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ISOLATION AND COLLABORATION IN THE CREATIVE ARTS THERAPIES—THE IMPLICATIONS OF CROSSING BORDERS

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Once upon a time, very long ago, people protected themselves by constructing stone walls around their villages and towns. The good townspeople did this for good reasons: to keep out invaders and foreigners and, in many cases, to stop the exodus of their own citizens and slaves who might feel the need to search for a better life on the outside.

But these very protectors all eventually learned the same lesson: no border is impenetrable; no wall is high enough or thick enough to keep the enemy out or the malcontent in. And yet, even though generations of protectors have accepted this common knowledge, they still continue to repeat the same defensive patterns to this very day.

Some, however, in their abundant sagacity, held an alternative point of view. If you can neither keep the enemy out nor the malcontent in, let them all go where they will. Perhaps then these invaders, undesirables and pariahs will either go away or find a peaceful place among more accepting neighbors. Over time, these peacemakers noted some contradictory evidence. Sometimes, when the walls went down, an intermingling of peoples and ideas helped nurture the land and people lived in peace. But other times, foreigners exploited, raped, and maimed the land and its people. Sometimes, when the walls went down, people left to find more desirable lands or, when faced with the choice of leaving, decided to stay and make a better life for themselves. But other times,

people left in droves, depleting the resources of their native land or, when confronted with a choice, stayed out of fear of the unknown and grew old and bitter with regret.

In my profession as a drama therapist, I often ask people to make up stories and, if possible, to reflect upon them, drawing parallels between the fictions that arise spontaneously and their everyday lives. I try to help them discover the nature of their problems as embedded in characters and themes created in their fictions. Theoretically, I am not a follower of Freud, Jung, Laing, Winnicott, Laçan, Skinner, Perls, Moreno, Minushin, Stanislavski, Artaud, Brecht and countless others, even though I have drawn sustenance from all. My thinking is closest to the early 19th century poet and illustrator, William Blake, whose striking images can best be described as paradoxical, as existing in "fearful symmetry," one to another. This point of view is well-illustrated in the qualities of divine beauty and savage ferocity co-existing within the form of the tiger, found in Blake's "Songs of Experience." And the tiger, itself, becomes the antithesis of the lamb, a Christ-like figure in Blake's "Songs of Innocence."

In the opening story, I refer to the protectors, those who defend the need to construct borders, and the peacemakers, those who wish to remove boundaries in the hope of reconciliation and freedom of movement. As a parable, this story is about the implica-

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tions of crossing borders. And this story sets the stage for the following remarks on the creative arts therapies. My thinking has certainly been influenced by the many sectarian political and military struggles in the former Yugoslavia and Soviet Union, in Israel and the Middle East, in Northern Ireland and South Africa, in Rwanda and Zaire, and closer to home, in Cuba, which recently opened its tightly-shut doors and tens of thousands spilled out in search of a better life.

As a creative arts therapist I will aim my remarks at a profession that I see as at a crossroad. Some of the road signs point in a hopeful direction: there is a European consortium for creative arts therapists that fosters dialogue among the arts therapy disciplines and among various cultures; there is an American association that has been on a similar mission, NCATA; there are significant international attempts at research and publication (e.g., the journal, *The Arts in Psychotherapy*, and the developing list of offerings by the British publisher, Jessica Kingsley, for one). There are also examples of links between the creative arts therapies and medicine (see Aldridge & Brandt, 1991), collaborations between therapists from different art modalities and different cultures (see Jennings & Minde, 1993) and attempts to create an integrated theoretical sense of how and why the aesthetic process is healing (see *The Arts in Psychotherapy*, special issue on Aesthetics, 1992; see Landy, 1993; see Knill, 1994).

But the signs that point to another road are less sanguine. This path leads to the domain of the protectors and isolates. This is the path of bureaucratic, entrenched mental health systems. When on this road, the traveler is fearful of real and imagined dangers: cutbacks in funds for medium and long-term treatment of clients; cutbacks in funds for research; difficulties in achieving professional credibility through licensure and hierarchical systems; suspiciousness in the mental health establishment and the public at large of alternative models of healing; fear that the profession one has chosen is discredited, scientifically unverifiable, frivolous and even shameful (see Johnson, 1994). When on this path some develop grandiose fantasies, splitting off from their colleagues in related arts modalities, believing that music or dance or art or drama or poetry is the best way of healing. Others go further, splitting their disciplines into smaller pieces, touting GIM (Guided Imagery Through Music) or authentic movement or the developmental method of drama therapy as the preferred trail. As these borders grow thicker and higher, within, between and among

individuals, possibilities for reconciliation diminish. Differences are indeed important and provide uniqueness to practitioners. But when differences become dogma, the borders become impenetrable.

As a creative arts therapist, I have stood at this crossroad many times and still, when there, always need to consider which path to take. I stand at that crossroad now. There is part of me that wants to reach out openly and let in the mix of voices and experiences surrounding me. And there is part of me that wants to shut the gates and assume my position in the field as superior and thus in need of defending.

The defender part experiences a sense of isolation and insecurity. I am an American among Europeans. I am a drama therapist (two words) among only a handful of dramatherapists (one word). I am neither a medical doctor nor a research scientist. I have no hard data to report. In my many years of work reporting the effects of drama therapy on a variety of client populations, I can boast neither reliability nor validity. In my country, because of my credentials, or lack thereof, my clients cannot claim insurance reimbursement.

The more open part of me wants reconciliation and connection. I am a fellow creative arts therapist. I work with images, metaphors, roles and fictions, just like most of you. The national borders and differences among our modalities of treatment are ultimately insignificant for, as professionals, we are more alike than different. Like many of you I am and was a creative artist first and therapist second who believes that the aesthetic act is an inherently healing one and who verifies my work through qualitative means.

I do not think that my position is particularly unique. It seems to me that one very human struggle on a personal and professional level pits the forces of isolation against those of collaboration. It seems to me that as a profession with interior borders dividing our arts disciplines and exterior borders separating our profession from other healing arts and sciences (e.g., medicine, psychology and psychiatry, social work and occupational therapy), we need to find a way to live in the paradox of collaboration and isolation. In many ways, my personal attempt to reconcile these two positions is what has led me to Blake and to a paradoxical frame of reference in which to better understand my professional responsibilities.

At New York University, we offer an advanced graduate course called Collaboration in the Creative Arts Therapies. The course is team-taught by an art, music and drama therapist and includes an equal num-

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