

Emotional Repair Through Action Methods

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The urge to act out is in born. A picture is worth a thousand words. The use of dramatic forms to communicate, teach and heal, is as old as history. The Ancient Greeks used drama to illuminate issues close to the human heart. Through role play the stage became a safe arena in which to explore and explain psychological and emotional themes. Audience identification with the characters portrayed, was one of our earliest forms of therapy. Psychodrama, Sociometry and Experiential Group Therapy provide for a controlled acting out in service of healing. They are a modern adaptation of an ancient form.

Psychodrama, sociometry and group psychotherapy is a three tiered healing system developed by J.L. Moreno that believes that what was learned in action must be unlearned in action and what was learned in relationship, must be unlearned in relationship. This goal of undoing problematic patterns of thinking, feeling and behaving through the vehicles of action and relearning new, more adequate ways of experiencing and expressing the self in a relational context, is the work of psychodrama, sociometry and experiential group therapy.

Being able to attach words to feeling states is a corner stone of developing emotional literacy and consciously

regulating behavior. We need to think about what we're feeling in order to understand what is occurring inside and outside of us and to use that "understanding" to regulate our thinking, feeling and behavior. Physical gestures and actions for young children become double coded with emotional meaning. Emotional learning is a mind/body phenomenon. The limbic system which is the brain body system that is associated with the regulation of our psychological and emotional states can become deregulated in individuals who grow up in less than optimal environments. Emotional deregulation can lead to anything from moodiness to depression to acting out behaviors such as bullying, violence and addiction. "The limbic system is associated with our emotions and the neocortex is associated with critical thinking. Both are operative in processing emotions. While the neocortex can collect facts quickly, the limbic brain does not. Physical mechanisms are what produce our experience of the world and we need new sets of physical impressions to change or alter those impressions." (Lewis 2000)

An increasingly significant aspect of the experiential therapies in light of the neurological research that has given depth and meaning to the mind/body movement, is their ability to allow the body to be a part of the therapeutic process. Children who have not grown up having their emotions decoded for them by caring adults may naturally lack emotional literacy. Young people who are asked to "describe" their inner world may not have any idea how to do that. Action methods allow them to enter the therapeutic milieu through action and then words can follow. They can first

experience themselves in action, then decode their experience with words; i.e. they can learn the skills of emotional literacy.

The degree of introspection that a young person can tolerate may vary according to the individual. In addition, young people are often times forced to return to those very situations that are causing them problems to begin with such as family and environment. Providing therapeutic approaches that allow them to mobilize strengths and qualities that will enhance their own resilience, help them to experience and express themselves more coherently, allow them to connect with others in constructive rather than destructive ways and restore their sense of hope and faith in a better future, may be more useful to them at this stage of life than focusing too intensely on what is sick in their world. A thoughtful integration of the dramatic therapies can allow young people to express and process emotional and psychological pain symbolically and creatively. The physical, emotional and psychological benefits of this are numerous. The dramatic and the creative arts therapies:

- Enhance resilience by strengthening qualities associated with resilience such as independence, creativity, ingenuity, humor, (Wolin and Wolin)
- Offer an arena in which the nuts and bolts of developing emotional intelligence and literacy, according to Stanley Greenspan MD can be revisited and reworked.
- Regulate the limbic system through experiencing the self in relationship within a healing

context. (Lewis)

- Expand and train the ability to attend and focus around specific goals and activities.
- Allow for a creative, symbolic expression of thinking, feeling and behavior that can lead to an enhanced creativity and spontaneity in the individual and an increased ability to perceive and take action toward desirable life choices.
- Allow for a controlled “acting out” of pain and anger in service of healing so that “acting out” can lead to “talking out” and greater understanding and awareness rather than continual life conflicts.
- Provide practice in connecting with others in meaningful, purposeful and healthy ways.
- Lift the spirit and instill a sense of hope and beauty in life and a positive or possible future.
- Offer a healthy way to attain “feel good” states and a sense of oneness and intimacy with others.
- Offer alternative ways to elevate the immune system through sharing and writing to resolve inner conflicts (Pennebaker).

While psychodrama focuses on the *intrapersonal*, sociometry focuses on the *interpersonal*. The exercises in this chapter are designed to enhance the client’s ability to connect with others in positive ways and find safe ways to share thoughts and feelings and to break patterns of isolation. The empty chair exercises are *intra-* personal approaches that explore the inner world of the client. The sociometric exercises explore the relationships and preferences within the group context. I have included my own

form of psychodramatic journaling as a method that allows theoretical concepts of role play to be explored through writing, thus allowing for containment and safety. Some of the exercises in this chapter are a combination of drama therapy and psychodrama. Drama therapy allows for a more distanced approach to healing. A story, for example, might be told or acted out by the client in the third person rather than the first. This can allow the client to work through issues symbolically or with an emotional distance that is particularly well suited to work with children and adolescents.

How Behavior Becomes Infused With Emotional Intention and Meaning: Why Experiential Methods Have the Ability to Reach Into the Psyche and Heal

Gesture Our First Language

Gesturing or action is our first language. It is the mind-body, communication upon which all subsequent language is built. Before language formally enters the picture, we have learned a rich tapestry of gestures and actions to communicate our needs and desires. This gesturing comprises a nonverbal communication that informs our ability to express ourselves and understand others throughout our lives. The expression of concern or alarm on a mother's face, for example, causes the child to feel "held" or alerted to danger. The child's screech accompanied by an arm motion may signal a wish to be picked up, cuddled or command the mother to hand over a favorite toy. All

of this body language is part and parcel of an action oriented, gestural communication and contains important connotation. Each tiny gesture is double coded with emotion and is stored by the brain and body with emotional purpose and meaning attached to it. Through this interactive process of communicating our needs and desires, we build emotional intelligence and literacy as surely as we learn math in a classroom.

Because gesturing is our first form of communication, much of this language becomes part of our unconscious and surfaces in the form of "automatic emotion". Alan Schore, in his research on affect regulation writes, "this "automatic emotion" operates in infancy and beyond at nonconscious levels (Hansen & Hansen, 1994), and... shape[s] subsequent conscious emotional processing." (Dimberg & Ohman, 1996). Our emotional unconscious, so to speak, this web of gesture, meaning and word, is formed through our interactional environment with our family and caregivers (our first social atom) and this lays a foundation for later emotional growth and language development.

What occurs between people as subtle exchange of emotionally laden signals occurs so quickly, we hardly know it is happening. Evolution has made the processing of emotions and their communication to others, very rapid. "The transmission of facially expressed emotion, occurs in " as little as 2 milliseconds (Niedenthal, 1990), far beneath levels of awareness." Nature has favored this speed synch for obvious reasons. The mother who could "feel fast", sense danger and communicate that to her child in order to get him out

of harm's way, was "naturally selected" to be the DNA strain that led to us. "Because the unconscious processing of emotional information is extremely rapid, the dynamic operations of the "transmission of nonconscious affect" (Murphy et al., 1995, p. 600) and the spontaneous communication of "automatic emotion" can not be consciously perceived." (Schoore, in press, a). One might liken this form of this instantaneous communication between people, to the hot synch between computers. Significant information gets transferred from one system to another, but it happens, in what feels like, an invisible realm.

All of these unconscious processes help us to walk, digest, self regulate and remain grounded within the self, in relationships and our environment. They allow us to operate on automatic. This automatic operating, also has meaning, intention and emotion already woven into it. Many people particularly if they have had a lack of this gestural form of communication or have grown up in environments where feelings were not talked about have a hard time identifying some of their emotions and their intentions when they try to self reflect. They have a lack of awareness about why they do what they do, or why they feel, what they feel. They may be all action with little awareness of what is driving their behaviors or what is going on underneath. Or perhaps they experience something in their body, like chronic muscle stiffness or pain in their stomach, back or head, but they are unable to make any connections as to emotional feelings that may be being somatized rather than felt. They may misread or not pick up on the subtle signals from others that are a part of non verbal communication. (Dayton

2005)All of this comes with students into the educational system and affects both their ability to have successful relationships and their ability to regulate themselves within the learning environment.

The family is our first and probably most significant classroom on relationships and the day care and school systems run a close second. The obvious emphasis on intellectual learning that is a natural part of the school system blurs the extent to which emotions inform and drive our relationships within our school environment and our ability to learn

. "Emotional development is not just the foundation for important capacities such as intimacy and trust," says Stanley Greenspan, M.D., clinical professor of psychiatry and pediatrics at George Washington University Medical School and author of the new comprehensive book *Building Healthy Minds*. "It is also the foundation of intelligence and a wide variety of cognitive skills. At each stage of development, emotions lead the way, and learning facts and skills follow."

The Nuts and Bolts of Developing Emotional Intelligence and Literacy

The following is a progression of development outlined by Stanley Greenspan MD author of *Building Healthy Minds*. It describes how a developing child translates the raw data she gathers from her senses and inner feelings into images. She uses these images to create personal meaning and in communication with others. We can think of them as the mind's deepest

structural components, which support all later development. They are the foundations of sound emotional development.

The Six Developmental Levels of the Mind

1. **Self-regulation:** Self regulation is a primary developmental task that allows the child to regulate themselves *emotionally* and *physically*. Regulating the self involves learning to *organize sensations and the body's responses*. From a jumble of sounds, sights, smells and tactile feelings, patterns begin to emerge. Sounds become rhythms, sights become recognizable images. And a child's growing ability to control body movements make it possible to cuddle, to follow an object or to stand up in his mother's lap. *Physical and emotional self regulation are at the core of healthy functioning on all levels.*

2. **Engagement:** Engagement represents the *beginning of building the capacity for relationships*. It begins with the child's emotional registering awareness of a fellow being's presence. Through using her capacity for calm attention, the baby now notices the tones, expressions, and actions of the people close to her. Before long she reacts to them with pleasure and starts building intimate relationships with those who love her. Without some degree of adoring wooing by at least one adult who cares about her, a child may never know the powerful intoxication of human

closeness, never see other people as full human beings like herself, capable of feeling what she feels. This is the reason that, in studies of why some children develop the resilience that allows them to thrive in adverse circumstances that often sink others, the single most important buffering and sustaining factor in that child's life is at least *one bonded relationship*.

3. **Intentionality:** The ability to connect with at least one other person leads to intentionality – a willed exchange of signals and responses. Children who have successfully completed the passage into deep engagement gradually come to perceive that the actions passing between themselves and others are part of a two-way exchange. There is such a thing as *intent* in the world – a smile leads to a smile; outstretched arms lead to being picked up and so on.

4. **Purpose and Interaction:** Once a child connects sensation and emotion to intentional action, more complex, presymbolic communication equips him to find his way in the world of social interaction. He can now distinguish facial expressions and body gestures, and discriminate among basic emotions, distinguishing those meaning safety and comfort from those meaning danger. Life's most essential, emotional themes are identified and patterns of dealing with them formed.

5. **Images, Ideas and Symbols:** This is the stage of true symbolic expression. The child begins to deal not only with behavior but with ideas. She begins to understand that one thing can stand for another, that an image of something can represent the thing itself. This realization allows her to create an inner picture of

her world. Moreover, these symbols (i.e. mental pictures, gestures, feeling states, or words) can represent not only her own intentions, wishes, and feelings but those of other people as well.

6. Emotional thinking: Experience now can be linked into sequences of inner images that allow a child to consider actions before carrying them out. *Words* and then *ideas* can link up to *emotions*: "I am sad because it's raining and I want to play outside." Time becomes more comprehensible, separated into past, present and future. These abilities together make up basic personality or ego functions. They include *reality testing, impulse control, and ability to see connections among many different feeling and ideas.*

Through practicing these principals *nature and nurture can interact toward sound emotional development.* Without this structure the mind cannot function coherently, but only in a fragmented, jumbled fashion. "When you are playing eye-to-eye with your child, you will generate a sense of equality that encourages him to engage with you." Children emerge from this kind of play with greater self confidence and self awareness. This one-to-one, intentional time with a caring, relaxed and attuned adult is worth its weight in gold to a child. It is an investment in their inner world from which they will draw interest all through their lives.

The dramatic therapies offer methods that synthesize this progression of developing emotional intelligence, regulation and literacy. Significant emotional repair can occur when therapeutic methods allow for a full and integrated mind/body engagement that

accesses and incorporate these six levels of mind.

The Fear Factor: How Trauma Affects Us and Deregulates the Limbic System

Neurobiological research also provides a much needed window into working with those whose neurological systems have become deregulated through "less than optimal" relational experiences, such as the relational trauma that comes from familial neglect, abuse or living with addiction.

The body can't tell the difference between an emotional emergency and physical danger. When triggered, it will respond to either by pumping out stress chemicals designed to impel someone to quick safety or enable them to stand and fight. In the case of childhood problems, that is where the family itself is the source of stress, there may be no opportunity to fight or flee. Children in these systems may find escape impossible. And so they do what they can. They freeze. They shut down their inner responses by numbing or fleeing on the inside through dissociating. Though this strategy may help them to get through a painful situation it teaches them, slowly over time, to foreclose on their emotional system, to deny and reject their authentic emotions. And in so doing, they lose access to valuable information that would help them to navigate their relational world and regulate their emotional reactions to it.

The ability to "escape" or take one's self out of harm's way, is central to whether or not one develops long term trauma symptoms or PTSD (vander Kolk 2004). If escape is not possible, the

intense energy that has been revved up in one's body to enable fight or flight, becomes thwarted or frozen.(Levine 1997). Eventually people live as if the stressor is ever-present, as if a repeated rupture to their sense of self and their world lurks just around the corner.

Children do not have a fully developed capacity to understand what is happening around them and to regulate their intense emotional responses accordingly. That is why kids can get *so* excited about a clown at the circus or *so* scared at the trapeze artist. They depend upon the adults around them to help them to "contain" their excitement or "calm and soothe" their intense fear. This limited brain development can put children at risk if they are living in a chaotic environment, especially if the adults who they would normally go to for comfort are the source of the stress . "The amygdala, our fight/flight/freeze part of the brain, is fully formed at birth. This means that infants and children are capable of a full blown stress response from birth on. When frightened, their bodies will go into fight/flight/freeze mode."(Aram 2004) However, the hippocampus or the part of the brain that interprets sensory input as to whether or not it is a threat is not fully functional until between four and five years of age. So children have no way of assessing whether or not they need to be scared and how scared they need to be. And to make matters even more complicated, the prefrontal cortex, which is where we have the ability to think and reason, is not fully developed until around age eleven. (Seifert 1990) Therefore, when small children get frightened and go into fight/flight/freeze, they "have no way of interpreting the level of threat nor of using reason to modulate or understand what is happening. Their limbic system

becomes frozen in a sensory fear response and can remain so, without intervention from a caring adult,and because of the child's natural egocentricity the threat feels personal, it goes to their core self."(Aram 2004) i.e., what ever is going on, the child is likely to interpret as being "about them", they may feel they are the cause. Because they lack the developmental equipment to modulate this experience themselves, their only way out of this state is through an external modulator, i.e. the parent, who can hold, reassure and restore them to a state of equilibrium. If this modulating occurs at the time painful circumstances are occurring, the child is unlikely to become symptomatic because their parent is wooing them back toward balance and a sense of safety. But if the parent or family environment are the primary stressor and unavailable to the child for reassurance, the child is left to live through repeated ruptures to his developing sense of self, his fundamental learning processes and his relational world, with little ability to make sense of it, interpret the level of threat or use reasoning to regulate and understand what is going on. And later in life, when that feeling, for example, of vulnerability or fear gets triggered, it is the same, unmodulated sensory memory that was locked down to begin with. (Dayton 2005) Adolescents and teenagers may enter the school system without having developed the skills needed for sound emotional regulation and/or be unconsciously living by the meaning they made of early painful experiences, "I am bad, I cause trouble, I am at fault". And because these emotions are painful to recall, they may develop defensive walls around feeling them, a hard shell designed to keep pain from emerging within themselves that

might be overwhelming to experience. So to ward off feeling vulnerable and small on the inside by acting “tough” or “big” on the outside. Consequently they keep themselves from ever receiving the understanding and support they so desperately need and crave and they further distance themselves from the kind of closeness that would lead to healing rather than continued rupture and distance.

One of the symptoms of PTSD is to “self medication with drugs or alcohol” (VanderKolk 1987) or other addictive substances or behaviors. Though these synthetic solutions may effectively quell their inner storm, in the long run, they create a bigger one.(Dayton 2000)

How Emotion Travels Through the Body

“The body is the unconscious mind,” says Georgetown University research professor, Candice Pert in *Molecules of Emotion*, “repressed traumas caused by overwhelming emotion can be stored in a body part, thereby affecting our ability to feel that part or even move it . . . there are infinite pathways for the conscious mind to access—and modify—the unconscious mind and the body.”

“Until recently, emotions have been considered to be location-specific, associated with emotional centers in the brain such as the amygdala, hippocampus and hypothalamus. While these are, in fact, emotional centers, other types of centers are strewn throughout our bodies. Emotions travel through our bodies and bind to small receptors on the outside of cells, much like tiny satellite dishes. There are many locations throughout the body where

high concentrations of almost every neuropeptide receptor exist. Nuclei serve as the source of most brain-to-body and body-to-brain hookups. Nuclei are peptide-containing groups of neuronal cell bodies in the brain.”

Emotional information travels on neuropeptides and is able to bind to its receptor cells through the binding substance of ligands. The information is sorted through the differentiation of receptors. That is, certain information binds to certain receptors. So our emotions are constantly being processed by our bodies. This clearly paints a dynamic, rather than static, picture of development; not nature versus nurture, but nature and nurture. The brain and body are exquisitely intertwined systems that are constantly interacting with the environment. All five senses are connected to this system and feed information that determines our unique response to anything from petting a soft rabbit to being slapped. The more senses involved in an experience, the more the brain remembers it. The smell and taste of Grandma’s cooking—as well as her gentle touch, familiar voice and the sight of her standing at the stove—all engrave themselves onto our memory systems, along with the feelings associated with them because every sense is involved. The same is true in the case of trauma.

So the emotional system is more or less like the endocrine system, and moves throughout our mind-body. Psychodrama, Sociometry and Drama Therapy have a unique ability to work with this system through the spontaneity of role play along with its full use of people in the act of being themselves.

Darwin felt this emotional system was highly conserved throughout evolution

because emotions were so critical to our survival. The cavewoman who got scared when threatened by the proverbial saber toothed tiger, grabbed her children and ran for safety, was likely the one naturally selected to become the DNA strain that led to us.

The Role of the Limbic System

Limbic bonds imprint themselves onto our emotional systems. The limbic system “sets the mind’s emotional tone, filters external events through internal states (creates emotional coloring), tags events as internally important, stores highly charged emotional memories, modulates motivation, controls appetite and sleep cycles, promotes bonding and directly processes the sense of smell and modulates libido,” according to Dr. Daniel Amen, author of *Change Your Brain, Change Your Life*. Our neural networks are not easily altered, “early emotional experiences knit long-lasting patterns into the very fabric of the brain’s neural networks,” says Lewis, “changing that matrix calls for a different kind of medicine all together.” Our emotional life is physical, it imprints itself on our bodies. When we have problems in our deep limbic system they can manifest as “moodiness, irritability, clinical depression, increased negative thinking, negative perceptions of events, decreased motivation, floods of negative emotion, appetite and sleep problems, decreased or increased sexual responsiveness or social isolation,” according to Amen. Our neural system carries with it our emotional sense memories from childhood. Familiar smells, sounds or places can send a cascade of memories flooding through us that either wrap us up in their warmth, or challenge us to maintain our composure. Along with the memories,

comes the cognitive sense we made of what happened at the time. (Dayton 2003)

“ Emotional impressions shrug off insight but yield to a different persuasion: the force of another person’s Attractors reaching through the doorway of a limbic connection. Psychotherapy changes people because one mammal can restructure the limbic brain of another. . . . The mind-body clash has disguised the truth that psychotherapy is physiology. When a person starts therapy, she isn’t beginning a pale conversation; she is stepping into a somatic state of relatedness. Evolution has sculpted mammals into their present form: they become attuned to one another’s evocative signals and alter the structure of one another’s nervous systems. Psychotherapy’s transformative power comes from engaging and directing these mechanisms. Therapy is a living embodiment of limbic processes as corporeal as digestion and respiration.” (Lewis 200_)

The body is part of the therapeutic process. One of therapy’s ultimate goals is to restore our ability to care and be cared for in reasonably functional ways, to learn to love and be loved. The three neural “faces” of love are limbic *resonance*, *regulation* and *revision*. It is relationship that heals. Most research done on the efficacy of therapy arrives at the same point: Ultimately, it is the quality of the relationship between client and therapist, or between group members, that is core to the healing process. Insight is helpful in understanding and cognitive restructuring, but the relational patterns encoded into the limbic system do not necessarily respond to insight alone, they respond to the slow repatterning or

recoding of the complex brain and body systems that hold the story of us, the sum total of our experiences written on them.

Limbic Resonance

We are always giving off emotional signals or rather an emotional essence for other people to pick up on. Our brains are designed to pick up on these signals and translate them. We know much about people without exchanging a word, we get a sense about them, what their essence is, and how we relate to them. In psychodrama and sociometry we call it tele, the connection between people that is nonverbal but says everything, what we “get” about another person and they about us. Lewis likens it to listening to a piece of music:

“The first part of therapy is to be limbically known--having someone with a keen ear catch your melodic essence. A child with emotionally hazy parents finds trying to know herself like wandering around a museum in the dark . . . she cannot be sure of what she senses. . . . Those who succeed in revealing themselves to another find the dimness receding from their own visions of self. Like people awakening from a dream, they slough off the accumulated, ill-fitting trappings of unsuitable lives.”

The experience of being seen, of feeling understood and “gotten” by another person or people can be fundamentally altering and healing. These processes are also fundamental to bonding. Children need secure bonds in order to feel seen and understood.

Limbic Regulation

We, as humans or mammals, are

physiologically patterned to resonate to each other at a deep neural level. Lewis says,

“Our neural architecture places relationships at the crux of our lives, where, blazing and warm, they have the power to stabilize. When people are hurting and out of balance, they turn to regulating affiliations: groups, clubs, pets, marriages, friendships, masseuses, chiropractors, the internet all carry at least the potential for emotional connection. Together those bonds do more good than all the psychotherapies on the planet. A parent who rejects a child’s desire to depend raises a fragile person. Those children, grown into adulthood, are frequently those who come for help. . . . If patient and therapist are to proceed down a curative path, they must allow limbic regulation and its companion moon, dependence, to make their revolutionary magic.”

Lewis feels that “people do not learn emotional modulation as they do geometry or the names of state capitals. They absorb the skill from living in the presence of an adept external modulator, and they learn it implicitly. Knowledge leaps the gap from one mind to the other, but the learner does not experience the transferred information as an explicit strategy. Instead, a spontaneous capacity germinates and becomes a natural part of the self, like knowing how to ride a bike or tie one’s shoes. The effortful beginnings fade and disappear from memory.”

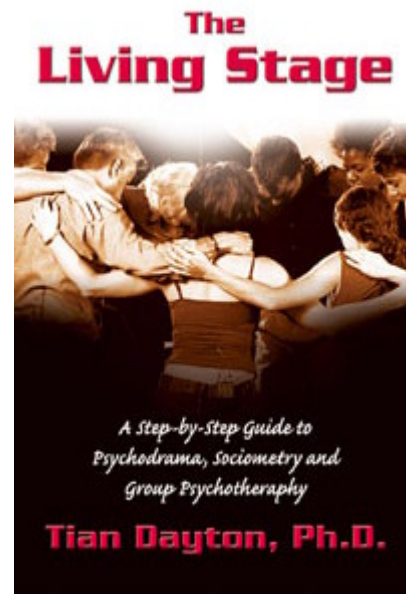
As a client depends, she internalizes this regulation, and it becomes a part of her. Gradually, she feels more whole, capable and confident, until eventually she is ready for independence and self-regulation

Limbic Revision

According to Lewis: “When a limbic connection has established, a neural pattern, it takes a limbic connection to revise it . . . coming close to the patient’s limbic world evokes genuine emotional responses in the therapist [and others in a group]--he finds himself stirring in response to the particular magnetism of the emotional mind across from him. His mission is neither to deny those responses in himself nor to let them run their course. He waits for the moment to move the relationship in a different direction. . . . And then he does it again, ten thousand times more. Progress in therapy is iterative. Each successive push moves the patient’s virtuality a tiny bit further from the native Attractors, and closer to those of the therapist. The patient encodes new neural patterns over their myriad interactions . . . with enough repetition; the fledgling circuits consolidate into novel attractors. When that happens, identity has changed. The patient is no longer the person he was.”

Part of therapy is to rework the inner world of the client. But that inner world has been developed in a relational context and requires relationships in order to modify itself. This is why an important goal of anyone who works with adolescents and teenagers is to offer an opportunity to teach them to connect in positive ways with adults and their peers.; to minimize painful interactions and maximize positive ones. In this way their experience of healthy connection can, over time, have a reparative effect. Sociometry provides experience, opportunity and training in connecting with others in constructive rather than destructive ways. The adolescent’s urge to connect requires no explanation. They search out group experiences like heat

seeking missiles. Providing positive and healing ways to connect that can lead to other constructive forms of connection through projects and activities can create new foundations on which to build a healthy sense of self. One of Moreno’s, basic tenants is that, in a group, each person becomes a therapeutic agent for each other. This vision, of community healing, gives hope in a world where resources are scarce and energy is limited. The more people who find healing, the more potential for healing there is.



Dr. Dayton has a masters in educational psychology, a PhD in clinical psychology..She is a fellow of the American Society of Psychodrama, Sociometry and Group Psychotherapy ASGPP, winner of their scholar’s award, executive editor of the psychodrama academic journal, sits on the professional standards committee. She is author of recovery best seller *Forgiving and Moving On, Trauma and Addiction*; twelve other titles. Dr. Dayton is the Director of The New York Psychodrama Training Inst. at Caron New York where she runs training groups in psychodrama, sociometry and experiential group therapy. For further info on training in psychodrama call Caron at 1800 678 2332.for more info log onto tiandayton.com.