised within areas of art therapy. In an attempt to define the effectiveness of dramatherapy, Jones (1996) established 9 core therapeutic processes within dramatherapy. These include 'dramatic projection', 'therapeutic performance process', 'drama-therapeutic empathy and distancing', 'personification and impersonation', 'Interactive audience and witnessing', 'embodiment', 'playing', 'life-drama connection', and 'transformation'. Jones (1996) also describes the main means by which therapeutic change may occur, with the two most noted being 'dramatic projection' and 'transformation'. He defines dramatic projection as the process of a client becoming involved in confronting issues in dramatic forms such as puppets, characters or play materials on an emotional and intellectual level. Whilst transformation he describes as the way in which a client's experience of a given problem changes throughout dramatherapy. Boal (1985) states that historically the role of drama did not focus primarily on entertainment, but rather on the liberation from negative emotions. Although dramatherapy applies techniques of drama and theatre, this incorporates a broad array of forms including role play, games, enaction, puppetry, storytelling and rituals, to name just a few (Langley, 2006). Depending on the needs or desires of the client, a dramatherapist would employ a method in order to achieve a combination of emotional release, understanding, and development of new behaviour.

Dramatherapy's Relationship with Other Psychotherapies

Being a relatively new field, dramatherapy appears to have developed its foundations based on certain basic models including, but not limited to the psychoanalytical model (Freud, 1937), Jungian model (Jung, 1961) and psychodramatic model (Moreno, 1946). A brief understanding to dramatherapys' relationship with these therapies and

elements that have assisted the development and progression of dramatherapy are provided below:

Psychoanalytical Model

As related to dramatherapy, psychoanalysis delivers an understanding to individuals repressed needs, such as power, sex and love, leading to the development of 'psychic walls' (Landy, 1994). Freuds (1943) concept of 'the unconscious mind' has contributed significantly to the processes of dramatherapy along with others such as 'transference', 'symptom formation', and 'resistance and defences' (Johnson & Emunah, 2009). The understanding of human emotion, behaviour, motivation and cognition, which are all key processes within dramatherapy treatments, can only be achieved by investigations into the unconscious realm (Shore, 2003). Freuds early theories have provided dramatherapists with an understanding of concepts which guide their work in the field (Wallerstein, 1992). Landy (1994) explains that Freuds theory of the unconscious mind is of significant relevance to dramatherapy as it 'achieves a visible form through symbolisation or representation in language or action'. Dramatherapy adapts psychoanalytic techniques to gain insight into the clients unconscious, often through the use of 'play therapy'. This can be done by observing the way in which the client presents repressed feelings through symbolic means (Landy, 1994). Courtney (1968) employed research within the field of psychoanalysis to express the importance of play in the development of the ego. He states that play is 'the link between instinctual gratification and mature thought' and is a central process in every dimension of living, inclusive of healing, thinking and learning.

Jungian Model

There are a significant number of dramatherapists who have used principals laid out by Jung as the foundation of their work (Knott, 1993; Gersie, 1991; Parker-Lewis, 1989). Although Jung (1961) built on much of the concepts previously established by Freud, there are certain unique aspects of Jung theory that pertain to dramatherapy. One of these being the emphasis Jung (1961) puts on the creativity and intuition of humans. These parts of the individual are utilised in the re-creation of archetypes and myths through internal dramatisations located within dreams, fantasies and reflections. Landy (1994) states that Jung's concept of active imagination, where

images are translated into expressive forms, offers a model that Is applicable to all creative art therapies. He also explains that Jungian models can allow for individuals to engage in dialogue with different areas of one psyche within dramatherapy. This can be done by structuring ones personality into dramatic archetypes such as the 'shadow', the 'persona', the 'anima' and the 'animus'.

<u>Psychodramatic Model</u>

There are elements of dramatherapy which incorporate that of the psychodramatic model. There is a significant overlap between the two creative action methods as both offer the opportunity for the client to be expressive of how they feel, explore their needs and talk openly. Both employ methods that encourage spontaneity as well as creative application, however dramatherapy specialises its therapeutic method around the use of dramatic components (Davis, 1975). Within dramatherapy, the term metaphor and role are both closely linked and are rudimentary to the theory. Langley (2006) defines 'metaphor' as 'the term used to describe the disguising of reality 'as if' it were real', and the 'role' as 'the character adopted by an actor for a performance'. Jones (1996) emphasises that within dramatherapy, 'role' is not limited to 'dramatic ways of working with role functions' and that its description may be applied to any persona or fictional identity that one may wish to assume. He also explains that the concept may be used to comprehend diverse aspects of a patient's identity in their life as a whole. The 'role' also acts as an important concept for psychodrama (Moreno, 1977). When focussing on role performance within their sessions, dramatherapists may choose to make use of the psychodramatic method or work within the limitations of 'metaphor' when exploring roles and relating them to reality.

Prior Research

Although there are a number of researchers which argue the forerunning aspect of the healing process is the client (Cooper et al, 2007; Levitt et al, 2006; Stiles, 2013), the quantity of research which assesses therapy from the client's viewpoint remains relatively limited. This appears particularly true in the field of dramatherapy; with the majority of research focusing on the practice of dramatherapists or the ways in which the therapy is applied (Valente et al, 1991; Grainger, 1990). A meta-analysis by Levitt et al (2016) argues that practitioners and researchers of psychotherapy should be

educated by qualitative evidence gathered from clients' personal experiences of therapy. Although it was published specifically regarding psychotherapy, it applies equally to dramatherapy. The meta-analysis by Levitt et al (2016) demonstrated the usefulness of qualitative research on the experiences of clients, and also emphasised the important effect understanding the clients' experiences has on informing conclusions within therapy.

Present Study

Although the utilisation of dramatherapy continues to grow, there appears to be a gap in research with regards to understanding how clients view their experiences of the therapy. McLeod (1994) states that research should strive to illuminate how individuals understand experience in order to gain a better understanding of processes and events. The study at hand will employ a qualitative research method in order to develop insight into the client's first-hand experiences of dramatherapy and will attempt to extract individuals' thoughts and feelings pertaining to the subject. These in-depth accounts will be recorded and analysed in order to explore the following research question: How do patients experience dramatherapy?

This study aims to:
- Provide an insight into patients experiences of dramatherapy.
- Explore what can be learnt from dramatherapy based on patients' experiences.

Methodology

Design

A qualitative approach was implemented for this study as it was deemed to be the most appropriate method to investigate the experiences of dramatherapy patients. Qualitative research focuses on presenting or interpreting people's views, interactions or values (Atkins & Wallace, 2012). Exploring these views can allow qualitive research to reveal gravitations towards particular thoughts or opinions which enhances the ability to gain an understanding of participants experiences. As the emphasis of this study was the exploration of the experiences of participants, six semi-structured interviews ranging from 25 to 40 minutes in length were employed. These interviews

consisted of thirteen pre-determined open-ended questions which covered a number of areas relevant to experiences of therapy.

Participants

For the purpose of this research, participants consisted of six females between the age of 20 and 32. It was a formal requirement that participants had either previously received dramatherapy or were undergoing dramatherapy at the point of being interviewed. Participants were selected through a combination of purposeful sampling and chain referral sampling (Berg & Lune, 2004). Participants were sought out through an online dramatherapy forum, however due a limited quantity of reachable participants, chain referral sampling was implemented. Because of the researchers limited access to individuals who had undergone dramatherapy solely as patients, several participants in this study were MSc Dramatherapy (DT) students who had received dramatherapy as part of their training (see Table 1).

Table 1. *Participant Information*

Participant: A	Participant: B	Participant: C
Gender: Female **Age:** 27 **DT MSc Student:** YES	**Gender:** Female **Age:** 23 **DT MSc Student:** YES	**Gender:** Female **Age:** 32 **DT MSc Student:** NO
Participant: D	Participant: E	Participant: F
Gender: Female **Age:** 24 **DT MSc Student:** NO	**Gender:** Female **Age:** 26 **DT MSc Student:** YES	**Gender:** Female **Age:** 20 **DT MSc Student:** NO

Data Collection

Semi-structured interviews were utilised in the collection of data for this study in order to generate reliable and comparable data (Edwards & Holland, 2013) which facilitated the extraction of participant's personal experiences of dramatherapy. Six one-on-one interviews were conducted using an 'interview guide' as their base but permitting the

conversation to follow topical trajectories if they were considered beneficial or applicable. An 'interview guide' was devised to include questions which pertained to dramatherapy with the intent of extracting quality data regarding the experiences that patients had. Prior to conducting the interviews, participants were sent a participant information sheet (APPX 1) and consent form (APPX 2) which was signed and returned. The participant information sheet described what each individual's involvement would entail and the nature of the research. Once signed and consent forms had been received, interviews were carried out over the telephone in a quiet meeting room at the Manchester Metropolitan University. Immediately prior to conduction of the interview, participants were reminded that they were not obligated to answer any of the questions should they not wish to, and that their data could be removed from the study if requested by a specified date. Telephone interviews were recorded with the use of call recording software. Subsequent to interview completion, participants were verbally debriefed and reminded of the available contacts listed on the participant information sheet should they at any point feel distressed as a direct result of taking part in this study. Prior to conducting this research, ethical approval was received from the Manchester Metropolitan University Ethics Committee through the submission of an ethical approval request (APPX 3). This research also followed the guidelines laid out by the British Psychological Society. The anonymity of all patients was kept intact as all names were replaced with suitable pseudonyms. Let it be noted that all data, inclusive of audio files and interview transcriptions, was stored on a password protected computer within an encrypted file. All data will be deleted subsequent to the completion of this research project.

Data Analysis

The method of analysis for this research was thematic analysis (Braun & Clarke, 2006). This method was chosen as it allowed patterns and areas of relevance pertaining to the participants personal experiences, views and opinions to be clearly identified. Thematic analysis was deemed to be the most effective method of gaining detailed knowledge and insight from the collected data. Subsequent to the transcription of the interviews, data from the transcripts was coded in order to organise it into meaningful groupings, from which themes were then identified. These themes were then reviewed and defined. Guidance pertaining to the complete process of

conducting a thematic analysis was received through the thematic analysis guide laid out by Braun and Clarke (2006). This involved working step-by-step through six 'phases' which are presented below (see Table 2).

Table 2. *Braun & Clarkes (2006) Six Phases of Analysis*

Phase 1	Familiarisation
Phase 2	Coding
Phase 3	Code Grouping/ Searching for Themes
Phase 4	Reviewing Themes
Phase 5	Defining & Naming Themes
Phase 6	Reporting of Themes

Analysis & Discussion

The Thematic analysis brought light to four main themes. These themes clearly highlight some of the most prevalent experiences of dramatherapy patients. The four themes that were Identified are: 'Preconceptions', 'Distinctiveness', 'Self Discovery' and 'Personal Development'. These themes have been analysed on a level that is both interpretative and latent in order to deliver insight into the experiences discussed by dramatherapy clients.

Theme 1: Preconceptions

The first major theme that emerged from analysing the interviews was how predominantly preconceptions spanned across almost all participants. Several participants made a note of their concerns regarding how they or others were likely to be subjected to preconceptions prior to starting dramatherapy:

"I don't think people realise how diverse it actually is…I'd heard of music and art therapy, but never really thought about dramatherapy…It uses so many different components and most people don't realise that because they think it's just like going to drama school, but it's not." (Participant F, lines 206-211)

"Before I went to a session myself, I used to think it would be best only for people who are non-verbal because I knew it was a creative type of therapy. But it would really work for anyone." (Participant D, lines 143-145)

A common issue that was experienced was the connotations implied by the therapy's' name and what the use of the word 'drama' evoked. Participants explained how it may lead to individuals making assumptions regarding the therapy.

"I think the problem with the term 'dramatherapy' is that people assume that it's a drama activity or drama class, which it's not…In my opinion it should be called 'creative arts therapy'." (Participant E, lines 207-213)

"…the name is quite scary because people think of drama and…performance. I think that can evoke some difficulties in people…but when you attend a dramatherapy session you realise that its none of those things. It's all about the process, the dynamic of the journey, the stories, and the metaphors…the client's feelings and emotions…" (Participant A, lines 155-162)

Participant E also mentioned that "for those who hate drama or performance, it may seem daunting and they may keep away because of misconceptions" (lines 198-199). It can be understood from the experiences of patients that accessibility to dramatherapy may be significantly limited by preconceptions and negative connotations based on misconceptions. It was mentioned that due to the wide range of creative applications that dramatherapy encompasses, 'creative arts therapy' may be considered a more suitable name. Dramatherapy has received its name due to its traditional values of drama in therapy, however as stated by Langley (2006), dramatherapy is not about delivering therapy through performance, but rather the application of dramatic and theatrical techniques. It is therefore understandable that due to its name, there may be confusions regarding what dramatherapy entails. A study by Taylor et al (2001) which aimed to understand clients' experiences of preconceptions of therapy, found that one aspect fuelling preconceptions of therapy is the attached stigma which provides meaning prior to personal experience. This stigma finds itself connected with all types of therapy, inclusive of dramatherapy as confirmed by Participant E who explained that when she first started going, she thought "well I'm

fine, I'm a very well-rounded person" (line 94). This implies that she too had been subject to the stigma that therapy is just for 'sick' or 'unbalanced' individuals.

Theme 2: Distinctiveness

<u>Comparison to Other Therapies</u>

Another theme that became apparent was distinctiveness.   Several participants stressed how dramatherapy was not like other therapies they had tried or encountered and pointed out features that help set it apart from others. Clients appeared to have benefitted greatly from the client centred stance of dramatherapy as it gave them a sense of control and allowed them to be the instigators of their own development.

"I have a lot more control over it (therapy) and I'm not just ticking some boxes. Especially with CBT which tends to be quite short term…dramatherapy is at the opposite end of that…It's a lot more about your own journey…" (Participant A, lines 146-152)

Participant F mentioned the impact which the therapeutic processes of dramatherapy may have had on her compared to other therapies that she had tried. In her particular case, visualisation, which has become a theoretical foundation of dramatherapy (Folostina et al, 2015), was highlighted as a key benefit.

"I've had so many different types of therapy…and it hasn't really worked before…the fact that I would be able to visualise things as part of dramatherapy is what was going to help me the most." (Participant F, lines 134-139)

Several participants implied that issues they had faced relating to previous therapies which they had tried were overcome through the 'activeness' of dramatherapy. Participant D stated that people may respond better to the "activeness of dramatherapy rather than traditional therapy styles" (line 137).   This belief was supported by other participants who found that dramatherapy was much better at stimulating internal thought processes than traditional therapies which were associated with 'sitting in a chair':

"I've seen one to one therapy from a psychotherapist and its very different because I was sitting in a chair and I'm speaking for an hour, whereas in dramatherapy I get to have some of my own internal thought processes and share as much of that as I want." (Participant B, lines 107-110)

"If you're just sitting in a chair in a therapy session, there is so much going on under that verbal part of the brain and dramatherapy has allowed me to unlock everything else in my body." (Participant D, lines 110-112)

It can be interpreted from Participant D's statement that embodiment is an aspect of dramatherapy which she experienced to be of significance in her personal change or development. Embodiment is one of Jones (1996) core therapeutic process by which the client is able to explore emotional hurt or distress as it relates to their body. Shared experiences such as this are crucial in identifying areas of dramatherapy which clients find most valuable.

Universality

Participants generally were able to set dramatherapy apart from other types of therapy based on its universality. When asked if they would recommend dramatherapy to others in similar situations to themselves, all participants unanimously agreed that they would. Johnson et al (2009) expresses that almost all approaches are suitable for a large variety of populations as well as ages and are not population dependant. Not only is dramatherapy considered to be universally accessible, most participants felt they were able to recommend it to others. Participant B stated, "I whole heartedly would recommend it because it can be transformative unexpectedly" (lines 141-142). Most participants believed that it would also be both beneficial and accessible to any individual, regardless of age or ability:

"Well, the beauty of dramatherapy is that it does not have one specific way of working with people. I feel that anyone could access it, from very young to very old." (Participant E, lines 192-193)

"I think it can benefit literally everyone…I can't imagine a client group that wouldn't benefit from it really." (Participant A, lines 177-179)

"I know that everyone could benefit from even just elements of what dramatherapy is, and what it has to offer. It's assessable to anyone because anyone has the ability to use their imagination and tell a story, or put pen to paper, or get messy"
(Participant C, lines 177-180)

The wide array of forms that dramatherapy has at its disposal are deemed to explain why all participants reported positive change as a result of taking part in the therapy. It is understood from participant C's data that the ability to be expressive, in whatever form, is all that is required to benefit from what dramatherapy has to offer. Creative expression is not only universally achievable but is also vital in the fulfilment of basic human needs and processing (McNiff, 2004; Slade, 1995).

Theme 3: Self Discovery

<u>Self-Awareness</u>

Most participants expressed an experience in discovering new elements of the self of which they were previously unaware:

"You might be talking about something that's bothered you in a relationship and you realise that it's actually got a history, parts of yourself that you're not really aware of until you've experienced this kind of therapy." (Participant D, lines 22-25)

"…become more aware of how I connect to people in the group, and the certain rules I might take on in a group situation. It's made me more self-aware. I think it's a huge part of self-development, being able to refine your own character and…how you present yourself in different group situations." (Participant B, lines 124-128)

Grofs' (1988) belief is that accessing the personal unconscious is usually activated initially by means of the sensory organs. Dramatherapy is able to help individuals through its use of all the human senses (Mullen, 2019) which may explain why clients of the therapy suggested experiences of heightened self-awareness as a result of the treatment.

"If you're not really sure why you feel that way…you can go in and see a therapist and talk to them about why you feel bad. But it might not actually be why…I believe that dramatherapy really help you understand where these feelings come from."
(Participant F, lines 198-202)

"There were themes that came up for me. Anger, I had a lot of anger, yeah, anger inside and working that out. But also, how much of a reflector I am and how much I overanalyse and how much I struggle to explain myself…" (Participant C, lines 60-62)

The elements of the self which participant C was able to discover may have been extracted with the assistance of dramatherapys core processes (Jones, 1996). She appears to have benefited particularly from 'drama-therapeutic distancing' which focuses on being able to be reflective and gain perspective. Similarly, focus on group interactions mentioned by participant B may have been accessed through elements of 'play' as it promotes continual development in ones emotions, cognition, and relationships (Gersie, 2014). It could also be interpreted that she was able to find benefit in 'Personification and impersonation' which delivers the opportunity to explore oneself and discover what it may be like to see things from the perspective of others (Jones, 1996).

<u>The Shadow Archetype</u>

Several participants shared their experiences of discovering certain aspects of themselves which were less positive. They explained that some features of dramatherapy can lead to the exploration of repressed segments of oneself which they may have chosen to ignore in the past.

"(I'm able to understand) shadow aspects of myself, because it gives you the opportunity to work on parts of yourself that you maybe don't like, or you don't want other people to see." (Participant D, lines 82-83)

"It brings up maybe some of your shadow self and that side of you that you don't always want to explore, but it's useful to explore at that moment in time…you need to deal with some emotions that you're not always prepared to have." (Participant A, lines 47-51)

It can be interpreted from the data that clients' experiences of dramatherapy are in line with the beliefs of Stevens et al (1996) who stated that it provides clients with everything they need to develop individuation and their "innermost, last and incomparable uniqueness". Sacks (1981) explains that drama offers great scope for recapturing and processing memories which may be traumatic which may have originally led to the client 'acting-out' inappropriately. This is a reasonable assumption considering the significant development the personal shadow receives from childhood events that are perceived as traumatic (Tornyai, 2003).

Theme 4: Personal Development

<u>Facilitating Factors</u>

The final theme of key significance was that of personal development. Most participants were able to highlight factors of development which they attributed to receiving dramatherapy. When discussing factors which may have influenced or facilitated these changes, all participants appeared to be affected by different aspects of dramatherapy:

"It's really nice to think that you can use any form to describe and put across how you're feeling, and someone is going to help you understand how you're feeling without even using words." (Participant F, lines 218-220)

"Through metaphors…you're able to kind of look at things in a different perspective. It allows you to get closer to the problem as well because you're not talking about you…It's much easier to talk about yourself from a distanced place." (Participant E, lines 120-122)

Participant E brings attention to 'talking about herself from a distanced place' as a factor that has helped her realise personal change. As mentioned earlier, 'drama-therapeutic processing' is one of Jones' (1996) core processes of dramatherapy. Due

to its frequent occurrence within several participants experiences of the therapy, dramatherapists could benefit from developing their effectiveness of the concept. This can be achieved through developing an understanding of the dimensions of distancing and how this relates to the needs of the client (Landy, 1983).

"I think it has a very particular way of inviting introspection and especially when you are in a group setting, alongside other people it's really effective, really powerful."
(Participant B, lines 77-79)

The present study allows for enhanced knowledge into what aspect of dramatherapy clients find most beneficial in summoning positive changes. Being a client centred therapy, dramatherapy should benefit greatly from directing its efforts towards what the client believes is most effective to them personally. It can also be seen that each participant had their own unique path to achieving change. This supports the importance of dramatherapys' diverse nature.

<u>Personal Changes</u>

Through various facilitating factors, including those previously mentioned, participants were able to experience changes in themselves which made up an important feature of their individual development. The personal changes did not appear to be representative of a particular trend, except that they may be linked to an increased awareness of the self:

"…now I have boundaries which I didn't have before, and I know how much I can and can't do, and who are good people to be around and who aren't good people to be around." (Participant F, lines 98-100)

"…I don't take things as personally anymore because I have more of an understanding of the fact that we are all human and we all have our own things. I'm a lot more independent too I guess, and feel a lot more integrated…" (Participant D, lines 49-51)

"…It's improved my feeling of self-worth and I'm able to reflect a lot better on emotional changes within myself. It's improved my awareness of unconscious things that are there and has given me more of an understanding of my coping strategies…where they have come from…why I use them." (Participant E, lines 40-44)

It is understood from the participants' experiences of personal change that development can appear unexpectedly. It appeared that in most cases, the participants were not expecting the changes which they ultimately achieved. Participant B stated, "It's not something that you can plan for or have goals in because something might come up and take you in a whole different direction" (lines 142-143). In an early publication, (Austin, 1917) emphasises the effects that dynamic involvement in dramatic concepts can have on individual change. Emunah (2013) explains that having a personal relationship with the creative arts, or with others who find themselves engaged in art forms can have transformative effects on oneself. It can therefore be deduced that the dramatic aspects of dramatherapy had significant effects on personal changes for the clients, but that it wasn't always possible to foresee and plan these changes.

Concluding Remarks

The aims of this study were to gain an insight into the experiences of dramatherapy patients and to explore what can be learnt as a result of these experiences. All four themes presented in this study successfully provided an understanding of the experiences of dramatherapy patients. Participant data was interpreted and discussed to provide the reader with an understanding that pertained to the clients' experiences of preconceptions, the distinctiveness of dramatherapy, self-discovery, and personal development. The findings provide an insight into the positive qualities, effectiveness, and understanding of dramatherapy, as expressed by the participants and establishes grounds for future research of a similar nature.

Limitations and Future Research

The utilisation of a qualitive approach in the study at hand should be recognised as a key strength as it allowed for an in-depth personal account to be recorded from

participants pertaining to their experiences of an under-researched area. Several limitations were identified in this study. The first of these is the sample that was available. Due to the obscurity of dramatherapy, recruitment of relevant participants was challenging, hence the inclusion of students who had received dramatherapy as part of their training. Although the participation of dramatherapy students was deemed relevant in this study, research focusing purely on the clients of the therapy may have yielded different results.

Another limitation was the sex of the participants, as data was gathered from female participants only, again, due to the available sample. It is therefore not representative of the general population of dramatherapy patients. Future research in this area could incorporate the experiences of both male and female participants to establish a more comprehensive understanding of patients experiences of dramatherapy. In order to increase the generalisation of this study to a larger population of dramatherapy patients, future research could also increase the sample size.

Questions were included in the interview in an attempt to understand the negative aspects the individuals may have experienced. Upon interpretation, no negative features of significance were identified in the data. Future research may benefit from exploring this further and attempting to extract negative factors pertaining to the experiences of dramatherapy which may remain unmentioned.

Reflexive Analysis

As this research is qualitative in nature, it is therefore important to be reflexive as the analysis of the researched topic area may find itself influenced by the researchers views and experiences (Watt, 2007). Having a performance background and a diverse interest in the creative arts, I was keen to develop my understanding of how it can be applied to my area of study, psychology. I personally have benefited from exposure to creative elements in the past and subsequent to discovering dramatherapy, wanted to explore its effects and how clients experience them first hand. After preliminary research into the topic area, I had built an understanding of what dramatherapy is within the context of theory, however I was not enlightened as to how clients of the theory experience it for themselves. Having never been involved in a dramatherapy session myself, yet craving to comprehend how others experience it, is what formed

the basis for this study. I was conscious of the fact that the recruited participants may not have felt comfortable divulging their full experiences of the studied phenomenon to a stranger. I do however believe that conducting the interviews over the phone may have been beneficial in the extraction of true experiential data due to an added level of anonymity. Due to my lack of direct experience with dramatherapy prior to conducting this research, I did not have any concerns of personal bias with relation to analysing the results and believe that objectivity was maintained throughout.

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