Stanislavski's Affective Memory as a Therapeutic Tool

WENDY A. LIPPE

ABSTRACT. Stanislavski's Method is a dramatic technique that has traditionally been used only by actors. This article explores the possibilities of incorporating this method into traditional modes of drama therapy and into therapy in general. The relative controllability and reliability of Stanislavski's Method is also compared with the more common drama games now being employed in drama therapy. A case study involving delinquent boys exemplifies how this method can be used as a therapeutic tool to uncover suppressed life experiences and to achieve mood alterations within minutes. Further implications for using Stanislavski's affective memory technique in therapy are discussed, and relative guidelines are given for when this technique should and should not be employed.

STANISLAVSKI'S METHOD IS A DRAMATIC TECHNIQUE used by actors to achieve realistic, believable performances. The "Method," as it is commonly called, has two components—sense memory and affective memory. Although I will give a brief explanation of sense memory, I will focus on the relative controllability and reliability of Stanislavski's affective memory technique when it is compared with the more common drama games employed in drama therapy. I will also illustrate, with case studies, the effectiveness of using Stanislavski's affective memory to uncover suppressed life experiences and to act as a behavioral tool that can alter mood within minutes. The elucidation of suppressed events and the mood alteration are viewed as positive results that can lead to therapeutic ends in any type of therapy.

The term sense memory is deceptive because actors employing the technique actually relive sensory experiences rather than remembering them, as is implied by the term memory. Sense memory is most helpful for an actor who must perform a complex sensory experience with a multitude of stimuli. In this article, for the sake of simplicity, I will explain the single task of reliving the sensory experience of drinking a cup of coffee.

The actor closes his eyes and starts to create the feeling of a coffee mug in his hands. This is where the term memory can be helpful in understanding the technique because the actor must first remember and then re-create the feeling of holding a mug. To do this, the actor's senses recall the texture of the mug, the aroma, and the steam emanating from the mug. All this is re-created before the actor puts the imagined cup to his lips. Then he continues to re-create the experience of the taste of coffee in his mouth and the feeling of coffee flowing down his throat. If this is done correctly, the actor truly believes he is drinking coffee, and this experience is quite distinct from the memory of drinking coffee because all of the actor's senses are awakened. He is able to see, smell, feel, and taste the coffee.

Understanding sense memory makes the second component of Stanislavski's Method, affective memory, more comprehensible. In affective memory, the actor relives, again through his senses, an emotional experience. In principle, actors are urged to work only with encounters that have occurred more than 7 years in the past. This traditional temporal principle has been followed because it is thought to protect the actor from unresolved emotional experiences. The principle, however, is based on underlying assumptions that seem debatable. First, it assumes that earlier emotional experiences are more likely to be resolved than more recent ones; second, it assumes that exploration of unresolved experiences is dangerous, whereas exploration of resolved events is not. As Uta Hagen (1973) explained: "When I say that you must have distance from the experience you wish to use as an actor, I am not referring to time, but to understanding. In 1938, I had an experience with death . . . , which I still cannot fully cope with or discuss, and therefore cannot use as an actress. Yet, I have also had an experience in the morning which I was able to digest and put to use by evening" (p. 50).

This temporal rule, thought by some drama teachers to be "psychologically safe," may only be "psychologically random." Perhaps, drama teachers, who are usually not members of the mental health professions, should not be using this technique, regardless of the temporal considerations. It may be that drama teachers should abide by the time principle but that therapists, using the technique as a therapeutic tool, could safely abolish it. After all, patients share past, present, and current experiences with their therapists, although, typically, they do not relive them. In any case, the temporal principle warrants further study before Stanislavski's affective memory can be widely used as a therapeutic tool in the field of psychology.

Let me further illustrate how affective memory works. The actor, while seated comfortably in a chair, is guided through a series of muscle

relaxation exercises with his or her eyes closed. The actor is then told to envision a calming white light and to breathe deeply and regularly. When the actor feels tension-free, she or he is guided by a teacher through a series of steps leading to the reliving of a particular emotional experience. The actor is asked to imagine being in the space where he or she was when the event occurred and is slowly led to re-create this space. The actor is helped with the following questions, which are not answered aloud:

1. What do you see in the room or space you are in?
2. What sounds do you hear around you?
3. What do you smell?
4. How does the temperature feel in this space?
5. What do you feel touching your body?—clothing? If so, what is the texture like?—another person? If so, is the skin of this person rough or smooth?
6. Are you standing, sitting, or lying down?
7. What type of surface do you feel underneath your body?
8. Are you alone or with another person? (If with another person, the actor is asked to re-create the way the person looked at the time of the occurrence.)

After all these externalities have been re-created in detail, the actor begins to re-experience the event, whether it be a conversation or a moment alone; the actor starts to feel the way he or she did at the time the event first occurred. Usually, having chosen an intense experience, the actor becomes visibly depressed, euphoric, or agitated. The actor may move about the space; she or he may talk, mumble, scream, cry, or behave in any manner that the experience dictates. If no visible signs occur, and the actor remains involved but frozen, the teacher asks the actor to express everything she or he is feeling with one word and one action that are arbitrarily chosen by the teacher. Following the emotional release, there is a finalizing process, called neutralization, that involves relaxing the actor and bringing him or her back to the present reality. The teacher guides this process of neutralization by gently suggesting that the actor clear his or her mind, again envision a calming white light, and relax by breathing deeply and regularly. The actor is urged to come back to the present reality and to pay close attention to any sounds and smells presently occurring in the room. Only then is the actor told to open his or her eyes and reacquaint himself or herself visually with the room within which the actor is situated.

For acting purposes, it seems clear that Stanislavski's Method enables actors to create believable emotion that they can incorporate into their scene work. This technique protects actors from falling into the trap of

fake acting because it provides them with real affect from their own experiences.

Current Modes of Drama Therapy: Advantages and Shortcomings

Irwin (1987) maintains that the less structured a dramatic interlude, the more a child reveals about himself. Because people using the Method are reliving an experience, it is not possible for them to censor any emotions associated with the experience. A child acting with a prop, however, is quite able to pick and choose what will be acted out and thus revealed; the child is therefore more able to manipulate the situation and censor any resulting emotion. Stanislavski's Method allows less manipulation than does acting with props and, for this very reason, is a more controlled technique. The Method permits therapists to share actual experiences with patients and allows them to see the real and immediate effects of these experiences on patients. Therefore, distortion of events and emotions on the part of the patient is not possible.

Improvisations and acting with props have long been regarded as vehicles for expressing emotional conflict. It has been expected that a drama therapist make sense of what is communicated and why (Irwin, 1987). The obvious problems with this are that several different therapists could arrive at countless interpretations of the emotional conflict being acted out. Imagine that a young girl improvises a scene where she is raped. One therapist might conclude that the girl actually had been raped. Another therapist might suggest that she was fantasizing, possibly about her father if she were perceived to be in the throes of the oedipal conflict. Yet a third therapist might suggest that the young girl was being adversely affected by the excessive violence portrayed on television. Thus, improvisational work and acting with props can lead to varying interpretations of an emotional conflict. On the other hand, Stanislavski's Method allows a therapist to share the patient's experience as it actually occurred and then to understand the catalyst of any resulting emotion. This technique makes clear to the therapist the true origin of any emotional conflict. The young girl in my earlier example, if using Stanislavski's Method, would make clear to her therapist whether a terrifying television program had scared her or whether her father had truly raped her.

Improvisation and acting with props should not be entirely ruled out; there are situations in which they are needed. It is true that improvisation has allowed drama therapists greater insight. Irwin (1986) has described a case study in which a young boy had a particularly strong reaction to a scenario being enacted. As it turned out, the improvisation caused the child to "remember" something he had "forgotten all about." So, it is

possible for improvisation to bring out the real-life experiences of an individual; however, improvisation may also elicit fantasies, fears, and wishes or stimulate an active imagination. These are indeed impressive results; however, improvisation does not allow a therapist to distinguish a patient's fantasy from reality. Stanislavski's Method allows a therapist to partake in a real incident that a patient has most certainly experienced. The Method should thus be a more valid and reliable way to uncover past experiences and to draw conclusions about personality growth. As mentioned before, it should also elucidate the real roots of emotional conflict.

In regard to scene work, drama therapists have continually made the assumption that "the roles individuals choose provide deep insight into personality and character" (Irwin, 1986, p. 353). This assumption has not been adequately shown. It is more reasonable to say that one may choose a role for psychological reasons, thus providing the insight Irwin mentions, or one may choose a role randomly, thus providing no psychological insight. It is important to recognize that even if one does choose a role for psychological reasons, one then necessarily chooses that role because of past experiences that have led to certain personality characteristics. In this case, the personality characteristics resulting from life experience are the impetus for choosing a particular role. Stanislavski's Method allows therapists to delve directly into these life experiences. This method provides more definite insight into personality and character than does role choosing because the uncertain intermediary step of analyzing why an individual chose a role is unnecessary.

A central reason why drama therapy is practiced is that many patients, particularly those who are young, communicate interactively rather than introspectively (Irwin, 1986). Stanislavski's Method, although highly intellectual and introspective from the therapist's standpoint, still provides the interaction needed by many patients.

Two Case Studies Illustrating the Effectiveness of Stanislavski's Method

The following cases, which took place within the context of a drama class, illustrate how the Method can be applied not only to drama therapy but also to therapy in general. The first case explains the Method's ability to uncover an experience that was previously suppressed. The other case shows how the Method can be used as a behavioral tool to alter the way one thinks and feels.

These cases come from my experience at a state-run juvenile facility for male minors who had been convicted of crimes that varied from selling drugs to rape and murder. All of the boys at the facility have conduct disorders that are addressed in individual and group therapy. I taught a

drama class to a group of 13 boys whose ages ranged from 13 to 18. I was not told the details of any of the boys' problems, nor was I told the crimes they had committed.

All of the boys seemed pleased with the notion of a drama class and were anxious to get started. Jeff, however, was the exception about whom I was warned. He had been at the institution for a little more than a year but had not made any improvement. I was told by the staff that although Jeff would remain in my class, he should not be forced to participate.

The drama class progressed nicely, and by the end of the second month, I was ready to introduce Stanislavski's Method. After I explained the Method in theory and practice, I asked for volunteers who were willing to go through the process. Jeff, who until now had sat quietly in the back of the room, volunteered. I was leery of using this particular technique with Jeff because the goal is to evoke affect, something that Jeff seemed to lack. Nonetheless, I proceeded. He decided to re-create a negative emotional experience that involved a fight with his brother. I took Jeff through the steps of affective memory, as previously discussed. Typically, the actor becomes visibly elated, agitated, or upset, depending on the event being re-experienced. Jeff, however, remained expressionless throughout the entire process. He appeared to be experiencing no emotion—neither good nor bad.

In an attempt to elicit some type of a response, I asked Jeff to release everything he was feeling by yelling the word "horse" and by jumping as high in the air as he could. (The word and action are arbitrarily chosen by the teacher to serve as a vehicle of expression.) In response to my request that he release his emotions both vocally and physically, Jeff said, "I can't do it." Jeff's intonation made it apparent to everyone in the room that he was engrossed in an intense experience, though he did not appear to be moved by emotion.

Because it was clear that Jeff was unable to share with us the emotion he was feeling, I helped him through the final stage of the exercise, the neutralization. Once he was completely relaxed and neutralized, I told him he could open his eyes and join the group again. Jeff said that he did not wish to talk about the technique he had just tried; he seemed neither distressed nor happy, just his usual stoic self.

A week later, I was informed that Jeff had had a major breakthrough with his individual therapist. Apparently, while working with me the week before, Jeff had unintentionally relived a particularly painful drug experience; this distressful experience had until this time been suppressed. A point of interest is that Jeff had said he was going to relive a negative event that involved a violent fight with his brother. The reliving of the drug experience was not planned, however, because it was not a con-

scious event about which Jeff could speak. The re-experiencing of this drug-related event was an outgrowth of the reliving of the fight with his brother. Thus, the fight with his brother and the drug experience were related in some way in Jeff's memory. While in his therapist's office, Jeff was able to recall and relate the drug experience in its entirety. He was then able to begin working through this troubling occurrence.

As I found out later, this previously suppressed experience was directly related to Jeff's malfunctioning in other areas of his life. I was informed by the staff that Jeff had been making enormous strides because he had "remembered" (as they incorrectly phrased it) this particular drug experience. As I worked with Jeff once each week, I was acutely aware of his improvements. He was becoming more energetic, sociable, helpful, and talkative.

Approximately 3 weeks later, Jeff approached me in class. He thanked me for helping him re-experience his drug encounter because he had been feeling much better ever since. He also felt the need to explain why he had been unable to complete the exercise that day. Jeff explained that the affective memory technique had helped him, first, to relive a fight with his brother, which then led directly into the drug-related memory. This latter memory had evoked fear and rage within him, and he had been terrified to release it; he had feared losing control and harming someone. It should be mentioned here that going through Stanislavski's Method cannot be likened to a trance because the Method always allows people to retain awareness and some internal control. Jeff exercised this sense of control by stopping the process when he felt he could not go on. However, this notion of controlling oneself is highly relative; it depends upon what one considers losing control. My next illustrative case bears directly on this point.

Marlon also went through Stanislavski's Method; he too chose to re-experience a negative event. Marlon's choice of events was poignant and devastating; this was made clear by his red face and trembling body. When I asked Marlon to release everything he was feeling by jumping and yelling the word "sky," he went far beyond that. He ran around the room screaming and throwing chairs and tables. Marlon appeared to be in a frenzy, and the other boys stood frozen until some staff members came in to seize him. I immediately neutralized Marlon by yelling, "Stop; it's over, Marlon." He then fell to the floor. (This abbreviated form of neutralizing still had the effect of bringing Marlon to the present reality.)

He lay limp on the floor, and the staff and boys looked at me in utter disbelief. This caused the staff to make its first complaint about my use of Stanislavski's Method. Although impressed by how easily one could be neutralized, they feared that someone could be harmed. After Marlon

cried for half an hour, he thanked me. He described in his own words that he had undergone what I interpreted as a catharsis. However, he could not rid himself of what he called a shaky feeling. We went through Stanislavski's Method again, although this time Marlon re-created a positive emotional experience. It was striking to watch the transformation of the agitated, shaking boy into one who was smiling and happy. When the exercise was completed for the second time, Marlon went around the room and hugged everyone. (This was a highly unusual display of affection for the boys at the institution.) Marlon, unlike Jeff, had been able to re-experience the events that he consciously chose.

Jeff's case illustrates how Stanislavski's affective memory can be used to uncover experiences that have been suppressed. Marlon's case demonstrates, quite differently, how this dramatic technique can be used to alter emotional states in a matter of minutes.

Implications

I consider Stanlislavski's Method to be a more reliable and controllable technique than the games now used in drama therapy. Additionally, there are far-reaching implications for using Stanislavski's affective memory outside of drama therapy. For instance, I have already reported on the Method's ability to bring an entirely suppressed event into consciousness. For a partially suppressed or repressed event, Stanislavski's Method might be used by drama therapists and by therapists from other disciplines to uncover fragmented bits of an experience that otherwise would be lost.

An adult using the Method in therapy could re-create a troubling childhood experience and could then reinterpret the event in more logical, sound, and mature terms. Perhaps this re-interpretation could result in a resolution of the previously unsettled issues associated with the event. Irwin (1986) proposes a similar idea when she mentions that improvisations can allow people to act out an experience they have had, making various changes that make the experience more positive. Improvisations, because of their inability to isolate fantasy and reality, might not be as reliable as the Method for diagnoses but might be adequate for therapy thereafter.

The Future: When Stanislavski's Method Should and Should Not Be Used

In this article, I have only touched upon the surface of how the Stanislavski Method might be used in therapy. This dramatic technique, if used as a therapeutic tool, could help patients in a multitude of ways. It

should be realized, however, that there are guidelines for when Stanislavski's affective memory technique should and should not be employed.

Stanislavski's Method can be used, as are more traditional modes of drama therapy, to explore fantasies, dreams, fears, and desires. The Method has the advantage of delving into a real experience and is therefore able to distinguish this reality from fantasy. Temporal considerations aside, a therapist must cautiously determine whether it is beneficial for a given patient to re-experience a particular incident. There are, of course, times when a therapist should determine that re-creating an event from a patient's past is detrimental to his or her emotional growth. The factors weighing in the decision of whether to explore the past are left to the individual therapist. As mentioned earlier, temporal considerations must be more closely analyzed before we can say yes to an experience from 10 years ago, but no to an experience that is 3 years past.

Therapists must also consider the age of the patients because the therapists will need to adjust their explanations and approaches to varying levels of cognitive development. This is not to say that a young child will necessarily have more difficulty using Stanislavski's affective memory, but rather to say that the technique must be explained at a level that is comprehensible to the child.

Stanislavski's Method might be appropriate for patients who have blocked out a segment of an experience. Perhaps when the patient was a child, a particular moment was overwhelmingly painful and was suppressed; now as an adult, the patient can bring that moment to consciousness and re-examine it in more sound and mature terms.

As a behavioral technique, Stanislavski's Method might be used to control mood swings and negative affect, just as cognitive therapy does. The Method can alter a person's mood in minutes.

Obviously, additional research must be done before guidelines can be more clearly specified. Although the terms *re-create, relive,* and *re-experience* lend themselves easily to a mystical interpretation, this is not at all what they mean. The reality is that one's senses are awakened and help to bring back a past experience in full terms. This re-creation then triggers all the emotions that originally accompanied the past experience.

Limitations and Possibilities

The two case studies discussed in this article did present limitations. Because I was hired solely as a drama teacher, I had limited information about the young men with whom I was working. I was given only vague information regarding the young men's disturbances and their daily lives. Because of this fact, I cannot address the issue of intervening vari-

ables. It is possible that other events in the men's lives influenced the Method's power to uncover suppressed events and the ease with which it acted as a behavioral tool.

Stanislavski's affective memory, if used as a therapeutic tool, might be helpful not only to the field of drama therapy but also to therapy in general. Drama therapy has typically been practiced with very general drama games such as improvisation, acting with props, and scene work (Irwin, 1986, 1987; Johnston, Healey, & Magid, 1985). It has not, however, focused on specific techniques, such as the Method, that can be controlled and be determined reliable.

Author's note: My special thanks to Dr. Christopher Peterson for his invaluable help with numerous revisions and without whom this article could not have been completed.

REFERENCES

Hagen, U. (1973). *Respect for acting.* New York: Macmillan.

Irwin, E. C. (1987). Drama: The play's the thing. *Elementary School Guidance and Counseling, 21*(4), 276–283.

Irwin, E. C. (1986). Drama therapy in diagnosis and treatment. *Child Welfare,* LXV #4, 347–356.

Johnston, C. J., Healey, N. K., & Magid, T. D. (1985). Drama and interpersonal problem solving: A dynamic interplay for adolescent groups. *Child Care Quarterly, 14,* 238–246.

WENDY A. LIPPE is currently a graduate student in Boston University's clinical psychology doctoral program.

Date of submission:
January 31, 1991
Date of final acceptance:
June 18, 1992

Address:
Wendy A. Lippe
19 Pond Ave., #215
The Brook House
Brookline, MA 02146