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DIGITIZED DRAMATHERAPY AS A MENTAL HEALTH SERVICE DURING COVID-19 PANDEMIC PERIOD

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ABSTRACT

Covid-19 pandemic situation compelled dramatherapists to identify a novel mode in practicing dramatherapy, since social distancing was a strict policy, in Sri Lanka. To minimize the risk of coronavirus threat, both the dramatherapist and the client had to remove themselves from the conventional dramatherapy room, and resort to a safe space in virtual reality, to conduct therapy. The alternative means for the practice were the digital platforms, such as Whatsapp, Skype, Imo, and Botim. This study aimed at answering the following research question: How effective is dramatherapy, as a digitized practice, during Covid-19 period, in Sri Lanka? As a convenient sample, a number of five clients who received dramatherapy assistance through digital platforms, were selected for this study. They presented mental health difficulties related to work stress, anger, separation anxiety, fear of losing the job, and anxiety attacks. Their consent was obtained to utilize data arising from post-intervention semi-structured interviews, to answer the research question. Qualitative data was analysed thematically, and four super-ordinate themes emerged in the analysis, namely, digital containment, digital platform for interaction, creativity in a digital space, and recovery of an independent agent. During Covid-19 period, the client could utilize a digital platform as a meeting place with the dramatherapist, and form interaction to enhance social engagement. Digital platforms supported space for client's creativity, improving self-confidence, encouraging self-expression, and motivating towards creative resolution of emotional difficulties. Ethical concerns emerged, as digital platforms do not guarantee security of data, and privacy of the clients. Despite these limitations, digitizing the practice of dramatherapy was beneficial for the clients to emerge from their psychological and emotional difficulties, during Covid-19 period.

INTRODUCTION

Coronavirus is a new pandemic we do not know much about; our understanding is evolving day by day. Moreover, mixed messages are being disseminated from politicians, health care professionals, organizational leaders, and our intimate social circles. This lack of information and mixed messaging breeds anxiety by making us feel out of control, and unsure of what to believe. The future feels unknown and we struggle to find a secure leg on which to stand, grasping for some semblance of certitude with which to anticipate a narrative about the impending days, weeks, and months to come (Gupta, 2020, p.599-600).

Imposition of curfew to contain Covid-19 pandemic, in Sri Lanka, restricted routine movement of people. Curfew measures affected the mental health service providers, and in particular, the dramatherapists. Strict regulations on social distancing had a disruptive impact on the conventional practice of the dramatherapist. The traditional dramatherapy clinic became dysfunctional, discontinuing the dramatherapy sessions, and making the clients helpless, and distraught at this challenging time.

Remedial measures were crucial to remove the obstruction to the practice of dramatherapy. Under the current circumstances, it was vital to ensure availability of dramatherapy, as a mental health service. Hence, the dramatherapist was compelled to identify a novel space.

During Covid-19 pandemic period, mental health practitioners, in this country and elsewhere, adapted themselves to utilize digital platforms (DPs) to support their clients (Kapoor et al., 2020; Chang et al., 2020). The dramatherapist, in Sri Lanka, too, had no option, but to adopt this alternative mode. Rapid virtualization, under the present circumstances, has shown that clinicians, and patients can quickly adapt to tele-psychotherapy, however, the shift is 'not without challenges and lessons learned' (Schore et al., 2020, p. E1).

Covid-19 pandemic created an atmosphere for a large-scale psychosocial support for people facing diverse mental health issues (Dubey et al., 2020). Financial and vocational uncertainty, and worries

about personal health, family, and friends, have become immediate mental health outcomes among people. Also, some people show adjustment and anxiety issues, increasing the demand for mental health services. Besides illness concerns, school closures, and self-quarantining have created distress among people. Some people without any mental health condition are potentially at heightened risk of a new onset (ibid).

The sensational media reporting on COVID-19 inculcated further worry and helplessness among the public, in Sri Lanka. "This led to the formation of harmful stereotypes and increased stigma", (Perera & Suraweera, 2020, p.6). Since the curfew infringed the right on free movement, family members confined to each other's company for prolonged periods, worsened their frustration, and led to interpersonal conflicts. Also, there were concerns about the increase in domestic violence (ibid). Further, the healthcare workers on duty round the clock during the pandemic suffer from psychological distress stemming from actions, or lack of actions, which may cultivate shame, guilt and disgust (ibid).

As a mental health service, dramatherapy can be beneficial to those affected due to Covid-19. Currently, there is little study in Sri Lanka, on the impact of digitized dramatherapy, for psychologically distressed people, under the prevailing situation. Hence, this study identifies a research gap, to understand the effectiveness of dramatherapy, as a digitized practice, to address people's mental health concerns, during Covid-19 pandemic period, in Sri Lanka.

LITERATURE REVIEW

A recent study by Atsmon & Pendzik (2020) surveyed the use of digital media in clinical dramatherapy situations, interviewing 'well-established' dramatherapists from different geographical locations of the globe. They have focused on three questions, namely, what practitioners use, how they use it, and what their experience is. As the investigators state, the study did not intend to provide a 'cohesive theory' about digitizing dramatherapy, but it 'offered a preliminary overview of existing practices', which can guide the practitioners in utilizing a variety of

resources, experiences and techniques, to upgrade their practice. Speaking of developing a virtual space for dramatherapy, the above investigators state that the dramatherapists are “still in a ‘foreign land’”.

Atsmon and Pendzik (2020) cautions the dramatherapists through a very thoughtful statement: “While practitioners are experimenting with different things, trying to orient themselves and see ‘what works’, there has yet to emerge a more methodical or comprehensive approach for dealing with the challenges posed by digital resources.” They say, “the uncharted territory of digital resources in clinical drama therapy is mostly explored individually and haphazardly [...] we may wonder to what extent drama therapists are currently able to play with these resources and what can help support their capacity to play in this new world.”

An art therapy study (Darewych et al., 2015) that speaks of utilizing digital technology to assist adults with developmental disabilities, highlights the potential of digital technology expanding creative palettes and clinical intervention tools for therapeutic sessions. As the study mentions, “The benefits of digital technology in art therapy include portability, an all-in-one art studio at your fingertips, a multi-media communication platform to access photos and music from the Internet, large gigabytes storage capacity, multiple image printing capacities, and variety and directness of dissemination products.”

Another study (Storjohann, 2019) in art therapy states that “Accessibility, flexibility, and general acceptance of digital app technology as a facet of everyday life in present-day society imbue these artistic tools with the unique opportunity to support and facilitate healing for heretofore inaccessible and underrepresented segments of the population.” This study discards the view that app integration is a potential hindrance or a distraction. Further, it emphasizes the fact that if therapists are to attune to the client’s identified goals and objectives, then it is necessary that the expressive arts therapists allow digital app technology to be recognized for its intermodal capabilities, opportunities for enhancement, amplification and reframing.

A dance/movement therapy study mentions that virtual reality dance exercise has “a positive effect on cerebral palsy, dementia, and the recovery of physical function of stroke patients” (Baram et al.,

2010). It is stated that virtual reality exercise provides active learning and motivation, and significantly enhances functional independence (Lee et al., 2015). The study by Lee and others emphasizes that virtual reality exercise reduces the presence and severity of depressive disorders.

Another study (Gupta, 2020) reveals how an improvised music therapy session has been conducted, to overpower the terror of Covid-19, utilizing Zoom as a digital platform. The investigator narrates the experience, as follows:

“...My undergraduate students and I were supposed to engage in an improvisational jam-session together in the classroom. To comply with the social distancing mitigation strategy... we decided to move the class online via “Zoom meetings”... Social distancing did not impede our musical solidarity. Instead, the 20 students and I experimented with a virtual, improvisational, jam session to join our spirits in a fun rhythmic flow... the rhythm was slightly delayed because of the Internet’s lag-time. Our harmony could not find perfect synchronization through our laptops and phones. Yet we sang together, clapped together, strummed together, and laughed together, accessing a primal mode of communal being-together through collective sound making across our individual screens. Our improvisational virtual jam session brought us enough joy and love to overpower the terror of COVID-19 for just a little while!”

Elaborating on the ideas of containing the client, building rapport, and improving therapeutic relationship, a research states that “Meeting clients where they are, attuning to their unique needs and challenges, as well as providing a safe empathic container for mindful creative expression are essential parts of the therapeutic relationship” (Storjohann, 2019). According to Storjohann’s study, it is essential to cultivate awareness of both the benefits and drawbacks of integrating digital app technology into Expressive Arts therapy practice. One major consideration is the potential for technology fatigue (ibid). Choe (2014), and Klorer (2009, p. 82) say that despite the potential for therapeutic engagement and establishing faster rapport with children and

adolescent populations, “computers and cell phones allow a child the opportunity to disappear and to withdraw further”.

Some studies mention that incorporation of digital tools proves effective for adolescent populations in therapeutic settings, offering young clients the ability to more accurately voice internal narratives and challenges (Burland & Magee, 2014; Jamerson, 2013), increased communication skills, confidence and resilience (Hughes, 2017), as well as the potential to gain insight into and begin to transform traumatic experiences (Kruger & Swanepoel, 2017). Further, several other studies that examined guided self-help over the internet aiming at increasing positive mental health found that over the course of therapy, participants reported significant improvements in all three aspects of well-being, namely, emotional, social, and psychological wellbeing (Bohlmeijer et al., 2015; Fledderus et al., 2012).

Speaking of limitations, several studies show that (Choe, 2014; Hanha et al., 2012; Orr, 2012), a major limitation of digital app technology is the perceived loss of and detachment from the myriad tactile and kinesthetic qualities inherent in traditional artistic media (e.g., clay, watercolor, colored pencil, oil pastel, chalk, musical instruments). “Authentic craftwork requires a dialogue between hand and material”, says Austin, (2009, p. 84). As Storjohann (2019) says, “Creative expression through the use of digital app technology occurs within a confined space.” It is further mentioned that “As many technology-based tools are correlated with significant monetary expense, clients may not feel as free to explore ‘rhythm, action, movement, and the release of energy’ (Hinz, 2009, p. 42) out of anxiety or fear”.

The selected literature shows the pros and cons of digitizing creative arts therapies, inclusive of dramatherapy. As evidenced through literature, the field of creative arts therapies has only just begun to scratch the surface in terms of evidence-based studies surrounding digital app integration. The above previous studies show the impact of utilizing digital apps for arts therapies, and they aptly guide the current study, to answer its research question: How effective is dramatherapy, as a digitized practice, during Covid-19 period, in Sri Lanka?

METHOD

This study adopts a qualitative method, to understand how participants construct subjective meanings, and their interpretations of experiences (Creswell, 2018), whilst assisted through dramatherapy, utilizing digital platforms. The lived experience of the participants will answer the following research question:

- How effective is dramatherapy, as a digitized practice, during Covid-19 period, in Sri Lanka?

Participants

A convenience sampling was used in this study. The sample comprised of five clients ($n=5$) who received dramatherapy, utilizing DPs. They are treated as a single case for the purpose of this study.

The sample presented diverse difficulties, ranging from anger, anxiety attacks, separation anxiety, work stress, and fear of losing the job, resulting from Covid-19 pandemic.

PARTICIPANT AGE	GENDER	MENTAL HEALTH CONCERNS	COUNTRY	DIGITAL TOOL	DIGITAL PLATFORM
43	Female	Work stress	Sri Lanka	Desktop	Skype
30	Male	Anger	Sri Lanka	Laptop	Skype
39	Female	Separation Anxiety	Sri Lanka	Tablet	Whatsapp
45	Male	Fear of losing the job	Europe	Smartphone	Imo
40	Female	Anxiety attacks	Middle East	iPad	Botim

These participants were Sri Lankans, and two of them were expatriates. Each participant attended ten sessions of dramatherapy, from their respective places of stay.

Setting

The setting needs to be interpreted in two ways: Digital platforms, such as, Skype, Whatsapp, Imo, and Botim; and the physical space occupied by the client to engage in dramatherapy, usually, a room, or a hall at their places of stay.

Data collection

Qualitative data was collected through semi-structured interviews from five participants. As a method, the use of semi-structured interviews quickly produces rich and detailed data sets, offering an accurate assessment of the impacts of events on an individual (Fallon, 2007).

Data Analysis

Data were analysed using thematic analysis; a method for identifying, analysing, and reporting patterns and themes within a data set. It aims to capture rich detail of participant experiences with digitized dramatherapy, and represent the range and diversity of experience within the data (Braun & Clarke, 2006). In this study, four superordinate themes were identified: digital containment, digital platform for interaction, creativity in a digital space, and recovery of an independent agent.

The chosen single case study design provides possibilities for further elaboration and detailed exploration of the themes that represent something unique at a period of pandemic, or any other disaster, which is beyond man's control.

Ethics

The therapist envisaged several ethical concerns, as the physical environs of the therapist and the client were always their residences. Privacy and confidentiality rights of the client needs to be ensured,

as family members of both sides may secretly listen to the sessions, or cause interruptions. It was not very sure for the therapist regarding the security of personal data, when utilizing a digital app. Also, if any recording happens, without the knowledge of the therapist and the client, since virtual space can do so, that may violate the confidentiality of therapy sessions. Concerns were there on how technology is being used, with attention to possible misuses and client vulnerabilities (Alders, Beck, Allen, & Mosinski, 2011, p. 167). Creating a therapeutic environment in which client privacy, safety, and confidentiality exist is paramount, when utilizing digital app technology.

RESULTS

Upon in-depth examination of data, four superordinate themes emerged. Data from semi-structured interviews is presented under each theme, to answer the research question.

Digital Containment

- “This place [Europe] is experiencing Covid-19, disastrously. I do not know whether I will lose my job. Most of my friends have lost their jobs, and are suffering. My anxiety is high. Meeting you [therapist] through Skype is a great relief. Why do I need to feel helpless, when my therapist is ready to meet me, and help me? Now I know that I am not alone.”
- “I became very restless, and angry with this situation. I couldn't go out, to meet my friends. I was angry with everyone at home. I was anxious, and listening to TV made it worse. It was a great feeling I got, when online dramatherapy sessions were arranged. I was helpless, shouting at everyone. My wife was very upset over my behaviour. For the slightest thing I got angry. Opening Whatsapp video for the session made me feel very happy and settled. It was a great support to manage myself.”
- “I couldn't imagine what would happen to me, if the sessions did not continue. I was scared that my parents will become victims, and I will lose them. Knowing that you [therapist] are available online is a great relief. I come for dramatherapy sessions with a lot of confidence.”

- “I never thought dramatherapy is possible, in this way. I was wondering how to get this stress out. Office work has no limit, since we have to work from home. It’s too much, and I cannot cope with such a heap of work. When I attend the dramatherapy sessions, I feel that I am in a different world.”
- “Loneliness is killing me. I cannot manage my anxiety, if not for dramatherapy sessions. I am here [Middle East] to do a job. I have to look after my family in Sri Lanka. I find it very difficult to do office work, as I cannot focus, because of my anxiety attacks. Dramatherapy sessions help me to sustain my energy. The sessions give me hope.”
- “When I see the therapist looking at me, from the camera, I feel that there is someone to interact. We need someone to communicate, and play. This interaction is very helpful. Being alone, in a foreign land is killing, at this time. I see the therapist as a guide, a teacher, and a listener.”
- “I was able to look into your eyes, see your face, and also listen carefully to your responses. Having you there in the cam, build confidence in me. I wanted to see how you respond to my activities. So, the camera was zoomed in to your eyes, cheeks, forehead, and the whole facial expression. In the therapy room, I wouldn’t have been able to have such a close look. This interaction is great, to get over loneliness.”

Digital Platform for Interaction

- “I love to engage in dramatherapy activities. It is not just posing for the camera, but actively doing something, to make oneself happy. The webcam makes you [therapist] to look at me every time, when I come for dramatherapy sessions. That’s an amazing experience. Interaction begins with the camera: smiles, laughter, discussions, and play. That is very relaxing. So, when we start movement work, mask work, or art work, they give such a nice feeling. I feel that belongingness, when we interact.”
- “Working together, from two different places doesn’t make much of a difference. I can see you, and hear your [therapist’s] voice, and that interaction helps me to a lot. When you have that support from the therapist, it is always easy to continue with the activities, and manage myself. This meeting is for that purpose. One wants to see how the support comes from the therapist, to make that change, and to sustain it. During this time [Covid-19 period] we cannot go out, and to keep calm, this interaction matters a lot.”
- “I was quite comfortable when I saw you [therapist], because I wanted to interact, and engage actively. I feel that we get closer with the camera. You become my audience, appreciating my activities. I was not alone. Camera is like a theatre window, from which you and I could see each other. We interact from our own locations. It is very encouraging, and creates a sense of belongingness. It makes the fears disappear.”

Creativity in a Digital Space

- “My situation got cleared when I started using objects, to create my story. I could play with the objects, placing them in different ways. It was a kind of visual before me. More than talking, working silently with objects, helps one to go inside. There was silence, at times, during the sessions. I was engrossed in this activity. I can say that I had a chance of knowing where I am, and what has happened to me, during this pandemic time.”
- “I like to do mask work. It helps in many ways. I was able to put my fears, and anger on to it. I was able to speak to my anger, using the mask. It was a kind of play, with myself. I felt free, and relieved. There was no restriction. I could say anything I wanted, to the mask. It was quite interesting when you [therapist] gave voice for the mask. Your voice came through the speakers, and the mask sounded alive. The mask turned into another supportive person. It was very encouraging.”
- “Working through art, and mask work was a relief. They helped me to deal with my anxiety, during this pandemic time. I could also write stories. I became a good author, doing a cost-benefit analysis of my behaviour. I was able to write about the chaos I cause, and then reflect about my behaviour. It was fantastic the way you conducted a discussion on my story. It gave me insight to change. Calming myself was not easy, but my creative abilities made me to think

positive, and change. One needs to boost up energy, to face the emotional challenges, during this pandemic time.”

- “I think music and movement was very effective, to release my tension. I like imagination exercises, too. They took me to a different level. It was relaxing, and comfortable. That heaviness in me disappeared with movement work.”
- “I became mindful, when I worked with movements, and art. When I got the whole body moving, it eased the tension. I could work through my emotions that way. Taking out what is inside me through movements made me relaxed. Whatever tension you may experience goes away when you deal with the body. Art is also like that. I love colours and shapes. These activities helped me to reflect on my strengths, and manage myself. One thing I didn’t have was the energy to adapt to the current situation. Anxiety was very high, but now, with dramatherapy sessions, I feel the calmness in me.”

Recovery of an Independent Agent

- “I had to think in a different way, while in dramatherapy. In online sessions, one has to take responsibility of one’s emotions, and behaviours. The therapist’s involvement is limited, due to being in two different locations. This thought made me strong, to cope with my stress. When you know that you have to take action, to resolve the problems, that changes your condition.”
- “While working through the activities, I thought that I must mend my situation. I can’t go on with my angry behaviour. I felt relaxed, after the therapy activities. I reflected on what was happening with me. I learnt that it was my own fears that made me angry. Gradually, I managed to emerge from my fears, calming myself. Now I don’t show that anger at all. It was this current situation [pandemic] that caused me to behave angrily. Now, I should initiate action to make my life better, during coronavirus time.”
- “It is important that you take charge of yourself. One cannot hide, or live in fears. There is no escape. That is what I learnt through the therapy activities. I learnt to build my coping strength,

build confidence, and objectively assess my situation. That process helped me to reconcile with myself, and remove my anxiety, completely.”

- “One has to be strong in whatever condition. Challenges are there in life, and when we think out of our comfort zones, we help us to return to normal. I did not think this was possible. But now I know that one has to encounter the challenges, in order to be stable as a person. I am not scared of losing my job now.”
- “Making myself heal is the most important thing. We become vulnerable, because we don’t trust ourselves. We build anxiety, and want live in it, as if it is the only thing we have. In these dramatherapy sessions, the biggest learning I made was to trust my own strengths and resources, to make a change in my life.”

DISCUSSION

The primary research question for the study was: How effective is dramatherapy, as a digitized practice, during Covid-19 period, in Sri Lanka? This study reveals that due to strict social distancing regulations in Sri Lanka, due to Covid-19 pandemic, the clients who sought dramatherapy assistance were compelled to utilize DPs as an alternative mode. It was a test for the clients to adapt to the current conditions, making use of digital means, to access their therapy facility. DPs provided a meeting space for both the dramatherapist and the client, and as the data reveals, it was a comfort for the clients. Human beings have the unique quality to adapt to varying situations (adaptability), or ability to find alternative routes toward desired ends (Kashdan, 2010). Findings in this study confirm that the DPs, as meeting spaces, reduced the client’s helplessness, and brought ‘great relief’, increasing their hope. In fact, DPs ensured uninterrupted social engagement, despite strict social distancing regulations in the country.

Social life was a pressing need for the clients, during the pandemic period. Their anxiety caused the urgency to establish social connectivity, with the therapist, in order to overcome their distress. Hence, entry to a DP was considered as an admittance to a social discourse. It encouraged communication, and active participation, eradicating client’s sense of isolation.

DPs were constructive spaces to enhance the therapeutic alliance between the client and the dramatherapist. The data discloses the fact that DPs act as a pathway for the clients to build rapport with the dramatherapist, trust him, and receive his assistance. Previous literature (Bordin, 1979) elaborates therapeutic relationship, as composed of shared goals, agreement with tasks, and development of a bond.

Results in this study reveal that DPs facilitated human interaction through 'smiles, laughter, discussions, and play'. According to a participant, 'the camera was like a theatre window' through which she could interact with the therapist. Also, another client stated that the webcam helped him to get very close to the therapist. "I was able to look into your eyes, see your face, and also listen carefully to your responses," said a client, who was keen in overcoming her loneliness. Direct eye contact between therapist and client, and the ability to view therapist's facial expressions are fundamental aspects of human communication, interaction, and mentalization (Khalid et al., 2016).

It was crucial for clients, during Covid-19 period, to establish social interaction, and manage their restlessness. Interaction motivates the clients, and make them to feel a strong sense of belongingness. "We need someone to communicate," emphasized a client. Human beings have the desire to be social, and interactive, and feeling belonged to a community (Over, 2016). The space opened through DPs to interact was of significant support for the clients to share their experiences, and improve in emotion regulation.

Human interaction enhances social acceptance, increases client's sense of security, and improves their self-esteem. The data confirms that due to interaction with the dramatherapist, the clients were able to deal with their psychological difficulties, and feel "happy, and relaxed". More importantly, the interaction with the dramatherapist helped the clients to recognize their fears, accept them, and respond to them, objectively.

DPs supported clients to master creativity, and focus their energies on creating. Creativity refers to the growing self-awareness of the client through the creation of something meaningful to them (Ralston, 2018, p.4). In dramatherapy, creative action involves stimulating embodied experiences. Mask work,

movement work, storytelling, use of objects, role play, scene work, and art helped the clients to be mindful of the present moment, and develop a sense of purpose for their living, during the Covid-19 period. This present moment awareness is a powerful therapeutic tool, "promoting personal change and self-reflectiveness" (Riva et al., 2007).

Dramatherapy activities were emotional outlets that enabled the clients to feel relaxed. They were therapeutic to assuage the anxiety and stress, resulting from Covid-19, and to foster resiliency. The creative processes were capable in lifting the spirit, and to move people's emotions toward spirited action. Creativity could alleviate the stress inflicted by the COVID-19 pandemic, soothing the autonomic nervous system. Creative activities encouraged self-exploration, enhanced self-awareness, and increased motivation towards recovery.

Creative processes supported the clients to access inner resources, increasing their psychological flexibility to live with the present conditions. Psychological flexibility is the ability to adapt to a variety of different situational demands, useful for living a meaningful life (Wersebe et al., 2018). It was an important mechanism of change during online dramatherapy interventions, reflecting how clients adapt to fluctuating situational demands, reconfigure mental resources, shift perspective, and balance competing desires, needs, and life domains.

DPs placed little hindrance for the clients to move to a 'dramatic reality' (Pendzik, 2006, p.275), while engaged in creative activities. Indeed, the digital space offers the creator a unique space in between fantasy and reality, while being creative and playful, setting the ground for a conducive environment for therapy (Hacmun et al., 2018). The clients could play with colours, shapes, objects, stories, masks, movement, characters, metaphors, and symbols, to engage in a process that enhances their capacity for self-reflection, and self-regulation.

Disabling the traditional therapy room, due to curfew, created a significant status for the client to assume responsibility, in re-designing recovery strategies. "The biggest learning I made was to trust my own strengths and resources, to make a change in my life", said a client. Trust towards oneself was important towards recovery. Another person mentioned the urgency to initiate action towards recovery: "I should initiate action to make my life

better, during this pandemic time.” These narratives are explicit of client’s sense of responsibility, towards caring for oneself, at a time of emergency, to emerge from difficulties.

In fact, it is understood that the current Covid-19 conditions have positioned the client, as an ‘independent agent’, whose responsibility is to re-evaluate one’s innate strengths, as well as, attitudes, towards healing. Findings in this study show several positive factors that had an impact on client’s attitude towards recovery: knowing that the dramatherapist functions from a distant location; knowledge that one has to initiate action to make life better; learning not to hide or escape, and objective assessment of one’s situation; thinking beyond comfort zones to encounter challenges; and trust one’s inner resources and strengths to make a change. These factors made two vital behavioural goals to emerge: ‘willingness’, and ‘commitment’ towards healing oneself.

Recovery is a process in which the client has to move toward specific behavioural goals, through a series of stages. In this process, the above two goals have contributed to develop a sense of responsibility towards self-care, and resilience. “It is important that you take charge of yourself...There is no escape,” commented a client, underscoring the personal contribution towards reducing stress, and ultimately rejuvenating one’s self. The ultimate goal of therapy is to receive healing, and as a client mentioned, “This meeting is for that purpose..., to make that change, and to sustain it”.

Digitizing the practice of dramatherapy was effective in several ways: DPs contained the clients; ensured social interaction; engaged clients in creative work; and supported them towards recovery. Even though Covid-19 period was very decisive in relation to its impact on people’s psychology, conducting dramatherapy, utilizing DPs, were beneficial for the clients, to improve their symptoms.

LIMITATIONS

It should be mentioned that our study has several weaknesses. The sample of this study was limited to five people, and therefore, the results may not reflect adequate answers to the research question. There were limitations in implementing dramatherapy activities, due to technical difficulties, such as power failures, poor mobile phone signals, small screen

size, background sounds, damaged, or poor quality head phones, and lack of in-person vibration. Also, the practitioner needs to improve competency in the use of digital media, enhance ability to adjust to new ways of conducting therapy, understand spatial limitations, identify appropriate dramatherapy tools, and decide on a virtual time limit for a session. More importantly, the dramatherapist will have to understand and master the art of holding the clinician-patient relationship, in a virtual space.

CONCLUSION

Digitizing dramatherapy practice showed that clients can be supported at a crisis situation, such as Covid -19, using online facilities. The clients feels comfortable when contained, digitally, despite the difficulties caused by social distancing. DPs created positive interaction between the therapist and client, enhancing self-confidence, and belongingness. Clients received space for creativity, as a means to explore their psychological and emotional difficulties. Recovery was possible as there was willingness, and commitment in clients, to make a positive shift in their psychological status. Covid-19 had caused immense stress in clients, since they were confined to their places of stay, however, digitizing dramatherapy helped in alleviating the anxieties, stress, and angry behaviour of clients, improving their coping abilities, and capacitating them towards self-regulation.

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