The last few decades mark one of the most fruitful periods in the exploration of the use of drama as a therapeutic tool. The increasing interest in this field is shared by both mental health practitioners (Landy, 1986; Schattner & Courtney, 1981), and theater people (Schechner, 1973; Bentley, 1977; Simmer, 1976). Out of this effort to understand and implement the healing potential of drama, the field of drama therapy was born.

At this early stage in its development, drama therapy is still in search of an identity of its own, or, if we may use another metaphor, is in a "vision quest." Contributions to the discipline arrive from various sources (Landy, 1984), and the field appears to be open to establishing links between the theatrical and the psychological components which have conceived it.

Drama therapy encompasses a variety of orientations—from theater in education and psychodrama, to ritual therapy and anthropological theater. Because of its hybrid nature, it is not easy to condense the essence of this field into one single definition. The present author, however, ventures to offer the following: Drama therapy is the intentional use of the dramatic medium for the purposes of healing, integration and growth.

In contrast to the relative "newness" of drama therapy, the beginnings of shamanism are pre-historic (Schechner, 1973). Some scholars believe shamanism was the true genesis of theater (Schechner, 1973; Cole, 1975; Kirby, 1976). If indeed theater originates out of a tradition that naturally blends both healing and theatrical elements, then the therapeutic com-
ponent is not necessarily an external factor to be added to drama, but possibly an intrinsic aspect of it.

In spite of the abundant literature that is now available on shamanism, many drama therapists—including those from a clinical-therapeutic background—have yet to explore the subject in depth. A large portion of the research that seeks to relate shamanism to a healing form of theater comes from anthropologists or from theater people (Schechner, 1973; Cole, 1975; Brook, 1978). Similarly, although there are clearly transpersonal elements in both shamanism and the theater, the use of a transpersonal perspective as a theoretical framework for drama therapy is yet to be well developed.

It is the purpose of this article, therefore, to attempt a bridging between theories. It suggests that shamanism can be a basis for the development of drama therapy with a transpersonal orientation. To this end, the paper first briefly states the similarities and differences among actors, shamans, and drama therapists, and second, examines their transpersonal aspects.

SHAMANS AND ACTORS

Shamans and actors belong to a common tradition; they both are well versed in the arts of chanting, improvising, role-playing, etc. Both allow themselves to be "possessed" by either spirits or characters; and both are expert mediators between different planes of reality (Schechner, 1973; Cole, 1975; Schmidt, 1987).

Like the shaman, the performer uses imagery in order to create a character, and is capable of "traveling to another world"—the world of the play—while also staying in touch with the "here and now" of this world (Cole, 1975; Harner & Doore, 1987; Achterberg, 1987). Moreover, in order to allow for this kind of transformation to occur, actors must enter into a state of awareness which is different from the normal, waking consciousness, and which may be compared to the shamanistic state of consciousness. Although performers do not undergo a "trance" in the technical sense of the term, acting does involve a sort of dis-identification from one's ego-self.

This dis-identification produces a strange effect in the performer, for as Schechner (1985) points out, the actor is taken into the realm of the "not me—not not me." To illustrate, an actress playing the role of Desdemona cannot say that she is playing herself; but at the same time, she cannot say that she is not "not playing" herself. Like shamans, actors too must learn how to
exist in this meta-level, being the bridge that links different worlds, but without losing contact with any of them. If an actor failed to enter into the realm of the imaginal, he or she would not be able to convey that world to the audience. Likewise the actor that lost touch with ordinary reality would find it very difficult to interact with other performers on stage. In short, like shamans, performers also “must learn how to sink without drowning” (Schmidt, 1987, p. 70).

In spite of the fact that similar techniques are shared by actors and shamans, it is the mission of the latter to use them for healing purposes. Whether shamanism aims to cure an illness, to guide a recently deceased soul, or to restore a person's psychic balance, the shamanic event has as its intention, a healing function. This is where theater departs from such origins. Shamans seem to be aware of the fact that that which is performed in the imaginal world has a healing potential, while actors generally do not make much use of this potential. In this regard, drama therapists may be more like shamans than actors.

HEALING THROUGH ACTION:
SHAMANS AND DRAMA THERAPISTS

One of the characteristics of shamans is that they symbolically take an illness upon themselves, thus attempting to liberate the patient from it (Hoppal, 1987). In shamanistic terms, this method is believed to have results because it is assumed to be part of the shaman's wisdom and expertise to have the ability to fight the source of the disease. In this way, the illness is "taken up" by a specially prepared individual who has more tools than the ordinary person, someone who has access to spirit "helpers," and who can therefore be in touch with both the disease and its antidote.

In trying to translate this shamanic technique into drama therapy nomenclature, we might find that similar methods could be used by drama therapists, though with differences in assumptions, emphases, and styles.

Drama therapists know that the enactment of a conflict, a dream, a vision, an experience, etc., carries with it the seed of a therapeutic act. Dramatization allows any experience to exist by giving it a place in time, thus making it present. Drama is, in fact, about "making something present" (Cole, 1975). Viewed in this manner, the shaman's technique may lead to a patient's relief because, as a first step towards treatment, the enactment by the shaman gives external expression to the patient's
condition. At least in a temporary sense, the shaman’s enactment might result in the patient’s liberation from the illness. But even more than that, by becoming the protagonist of the patient’s disease, the shaman “makes the illness explicit, thus providing the person with emotional tools to help tolerate it.” (Schmidt, 1987; p.72). Thus, the shamanic technique is based on the transference of the illness onto a specialist who, using his or her power and dramatic tools, is able to mirror it back to the individual. From a drama therapy perspective, this technique could be called mirroring. For it involves the dramatic expression of a part of the individual (the condition), in such a way that patients are turned into spectators of their own problem.

Although drama therapists generally do not play out the client’s “issue,” to the extent that shamans do, they may, under certain circumstances, use similar approaches. For example, when working with an individual client, they may enact the role of a significant other, the person’s alter-ego, or take one side of the client’s conflict. In groups, this may be done with other members’ help—which results in a variation of the shamanic technique, one in which the role of the shaman is shared by a group.

Mirroring is widely used in both drama and dance therapy because it has the capacity to reflect something back to the client, and create a distance between the person and the issue. As a dramatic healing tool, the mirroring technique is utilized in a variety of ways. e.g” Playback Theater developed a method by which a group of well-trained actors improvise a piece based on experience referred to them by someone in the audience (Fox, 1981). Another form of mirroring is the psychodramatic “double,” whose role is to reflect the protagonist’s unspoken emotions, etc. The rationale underlying this technique is that while watching their situation from a distance, people can get insights into what has created it, and how they can change it. For example, I used this method with an individual client who could not get up from a chair to dramatize. This passivity was also a reflection of the person’s inability to take any action in real life. Instead of going into a verbal session, I proceeded to mirror her attitude by enacting it, which helped to put her in contact with what was going on in her life.

In spite of the fact that mirroring is not regarded in drama therapy as a technique by which therapists take the problem upon themselves, at a dramatic level that is exactly what happens. The drama therapist’s participation in the enactment of the client’s situation may be regarded as a sort of temporary transference of the problem (or at least a part of it) onto the
therapist. Furthermore, while helping to dramatize the person's issue, drama therapists are not limited to performance of the situation exactly "as it is," but are able to introject their own insights, so as to help the client bring other aspects into awareness. In this sense, we could say that drama therapists, like shamans, accept the transference of the problem by participating in its enactment. By using their intuition and therapeutic tools, they mirror it back to the person, adding to the scene a variety of elements that were not consciously presented by the client.

Thus, like the shaman who travels to the underworld to find the source of the illness, and makes it explicit through dramatization, the drama therapist travels to the client's unconscious to meet with the person's "monsters," and bring them into the open through theatrical means. In this regard, the main difference between the shamanistic and drama therapy methods is that while the shaman often makes the journey alone, the drama therapist tries to bring the client along. A lesser distinction between the two is the degree to which the transference of the patient/client condition is effected, and the extent to which the patient/client is involved in the performance. Shamans, in taking the illness upon themselves, also take charge of the entire situation, Drama therapists by contrast, step in and out of the action, sharing the role with the client.

TRANPERSONAL ASPECTS OF SHAMANISM AND DRAMA THERAPY

As lung (1983) pointed out, shamanistic symbolism may be regarded as a projection of the individuation process onto the cosmos. There is also a correspondence between shamanic cosmology and Assagioli's theory of the structure of the psyche (Pendzik, 1987). Briefly stated, a comparison between the three cosmic regions of the shamanic universe (lower, middle and upper worlds), and Assagioli's notions concerning the three-leveled personal unconscious, reveals that both approaches share a similar model. Furthermore, Assagioli's idea about the "conscious self" or "I," which is the center of consciousness (Assagioli, 1971), parallels the shamanistic concept of the "center." According to Eliade (1972), this center constitutes the point of connection between the three shamanistic levels. It is only through the "center"that the shaman is able to climb up or descend to other cosmic regions, because this point is "open"to various realities. Much in the same manner, Assagioli (1971) suggests that the way of approaching the higher Self—which he locates in the higher unconscious—is through moving from the center of consciousness or "I" upwards.
Shamans assume their work to be possible by virtue of the existence of "spirits" or "entities" which have the capacity to "either enhance growth or inflict illnesses" (N01, 1987, p. 48). It is with these forces that shamans work, and it is to them that they turn for help. Like shamanism, the history of drama therapy suggests that it may be suffused with transpersonal meanings. How such transpersonal meanings might come into play can be seen by examining three aspects of the "body" of drama therapy: role, stage and performance.

**ROLE**

In drama therapy a role can be seen as an indicator of the person's behavioral patterns, emotional maturity, ability to empathize with another person, etc. (Johnson, 1981). An expansion of a person's "role repertoire" is believed to lead to a greater sense of choice and flexibility (Blatner, 1973). Likewise, the role is regarded as a mediator between "person" and "other," in such a way that role-taking is assumed to involve a process of identification and projection (Landy, 1986).

As mentioned earlier, however, role-taking also implies a dis-identification with one's ego-self, in order to become a "role." That is to say, an individual's capacity to "transform" into something other than himself/herself is a function of their ability to separate from their ego-self. Meditation techniques are sometimes used to achieve a similar purpose. Through the consistent practice of meditation the meditator's sense of self-identity may come to be perceived as less rigid and fixed, as the observation of one's constantly changing experience dispels the illusion of being always the same (Engler, 1986).

A similar effect can be produced by the consistent practice of role-taking. The widening of one's repertoire of roles brings along two different and inter-related sets of feelings. On one hand, the enactment of different roles evolves into a sense that "what I believe to be myself changes according to the character I play." In this way, the perception of one's ego-self becomes more flexible. This process parallels the "shaking up" of one's illusion of identity produced by meditation. On the other hand, role-taking contributes to the development of what Engler (1987) calls a "therapeutic split of the ego." Perhaps the process through which meditation develops an internal "observer" aware of images and experiences, is similar to the way performers learn to differentiate between "role" and "self." This split comes into existence because there is never a complete fusion of these structures as long as the individual is not totally absorbed by the role but remains in contact with both the role and the
observer function. This is what skilled performers do—at least ideally. Unfortunately, in the theater—as among many who practice spiritual techniques (Engler, 1986)—the chances of getting off the path are significant (Pendzik, 1987).

Viewed from a Jungian perspective, a role allows for the integration of shadow contents. Unacceptable feelings and/or aspects of one’s personality become easier to express and to accept through the distance and the freedom inherent in the act of playing “somebody else.” Thus, a person who has a hard time accepting, for example, his or her “envious” aspect, might be more able to let it be expressed if it is acted out within a role. In this way, the responsibility is shared with the role. Finally, roles may be regarded from a wider perspective, that is, as representing archetypal figures, which are struggling to come out.

STAGE

The place in which enactment occurs becomes "special" by virtue of holding the manifestation of a different reality. The defined area of the stage—whether it be a conventional stage, a place in a room, or an entire room—recreates the idea of the sacred space, because it is that place in which the “invisible becomes visible” (Pendzik, 1987).

Historically, the stage evolved out of sacred spaces. The first stages were magic circles, altars, or just defined places, which were made sacred in order to perform in them. Likewise, many cultures believe that the act of performing within a space has the effect of "cosmicizing" it, thus making the place sacred. That is the reason for which rituals are performed in newly acquired houses or territories (Eliade, 1959).

In shamanism, the performing area is made sacred in order for the healing to occur. The shamanic stage is usually characterized by the presence of a tree, or another symbol of the "center" (Eliade, 1912). In this way, shamans turn the space into a virtual "center of the world," from which communication with other dimensions is possible.

Many of the traits that characterize the archetype of the sacred space can still be observed in the theater stage—a fact that may have implications as far as the therapeutic use of the stage is concerned. If the stage is a modified version of the sacred space, then similar healing properties to those attributed by ancient traditions to the archetype could also be applicable to the stage. Like the mandala—which Jung (1983) believed to be another
manifestation of the archetype - the stage embodies the archetypal image of the sacred space and by extension, the center. According to Jung (1983), mandala symbols are projections of internal psychic structures, and have the peculiarity of exerting a counter-influence upon the unconscious, in connection with which they were always endowed with magical powers. Jung argues that the mandala represents a premonition of a centre of personality, a kind of central point within the psyche, to which everything is related, by which everything is arranged, and which is itself a source of energy. The energy of this central point is manifested in the almost irresistible compulsion and urge to become what one is (Jung, 1980, p. 357; italics in the original).

If both the mandala and the stage derive from the same archetypal image, then the healing power of the stage may be similar to that of the mandala. In fact, Moreno's first attempts to create a stage that would best suit his idea of a therapeutic theater, resulted in a stage architecture that forms a mandala on the ground (Pendzik, J 987). In transpersonal terms, stepping onto a stage cannot be regarded as simply changing place; the connections between the stage and the sacred space are sufficient that positioning oneself on the stage could mean "stepping onto an archetype."

PERFORMANCE

The act of performing may involve elements of transcendence. One of the paths that drama therapy can take is called the "performance style." This approach involves the therapeutic development of a play and its presentation in front of an audience. This method has proven to be useful with psychiatric patients (Emunah & Johnson, 1983), disabled people (Cohen, 1985; Simmer, 1976), and others. Whenever the performance style is utilized, the therapeutic impact expands to encompass larger segments of the community. Theater can often be a positive experience for the spectator; however, it could be more so if it were to be done with a therapeutic intention. By sharing the therapeutic process with an audience, the experience acquires another dimension as the audience is also incorporated into it. This is one way in which performance can be said to have a transcending element, because its effects expand the group's psychological boundaries, perhaps even allowing its influence to permeate society at large. Used in this sense, the transcending element inherent in performance is related to a social dimension.
Similarly, every dramatization involves a departure from concrete reality in order to enter into the symbolic world of the "as if" (Johnson, 1981). For example, if I were to pretend that the room I'm working in is a rocket that is aimed toward the moon, I would have to look at the objects in the room very differently. I would imagine the word processor to be the control panel of the rocket, the lamp would become a T.V. phone through which I get calls from all over the universe, and any person coming into my room would be treated as if they were an astronaut who is helping me in the "mission." If I would not be able to transcend, at least imaginarily, the concrete reality of this room, this transformation would never be possible. I would be sitting in my real room, unable to play anything that is not "myself sitting in the room." The departure from everyday life reality is the essence of all dramatic forms, and it demands a transcendence of the concrete "here and now." Seen from this perspective, transcendence is an inevitable requisite in any performance.

However, as mentioned before, dramatic transcendence also involves staying in touch with concrete reality. In fact, it has been noted elsewhere that very disturbed individuals find it hard to "transcend" actual reality, and are fearful of engaging in pretend games (Johnson, 1981). Like the practice of meditation, dramatic transcendence requires a developed ego-structure (Engler, 1986).

Yet, transcendence has another function in relation to performance—its place in ritual practices and shamanism. The idea that performance can transcend the level of ordinary material reality, and hence, have an impact upon it, is the rationale underlying most ritual practices. Similarly, at the heart of shamanic healing is the belief that the shaman's performance in the "other world" also has repercussions in this world. Thus, in Chiapas, Mexico, for instance, the restoration of a person's lost soul through the shaman's ritual performance has the effect of curing that person from espanto (the illness by which the soul escapes from the body) (Tappan, 1985). Similarly, it is believed that the shaman's performance of certain rites and songs transcends this reality to the extent that it can fertilize the earth, make the rain fall, etc. (Tappan, 1985). In the shamanic tradition, the idea of transcendence is closely linked to the assumption that the entities that influence the world can be reached through the shaman's journey. In fact, the shaman's performance would be considered useless if it would not achieve this purpose. In shamanism and ritual practices, then, transcendence is a goal, for performance not only transcends but also circles back to this world.
There are, then, three different ways in which performance can transcend: social, personal and transpersonal. These levels are not mutually exclusive, but on the contrary may occur simultaneously. Most drama therapists have focussed on the first two meanings of transcendence. The social dimension has been particularly developed in community theater and sociodrama; transcendence at the personal level has been used both for diagnostic purposes (Johnson, 1981), and as a therapeutic goal (Koltai, 1981). However, the transpersonal implications of performance have been, for the most part, undeveloped.

CONCLUSION

Drama therapy can be adapted to psychoanalytical theory, transactional analysis, different developmental models, etc. This paper has suggested that there is also a basis for a transpersonal drama therapy orientation. Since shamanism constitutes an ancient version of modern drama therapy (Jennings, 1987), and since shamanistic practices are imbued with a transpersonal significance, it follows that the development of a transpersonal drama therapy theory could be aided by a knowledge of the dynamics of shamanism. Moreover, given the roots and history of drama, the transpersonal dimension could be seen as an integral part of drama therapy. Indeed, more research is needed to further define the basic elements of a theory of "modern shamanism."

The practice of a transpersonal drama therapy orientation would not appear to entail the exclusion of other perspectives. In the same way that the concept of role seen from different levels can serve different purposes, it could be assumed that drama therapists would be free to integrate other models into their work. In the case of transpersonal psychotherapy, this integrative approach has been useful in generating corrections, refinements, and extensions of theory and practice. It has been pointed out by some clinicians (Engler, 1986; Scotton, 1985) that the focus on the positive and spiritual values intrinsic to the field of transpersonal psychotherapy need not become obstacles to the therapist's work on personal, interpersonal, developmental, or more concrete, daily life material (May, 1986). This philosophy could also apply to the practice of transpersonal drama therapy, where personal, transpersonal, and social dimensions are to be integrated, as each one expresses a different part of our humanness. This is not different from the lessons of the shamans who taught that the universe includes upper, middle and lower worlds, and that there is work to be done in each of these worlds.
REFERENCES


