Jung’s View on Personality & PTSD and Applied Drama Therapy Techniques for PTSD Veterans in Vietnam War

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**Introduction**

The history of concepts of personality begins in the fourth century with the pioneer philosophers Hippocrates and Plato, many other philosophers. View brought by Sigmon Freud created an immense impact on the modern research on personality. It consisted with a structural model where concepts of Id, Ego, and Super Ego were presented and topographical model where concepts of Conscious, Unconscious, and Subconscious were presented (Bornstein, 2005).

Concepts that Freud increased the research interest on the subject, Personality. However, concepts were also subjected to criticisms on their scientific and empirical drawbacks. Early followers of Freud later came up with their own theories on Personality and Carl G. Jung can be identified as such Neo-Freudian. In 1875 Jung was born in Switzerland in a highly religious family background which highly influenced religious aspects of his theories later. (Smith & Vetor, 1991). After graduation in 1902 from Medical School of the University of Basle, Jung worked closely with Freud and later became the first president of the International Psychoanalytic Society (Nystul, 1993). Mainly due to emphasis that was given for sexual drive in human life and different structure of personality by Freud, Jung selected a different direction and created his own personality theory under Analytical Psychology (Laszlo, 1959).

**Jung’s View on Personality**

Contrasts to Freud’s approach, Jung views human in a positive approach and believed that each wants to keep their marks or kindle a light in darkness. This process was named as ‘Individuation’ which is believed to be a genuine need to reach towards ‘Self Realization’ in one’s personality which is named as ‘Psyche’ (Smith & Vetter 1991). Aligned to Freud, he also believed about existence of both conscious and unconscious level in our personality but came up with a different structural view. Psyche is consisted with different units that work oppositely in independent and interdependent levels. Although he more focused on the positive side of human, same time mentioned about a dark side in which person need to be conscious. He believed the individuation process would not be complete unless a proper integration between both of these levels and believed about continuous flow of energy in human psyche (Fadiman & R.Frager, 2002).
Psyche is consisted with Conscious component where our thoughts, feelings and perceptions are available, Personal Unconscious component where our repressed memories from our past & unimportant memories to be in Conscious component and Collective Unconscious component which is non personal is shared by human in universal level.

Idea about Personal Unconscious is similar to what Freud shared on Unconscious of human. Idea about Collective Unconscious can be identified as a completely new dimension and it contradicts with the Behaviorists’ view of ‘Tabula Rasa’ or blank state. According to Jung there is a certain common structure of all individuals identical to each that passes through ancestors (Kaufmann, 1989). The universal structure building units of collective unconscious were named as Primordial Images or Archetypes where further he believed them to be associated with memory traces of cortex. These are basic forms which do not contain any content but supports to organize contents in our psyche. Jung categorized the ego, the persona, the shadow, the anima, the animus and the self which are structures of psyche he identified as archetypes. (PROGOFF, 1960)

Psyche that was described by Jung can be presented through an upright, non rigid and movable cylinder. First layer is the conscious level and Ego is the main body of it with thoughts, feelings, sensations and perceptions. Although Ego doesn’t include any unconscious material, Jung stated that it was initially built from unconscious component and located in between conscious and unconscious components (Hall, 1989) Persona is the layers that cover Ego and act as a social mask in different environments we are present. This is what we show to the society and Jung believed that in individuation less focus is on persona and more focus in on inside (Nystul, 1993).

Middle layer is the personal unconscious and ‘Self’ is located at the center of it. Self is the controlling unit or stabling unit of one’s psyche. Self is developed once individual deviates from the sole focus of conscious level to middle between conscious and unconscious which normally occurs during middle age. Self is surrounded by three other important archetypes, shadow, anima/animus and complexes (Hall, 1989).

Jung described Anima as the feminine part that exists in men and Animus as the masculine part that exists in female. Despite of the stereotypic picture given by the society,
availability of both these elements results to increase understanding, collaboration and existence in society (Jung & Campbell, 1976). The bottom layer of cylinder is the collective unconscious and parts of ‘Shadow’ are located in both of middle and bottom layers. Shadow consists with the individual’s evil side which is unaccepted by the society. This is the opposite of persona and Jung believed this as a result of our evolutionary process. One needs immense courage to accept his own shadow and this is the first step in Analytical Psychology therapies (Jung & Campbell, 1976). Emotionally activated ideas around an archetype are called as Complexes. These complexes are generated through continuous involvement with these archetypes and key concepts that are built by society around them (Rychlak, 1981). Due to their existence in personal unconscious individual doesn’t notice them. But Jung believed understanding them as vital, since split of those powerful complexes could lead to maladjustments in individuals (Jung, 1910).

**Post-Traumatic Stress Disorder (PTSD)**

Almost everybody experience it a trauma in a scary, dangerous and shocking situation. However most of us get recovered naturally from those circumstances. People who have PTSD will still be afraid even when a danger is not present and it becomes a chronic illness. (Gant, 2013) There can be re-experience symptoms such as flashbacks of the incident, frightening thoughts and frightening dreams. There can be avoidance symptoms such as avoiding places related to trauma and avoiding thoughts and symbols that remind of traumatic event. There can be arousal symptoms such as being startled and disturbed sleep. There can be cognition and mood symptoms such as negative thoughts about world, guilt and blame. (Wilson, 2004)

**Jungian Perspective of PTSD**

According to Jung’s explanation each complex built in the psyche have a particular theme. Elements which are having same types of feelings get together to create a complex. All the complexes get united to create a common theme related to the event and perception of the event. ("NAAP | Jung's Complex Theory", 2016)

In a trauma, Psyche develops autonomous complexes to face it. They are created in order to protect ego from getting overwhelmed by the bad experiences of trauma such as thoughts and images. However with time theses complexes start to fight with the ego to take the dominance of
conscious mind. (Gant, 2013) Psyche will be split off so that the complexes formed will disturb conscious functioning of mind. It can result in PTSD, borderline personality and psychosis. Unconscious mechanisms of PTSD are created in order to react vulnerability of traumatic effects such as shame, fear and helplessness. ("NAAP | Jung's Complex Theory", 2016)

Furthermore Jung studied on various types of psychic complexes and was able to describe eight dimensions of complexes formed by trauma. (Wilson, 2004). They are,

1. Disturbing consciousness
2. Disrupting unity of consciousness
3. Disturbs the will
4. Affects memory
5. Energy of complexes increase sometimes unconsciously
6. A momentarily state of duress
7. Compulsive thoughts and acts
8. Diminished judicial responsibility

The researches of the time Jean, Pierre Janet and Josef Breuer who were working closely with Freud also presented explanations which are supportive to the complex theory. The ideas of Pierre Janet was also helpful for Jung to derive further explanations. According to that when a person experiences emotions which he is unable to control or take actions it becomes overwhelming to the ego. At this point a process called dissociation occurs. It will break the memory of the traumatic incident into parts. According to him this splitting of psyche is normal and universal. Only an extreme splitting off is harmful and creates disaster in mind. (Kudler, 1991)

However Jung has explained that any event charged with emotions will build complexes so they are not always having trauma in them. Two persons could have faced the same trauma. This happens mostly in wars. However the way they respond to it will depend on their personalities and intra-psychic functioning (Gant, 2013).

According to research conducted by Kulka et al. (1988), 34% of Vietnam veterans were suffered by PTSD even after several years and this war has been influential in recognizing PTSD by American Psychiatric Association. Drama therapy many and other
creative arts therapies are highly effective in treating PTSD, since most of the experiences with audio and visual components can be easily brought into therapeutic room, compared to traditional verbal therapeutic process. (Kudler, 1991)

A drama therapy treatment process conducted for the Vietnam veterans in a Veterans Affairs Medical Center held four month integrated treatment process is analyzed and described below. A group of fifteen veterans engaged for one hour drama therapy session on weekly basis. Group treatment process was used where victims can be observed, engaged and learnt through the alike other individual who affected from same trauma. The therapeutic process can be mainly divided into few components. (James & Johnson, 1996)

**Developmental Transformation**

Familiarization of group participants for the spontaneous, creative and dramatic environment was mainly targeted at the beginning. Most important task was the creation of ‘play space’, imaginary environment where participants can share experiences (Johnson, 1987). Therapist led the group without highly structured program but developed from leader designed to group structures through his minor involvements and at the same time created continuity of play. In a circle, initially participants performed movement and sound activities, then image development, character representation and lastly for role plays (ibid).

**Rage Phase**

Releasing the destructive anger was the main aim in this phase. Therapist played a key role in structuring group emotions without overwhelming them.

As a warm-up, participants were asked to produce movements of pushes, slash and punches to the sounds of cries, scream and grunt for a certain period of time. Later a traumatic material, role of an opposition soldier was put to play and participants were told attacked him by expressing their anger. They were asked to crush him under their foot and later it turned into dog shit where they had to clean their boot which created lot of fun. In one session therapist came into the middle and participants were asked to destroy him which they did in a brutal manner. Later they were divided into two groups and tried to destroy each other with imaginary weapons.
Participants were able to present their anger in playful environment like that. (Johnson, Forrester, Dintino, James, & Schnee, 1996)

In another activity, a clay man was created by participants. The clay man represented different roles such as doctors, politicians and authorities where each participant got the chance to accuse them with their feelings. As the second phase, therapist performed the roles suggested by participants and roles moved to more personal individuals like parents and wives. This showcased the intensive level of emotional effects they had towards their close circles. This also showcased the emotional assurance that participants had towards group and play space. Participants showed more control in handling their anger after these activities. (James & Johnson, 1996)

In another session as a warm-up, participants were asked to produce movements of pushes, slash and punches to sounds that they preferred for a certain period of time. Then they were asked to produce sound and movement tosses which increased connection among members. For further increase connection, therapist suggests to pass an imaginary bird from hand to hand of group members. Later this turned into throw of imaginary shit targeting next participant where target tried to avoid and escape. Imaginary wash line was created by the therapist and participants were asked to come to the line to be cleaned. Then a circle was created, one by one participants got to the middle and ‘shit shakedown’ or his cleaning was done by other members. (Johnson, 1991)

Automatically a playful situation was created at this time and participants started to act as children. Therapist started to play the role of a victimized child from the war. Participants quickly understood the transformation and one participant started to act role of injured veteran from the attack of opposition force. Level of anxiety increased, energy decreased and therapist started a different role play to maintain flow and distanced the participants (Johnson, 1992).
**Shame Phase**

In this phase expression of inner feelings like loneliness, guilt, regret and fear was mainly focused. During this period acceptance, tolerance and respect given by the therapist is critical. Physical movements were tend to be soft or fluid with humming, chanting, howling and with equipment whips where participants more connected in victim side.

In an activity where puppies, kittens and babies were used only some participants were able to tolerate these innocent creatures where others tried to destroy. The unpleasant experience they had towards their inner child could be the reason for this rejection. In different activities they played the role of fire fighters who had to save a child in the building. Participants saved the child, adopted and treated very well which reflected their hopes for better future.

There was a heavy stone where each participant came to the middle and held with huge difficulty. Then the group threw him the images of weapons, body parts and emotions like fear and guilt. By maintaining the heavy stone they had to catch them. Then each person’s load was put into a caldron and participants believed whoever drinks would feel their situation. Each of them drank from it and expressed their stressing feelings.

In another activity a drain of stressing feelings was created. Fat & ugly man emerged from this drain and tried to pull group members towards the drain where participants had to fight with him. Finally all of them got together and put the fat & ugly man which symbolized their inner voice to the drain and seal it. Another occasion therapist played the role of ‘Memory Dentist’ who pulled out stressing memories by taking participants one by one. Therapist found stressing memory from the participants heart, made it visible at ‘Memory Projector’ while describing. (James & Johnson, 1996)
Empathy Phase

In this phase participants were expected to accept the reality, forgive themselves and start a new journey. Further explosion of the repressed feelings were expected with a great acceptance from fellow participants. Therapist roles were also changed from a dominant level to more friendly behavior.

As a warm up, participants displayed more light and flicking movements. In an activity participants started to play the role of a music band singing a song, later changed into a faith healing service in a church. Participants expected an inside healing. Therapist started a meeting where each came to the front and confessed. After the confession rest of the group member came and hugged the individual where group showcased a great level of acceptance, forgiveness and support for each.

Image of a weight was displayed to the group members and each were asked to carry an imaginary burden and asked to showcase its affect. Each felt down to the floor with weight, therapist added all the burden into one block and directed all participants to hold it together.

Therapist converted participants to PTSD magicians who meet in mid night to deal with stressing feelings. Referring to the previously used caldron, therapy emphasized that soup could destroy them if they were not a part of the magicians’ circle. Participant stirred the soup and he was asked to take a feeling out of it. Participants were asked to put that emotions in a human figure basically how it could look like be. A participant was acted accordingly as the emotion and continued the discussion with rest of the group members.

Finally, each member was asked to divide his burden into parts and hand it over to group participants and hug them. Very emotional, relaxed and closed environment was created at the end. (James & Johnson, 1996)
Conclusion

Personality Theory presented by Carl G. Jung has been able to position itself uniquely among other views at that time. This approach is considered as a comprehensive one with the dimensions received from other fields like philosophy, anthropology, archaeology, literature, and religion. After structural and functional identification of personality, Jung further explained causes for psychological disorders. Jungian explanation on Post-Traumatic Stress Disorder (PTSD) is considered and application of drama therapy techniques is critically analyzed using a case study of Vietnam War veterans. It can be identified that drama therapy techniques used within the integrated treatment plan have affected significantly for these veterans during their recovery process and can be further experimented in different clinical settings for PTSD.

References


