

“Dramatherapy with overweight and obese women”

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In my Ph.D. thesis, the effects of a brief Dramatherapy group with overweight and obese women with a strong desire to lose weight were investigated. The method involved two Group Case studies of short duration (12 weeks). The premise of this research was that the symptom was in some way linked to low self-esteem. The aim of the Dramatherapy intervention was to provide the subjects with support to build up their self-esteem, examine their interpersonal relationships, develop their creativity and, as a result, be able to develop a more positive approach to food and eating, which may lead to improved body image satisfaction and weight loss.

Dramatherapy offers overweight and obese women the chance to work through emotional experiences that have become somatised or registered in their body. Through dramatic activity, unconscious material may be brought to the surface, which may result in insight and release.

The process of this research is defined as Dramatherapy, involving a qualified Dramatherapist and her group. Dramatherapy, an artistic therapy based on the art of theatre, is applied in clinical and social settings, with both individuals and groups. The process entails using theatrical methods, as well as working with symbolism and metaphor. Dramatherapy facilitates working through conflicts and emotions and understanding the issues underlying difficulties with food, using ‘dramatic distance’ (Scheff, 1979).

The aetiology of obesity and overweight is not always clear and can have

genetic or biological roots, be related to the social environment of the individual or may have psychological origins. Nor is it possible to delineate the areas of aetiology, and some may overlap. The aetiology may be varied and complex, hence, the need for the therapist to be aware of a variety of possible areas of aetiology.

Irrespective of aetiology, the result is usually poor body image satisfaction and in consequence low self esteem. With obese and overweight women, it is important to understand the issues underlying the difficulties with food and the patients' lack of self-esteem. Since being overweight is a socially reinforced reason for unhappiness and depression, a female may attribute feelings of frustration, anger, and worthlessness to being overweight instead of to the real source, e.g. marital discord, role conflict or job dissatisfaction. Clients with eating disorders act out their inner emotional conflicts through eating behaviours and food preoccupation. Therefore, it is important to investigate the possible underlying causes of their condition and address them therapeutically.

Through making art and drama, these clients find a means of expressing their emotions, with the result that art itself becomes the medium of communication between the self and the environment and between the client and the therapist. Each art medium encourages the client's own special language to emerge and to be used as a communication of hidden or forgotten parts of themselves. The common ground of all arts therapies includes focus on non-verbal communication and creative processes.

Jung (1963) believed that creativity was essentially therapeutic and that it allowed for a synthesis between the artist's inner world and external reality. Artwork is an integrative combination of inner and external realities, which inspires a feeling of completion and determination. Jennings (1990; 1993; 1998) and Landy (1986; 1992) talk about the creative process and how this facilitates clients to understand their personal issues making them feel a liberating effect. This research tried to demonstrate that when a person is feeling stronger and happy about him/herself then he/she is in a better position to consider a healthier attitude towards food, with the result that loss of weight may follow.

Design

1. A pilot group and two case-study groups were included in the design.
2. Each group had six to eight participants. The participants were overweight and obese women dissatisfied with their body image. Their common interest was to lose weight.

1. Procedure for taking part

Each proposed participant had a preliminary meeting with the practitioner-researcher during which she was informed about the research and what her participation would involve. If the candidate agreed to take part in the research she then had a second meeting. At the second meeting she gave a brief case history and signed a consent form accepting her participation in the research (50 minutes). Next, the candidate was tested (10 minutes) on two standard tests. These standard tests were repeated twice more at later dates.

- (a) Pre-intervention.
- (b) 12 weeks later - post-intervention.
- (c) 24 weeks later - follow-up.

Ethical matters

- In the participant release agreement the participants gave their permission for the data of the research study to be used in the process of completing the Dramatherapy intervention on the understanding that their name and other demographic information which could identify them would not be used.

- No fee was charged to the participants, as their participation in the Dramatherapy would be part of a research study.
- Participants were informed at the first meeting that those who wanted to withdraw from the research could do so and still remain in the group.

At the outset of the thesis, I conjectured a possible correlation between involvement, motivation and commitment and outcomes. In the light of the results I identified a clear correlation between the two, showing that without involvement, motivation and commitment positive results are less likely to occur.

I concluded by summarising the positive effects of the intervention. In brief, the aims of the treatment seem to have been achieved to a degree that may affect the lives of the participants in a positive way, particularly where interpersonal relationships are concerned. A more positive approach to food and eating was achieved in many cases. Few of the participants, however, registered an ideal attitude to food and eating on the EAT-26 test¹ at the closure of the intervention or six months later.

Modest improvements were registered in both body image satisfaction and weight loss in the majority of participants. However, the researcher regards these results as being quite positive, considering the length of the intervention. On the whole, perfect body image satisfaction was reached by few of the participants and weight loss on the whole was moderate, not enough to have a significant impact on the health or appearance of all but two of the participants.

Words 1040 out of 1.320

¹ An eating disorder evaluation test

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