

Lesley University

DigitalCommons@Lesley

Expressive Therapies Capstone Theses

Graduate School of Arts and Social Sciences
(GSASS)

Spring 5-22-2021

Language as the Medium: A Literature Review. Harnessing the Prolific Power of Dramatic Language as a Therapeutic Tool in Drama Therapy

Edward Freeman

Follow this and additional works at: https://digitalcommons.lesley.edu/expressive_theses



Part of the Acting Commons, Ancient History, Greek and Roman through Late Antiquity Commons, Ancient Philosophy Commons, Anthropological Linguistics and Sociolinguistics Commons, Art Therapy Commons, Biological and Physical Anthropology Commons, Classical Literature and Philology Commons, Clinical Psychology Commons, Cognitive Psychology Commons, Counseling Psychology Commons, Cultural History Commons, Dance Movement Therapy Commons, Developmental Psychology Commons, Discourse and Text Linguistics Commons, Dramatic Literature, Criticism and Theory Commons, Epistemology Commons, Intellectual History Commons, Linguistic Anthropology Commons, Modern Languages Commons, Multicultural Psychology Commons, Other Languages, Societies, and Cultures Commons, Other Mental and Social Health Commons, Performance Studies Commons, Philosophy of Language Commons, Phonetics and Phonology Commons, Playwriting Commons, Psychoanalysis and Psychotherapy Commons, Semantics and Pragmatics Commons, Social and Cultural Anthropology Commons, Social History Commons, Speech Pathology and Audiology Commons, Syntax Commons, Theatre History Commons, and the Theory and Philosophy Commons

Recommended Citation

Freeman, Edward, "Language as the Medium: A Literature Review. Harnessing the Prolific Power of Dramatic Language as a Therapeutic Tool in Drama Therapy" (2021). *Expressive Therapies Capstone Theses*. 445.

https://digitalcommons.lesley.edu/expressive_theses/445

This Thesis is brought to you for free and open access by the Graduate School of Arts and Social Sciences (GSASS) at DigitalCommons@Lesley. It has been accepted for inclusion in Expressive Therapies Capstone Theses by an authorized administrator of DigitalCommons@Lesley. For more information, please contact digitalcommons@lesley.edu, cvrattos@lesley.edu.

Language as the Medium: A Literature Review

Harnessing the Prolific Power of Dramatic Language as a Therapeutic Tool in Drama Therapy

Capstone Thesis

Lesley University

May 3, 2021

F. Edward Freeman III

Drama Therapy

Thesis Advisor: Laura L. Wood, Ph.D., LMHC, LCAT, RDT-BCT

Abstract

Language in and of the theatre, with its palate of variegated writing styles and playwrights from throughout time, has the potential to be harnessed, focused, and systematized for use as a therapeutic tool within drama therapy – the field’s artistic medium. Drama therapy could benefit from having a specific medium germane to its artform which has the potential to provide practitioners with a common resource and means of communication, assessment, diagnosis, and treatment planning, as well as align the field with other creative arts therapies. Language encompasses all forms of human communication – speaking, writing, signing, gesturing, expressing facially – and voice and speech training are crucial components of holistic training for actors. This thesis positions language as the primary medium of the theatre by examining multiple and disputed theories of theatre origins as well as interrelated theories of the theatre as an entity in order to distinguish drama as an evolutionary means of human communication. Furthermore, it probes the basic clinical foundations of speech-language pathology, which possesses a wealth of research and theory already supporting language assessment and treatment, in addition to basic biology and neuroanatomy surrounding speech, speech production, and development in order to ground the argument in pre-existing medical and clinical knowledge. Herein, I propose future directions and lay the groundwork for continued research and structured theory development.

Keywords: drama therapy, creative arts therapy, communication, theatre, language, playwright, dramatic language, speech-language pathology, neurobiology, neuroanatomy, speech, actors, voice and speech training, acting technique

Introduction

Common among most modalities of creative arts therapy is the use of their respective artforms' primary media as therapeutic tools; that is to say, the artistic techniques of a specific medium are harnessed and employed as means of assessment, diagnosis, intervention, treatment, and client ingress and growth, among other aspects of the therapeutic process. For example, art therapy makes use of a full range of artistic media, textures, and genres of artmaking; music therapy uses the different musical instruments, tempos, and styles of music; and dance/movement therapy utilizes the body, kinesthesia, and styles of movement assessment and dance. This specificity allows for focus within the professions; a common means of communicating, assessing, diagnosing, and treatment planning among practitioners; and a solid foundation from which to extrapolate theory and technique.

Drama therapy remains a form of creative arts therapy without such a hub, and, indeed, theatre itself, the artform from whence the modality came, encompasses multitudes. Because of this complex quality, one may wonder whether the art of theatre-making can be distilled into a single medium or instrument of creation at all. This thesis is concerned with establishing such a medium as a tool for therapeutic processes within drama therapy. Herein, I intend to establish the primacy of language in the theatre and formulate nascent answers to the question, in what ways might the prolific power of communication through dramatic language and text be used in drama therapy as an established and codified means of the therapeutic process?

The section following this one provides an abridged overview of drama therapy as it is commonly practiced in North America today in order to orient readers with the broad and diverse nature of the field. Subsequently, my ontological view is that in order to begin conceptualizing the potential of dramatic language as a therapeutic tool, there first must be an examination of

human language in reference to the whole; that is to say, in order to implement a particular biological domain as a means of intervention within a professional practice, the theory that supports it should be grounded in knowledge of its physiology, its function in supporting human life, and pre-existing knowledge already at play in other clinical fields. Therefore, the following two sections provide relatively basic information on (a) the evolutionary and neurological foundations of language and (b) an overview of clinical theory and methodology in speech-language pathology.

In the next section, I explore disputed origins of performative practice in order to position drama as an evolving means of communication. The former is paired with some basic theatre theory elucidating the primacy of human expression through dramatic art in addition to a brief look at the birth of modern acting and playwrighting in America, which emerged mainly as a literary form that experimented with scholarly dramaturgy, language, psychological character development, the imploring of deeper reflection and consideration from society, and ultimately revolution. Finally, a general look at voice and speech training for actors and an analysis of what is considered dramatic language provides structure for practical application of the artistic medium as well as directions for future research and theory development.

Literature Review

A Brief Scope of Drama Therapy History and Current Practices

By and large, from the perspective of an American student of drama therapy with a lifelong background in the theatre, I glean that the field in North America currently is informed and dominated by the echoes of Renée Emunah's (2021, 2020) *Five Phase Model*, Robert Landy's (2021, 1994) *Role Theory and Method*, and David Read Johnson's (2021) *Developmental Transformations*, all of which involve elements of projection, embodiment,

improvisation, narrative, imagination, and play. Assessments specific to drama therapy – *Diagnostic role-playing test* (Johnson, 2012) and *Embodiment-projection-role* (Jennings, 2012), for example – are based primarily on role-play, projection, and observation, making them heavily subjective and non-standardized. Snow, Johnson, and Pendzik (2012) refer to these drama-therapy-specific forms of assessment “as a quintessential conflict between art and science” and “simply refer to this theme as the vicissitudes of *measuring the metaphor*” (p. 5).

“Pendzik [2003] discovered a fascinating anecdote on how ‘Binet conducted research with dramatic scenes to examine psychological types in children in 1893’ [p. 91]” (Snow et al., 2012, p. 6). Since this time, techniques that are now used by drama therapists have been implemented as means of assessment in myriad walks of life, from school-settings to the military, strongly influenced by psychodrama (Moreno, 2012) and including improvisation and role-play. By World War II, up through the 1960s, assessments in general shifted away from these scenarios that measured a person’s “inner space” (p. 7) and became more and more quantifiable and standardized (Snow et al., 2012).

By the mid-1970s, drama therapy began to converge, codify, and legitimize itself as a field. Experimental, creative, and educational theatres were in abundance across the United States, and all were being led and practiced mainly by mental health professionals and/or educators (Johnson, 2021). Practitioners like Eleanor Irwin and David Read Johnson were introducing models of assessment and intervention specific to the practice of drama therapy, followed by the likes of Robert Landy, Sue Jennings, and Mooli Lahad in the 1980s and ‘90s (Johnson, 2021; Snow et al., 2012). The ground was fertile for the birth of a new profession.

The *core processes* of drama therapy, first identified by Phil Jones in 1996, constitute what Jones (1996) perceived as common practices within any given drama therapeutic practice

and which currently are in the process of being better defined and concretized (Jason Frydman [NADTA Research Chair], personal communication, February 26, 2021). As it stands at the time of this writing, drama therapy's core processes include *dramatic projection, playing, role, embodiment, empathy and distancing, active witnessing, life-drama connection, transformation, and triangular relationship* (Mayor & Frydman, 2021). Mayor & Frydman (2021) asserted that these core processes "provide a series of unifying and unique constructs for understanding client change" (p. 2).

The most recent edition of *Current Approaches in Drama Therapy* (Johnson & Emunah, 2021) included the following chapters on the models of implementation most commonly practiced throughout North America: the *Integrated Five Phase Model* (Emunah & Ronning, 2021), *Role Theory & Method* (Ramsden & Landy, 2021), *Developmental Transformations* (Johnson & Pitre, 2021), *Society as the Client* (Volkas, Van, & Wheat, 2021), *Narradrama* (Dunne, Afary, & Paulson, 2021), *Ethnodramatherapy* (Snow & Bleuer, 2021), *Transpersonal Drama Therapy* (Kovner, Warren-White, & Linden, 2021), the *ENACT Method* (Cohorst, Ward, Watt, & Feldman, 2021), *Autobiographical Therapeutic Performance* (Pendzik, 2021), the *Miss Kendra Program* (Johnson, Sajjani, Mayor, and Davis, 2021), *Rehearsals for Growth* (Wiener, Ramseur, Osborne, & Sand, 2021), *Psychoanalytic Drama Therapy* (Long, 2021), and *Insight Improvisation* (Gluck, 2021).

I write this thesis at a time when there is an ideological shift in the field, and the fervency of a fresh perspective is dominating the professional discourse and overpowering established methods, all of which is in alignment with the movement for social justice and egalitarianism happening presently (Emunah, Butler, & Johnson, 2021). This thesis seeks to contribute to the cohesion and longevity of drama therapy by noting some historic parallels to our present time,

alluding to positive changes that came from them, and drawing on established theories of the theatre and supplemental clinical practices. Moreover, by reflecting and coalescing a common theme found in each of those fields, the concept of *communication*, my intention is to establish a paradigm from which researchers may begin thinking about potentialities and future directions.

In his introduction for *Theatre Histories*, Nellhaus (2016) wrote,

“Communication practices provide ways of understanding the world that help define culture. The point is extremely important for the study of theatre, because in its most commonplace, paradigmatic form, theatre involves the oral performance of a written script, thus combining the two fundamental modes of communication. That blend forges a strong bond between theatrical performance and communication practices” (p. 11).

The Biological and Neurological Foundations of Language

Knowledge of the neurological basis of language in the brain continues to evolve rapidly and becomes more complex through new discoveries in neuroscience on a regular basis (Fujii et al., 2016). Consequently, there is a lot that scientists and laypeople alike cannot accept yet as hard fact, only possible models. The biological workings of language – along with attention, thinking, and decision making – are not so easily studied scientifically, because corresponding stimuli and behaviors are more difficult to determine and measure, as opposed to abilities such as hearing or vision (Kalat, 2019). What is widely accepted as fact, though called into question as of late (Andreasen, 2006; Nielsen et al., 2013), is that the human brain is lateralized, consisting of a left hemisphere and a right hemisphere. Each hemisphere contains mostly analogous structures that are roughly the same in shape and pattern of connection on each side (i.e., there is both a left-side amygdala and a right-side amygdala, a left-side thalamus and a right-side thalamus, etc.). Each hemisphere plays slightly different roles that contribute to our overall

functioning vis-à-vis specific specializations or capacities; however, they are in constant communication with one another through a set of axons called the corpus callosum as well as several small commissures (bundles of fibers that transmit information back-and-forth), including the hippocampal commissure. This is relevant, because the hippocampus is involved in the limbic system (the emotional center) and is believed to be crucial for memory formation and learning, two skills necessary for language production (Kalat, 2019; Reisberg, 2013). This presumably makes the hippocampal commissure important for memory retention and dissemination throughout the brain (St. Amant & Melville, n.d.).

Moreover, it is important to reiterate that the brain houses a reticular network and “that the two halves of the brain work together” (Reisberg, 2013, p. 39), as was stated above. Andreasen (2006) noted that our brains contain nodes “dedicated” (p. 64) to spoken and written language comprehension and production that are spread out over our entire brains and are always interacting. So, one might think of the two hemispheres as collaborative scene partners, rather than competing teams. Notions such as, a person being *so right-brained* or wanting to *shut off* or *quiet* your left brain, so you can think more creatively with your right, are non sequiturs and can be misleading. Firstly, it is not possible to shut off or quiet one hemisphere and not the other unless you have severe damage to one side of your brain or to your corpus callosum (Kalat, 2019); secondly, optimal creativity, complexity of thought, and fecundity of output comes when both sides are working in tandem (Reisberg, 2013).

The classical model for language in the brain is that the domain is concentrated primarily in the left hemisphere (Fujii et al., 2016; Kalat, 2019), though Huth et al. (2016), claimed that the right hemisphere can understand meaningful sentences. Kalat (2019) claimed that some people who are strongly left-handed (i.e., lacking ambidexterity and/or inclined to use their left hands

for most all manual activities), show a right-hemisphere dominance for speech and language, though most left-handed people show left-hemisphere dominance or a mixture of both.

Andreasen (2006) stated that “the doctrine of hemispheric specialization” (p. 65) is now widely questioned, as is discussed above and below.

As Andreasen (2006) described it, our capacity to generate words, semantics, and syntax spontaneously, while orchestrating many areas of the brain, “is a near-miraculous ability [and] a good example of ‘ordinary creativity’” (p. 63). While we are in conversation, for example, myriad functions are working simultaneously to contribute to the task at hand, including listening, processing and making meaning out of what is being said, watching for facial and gestural cues, listening to ourselves speak, planning what we are going to say while manipulating incoming discursive information in our working memories, drawing imagery and words from our long-term memories and personal lexicons, making referential connections in a matter of milliseconds, parsing sentences, connecting themes, activating facial and oral muscles to articulate speech, engaging our pharynges and esophagi in order to swallow excess saliva, etc. (Andreasen, 2006; Reisberg, 2013; Rouse, 2020). As the above statement makes evident, it takes a village in order to utter a sentence, and no one cognitive “function is rigidly localized in a certain cortical area of the brain” (Fujii et al., 2016, Introduction section, para. 1). The terms *Broca’s area* and *Wernicke’s area* – both in reference to two structures housed on the left side of the brain, as will be discussed in further detail below – continue to be used globally in many literatures and scientific discourse, despite the knowledge “that they are not the sole and definitive language centers of the frontal or temporal lobe” (Fujii et al., 2016, The Neural Basis of Language section, para. 1).

Notwithstanding, Paul Broca remains an important scientific figure, because he paved the way for modern neuroscience when he published his findings in 1865 after performing autopsies on patients who had experienced language impairments and finding damage in the same brain region in almost all of them, the left frontal cortex (Kalat, 2019). Now referred to as Broca's area (one of the "dedicated" language nodes mentioned by Andreasen [2006] above), it is known today that, though the left hemisphere houses structures and areas crucial to language production abilities, the left frontal cortex is only a small part of a much more intricate network of language production. Language production involves an orchestrated effort from many different parts of the brain, each performing a unique process, including ones needed to decode sounds and translate or define words, solve structural relationships in a sentence and understand syntax, synthesize information, etc., each relying on distinct neural pathways. "The point here is that humans do have a considerable amount of neural tissue that is specialized for language [, and]... our skill in using language rests in part on the fact that we have a lot of neural apparatus [sic] devoted to precisely this task" (Reisberg, 2013, p. 352). When a person has Broca's aphasia (a.k.a. *nonfluent aphasia*), that person may have experienced brain damage to any number of regions because of a stroke or head trauma, for example, but always suffers language production impairment resulting in difficulty and taxation while performing all forms of communication.

Similar to Broca's revelation, Carl Wernicke made a discovery in 1874 that patients who had difficulty with language comprehension and difficulty remembering names of objects, yet could speak and write with typical ease, had damage to a part of their left temporal cortices, now known as Wernicke's area, another such "dedicated" language node (Andreasen, 2006; Kalat, 2019). Wernicke's aphasia is also known as *fluent aphasia*, because people still speak articulately but have difficulty with language comprehension and may regularly use

malapropisms or nonsensical syntax because of anomia, or an inability to recall the names of everyday objects (Kalat, 2019). Because of this, they tend to speak very little (Reisberg, 2013). Broca's and Wernicke's are the two most commonly known forms of aphasia, and therefore the two most likely to be compared with each other. There are multiple other forms of aphasia, however, each with its own specific localization in the brain and corresponding communicative impairment. All of these can be addressed through speech-language pathology treatment, a field which diagnoses and treats many other communicative and swallowing disorders (Amanda Kilburn [licensed SLP], personal communication, March 15, 2021).

Speech-language Pathology

Speech-language pathology is a vast field, encompassing numerous domains – far too many to be paid due diligence herein. These domains encompass the study and treatment of a wide “range of human communication and swallowing disorders” including speech and language mechanisms, fluency, feeding and swallowing, and cognition, to name a few (Speech Pathology Graduate Programs, n.d., What is Speech-Language Pathology section, para. 1). This section is divided into four subsections. What follows is a truncated overview of the profession itself as well as of the biological and neuroanatomical production mechanisms, assessments, and treatments pertaining to speech production and language acquisition. In addition, this section briefly touches on the anatomy of voice production and vocal resonance. In-depth and intricate discussion of topics discussed herein is beyond the scope of this paper, and theoretical and practical parallels are drawn and discussed in the final section.

Overview

Speech and language are two separate domains and have different meanings, yet speech-language pathology is the scientific and clinical study of both. The website of Speech Pathology

Graduate Programs (n.d.) defined speech as “the verbal means of communication” (What is Speech-Language Pathology? section, para. 3) comprised of voice, fluency, and articulation. The same website defined language as consisting “of socially shared rules that include how to put words together, how to make new words, what words mean, and” (What is Speech-Language Pathology? section, para. 4) which word combinations are most appropriate for differing situations. Disorders of language can be receptive disorders, in which comprehension is difficult, or expressive disorders, in which formulating and manifesting thoughts, arguments, ideas, and feelings is difficult (Speech Pathology Graduate Programs, n.d.).

The above definition of language, as well as most others, includes not only speech but also writing and forms of non-verbal communication, including gesturing, signing, facial expression, and body language (Amanda Kilburn [licensed SLP], personal communication, April 26, 2021). The tagline, and presumable mission statement, of the American Speech-Language-Hearing Association (ASHA)’s website is “Making effective communication, a human right, accessible and achievable for all” (n.d.). As might be gathered, speech-language pathology is concerned with all forms of communicative disorders and hinderances to a person’s ability to communicate effectively. This is important, because functional communication is a necessary skill for human survival (Kalat, 2019; Reisberg, 2013; Andreasen, 2006).

Language Development and Acquisition

As humans, we learn language remarkably fast and are able to communicate sophisticated ideas of our inner states by the age of three or four (Reisberg, 2013). “The human brain, with its trillion neurons and quadrillion synapses, has nearly endless components to self-organize” (Andreasen, 2006, p. 63). What’s more, research shows that language ability emerges even when a child does not have regular exposure and/or verbal interaction with an adult. For lack of

a better word, children (both deaf and hearing) will *invent* their own voiced or gestural languages, often following similar grammatical structures to existing languages. Of importance to note is that language acquisition is always learned from contextual and environmental information. That is to say, children born in Germany acquire German; children born in Spain acquire Spanish (Reisberg, 2013); children with a racially, culturally, sexually, and socioeconomically diverse peer group develop rich and variegated lexicons (Chen, et al., 2020). Bornstein, et al. (2018) stressed that language skills ultimately have “predictive validity for the development of speech, grammar, reading, academic achievement, and intelligence” and “also predict behavioral adjustment in children” (p. 1). Early signs of poor language stability should be addressed, as they are indicators of possible developmental deficits, including cognitive and socioemotional (Bornstein et al., 2018; Chen et al., 2020).

Other animals have various calls with their own distinct cadences – particular chirps or howls, for example – through which they communicate decidedly simple messages, but “human language stands out from other forms of communication because of its productivity, its ability to improvise new combinations of signals to represent new ideas” (Kalat, 2019, p. 430). Indeed, “no other species has a language comparable to ours in complexity or communicative power” (Reisberg, 2013, p. 323). Kalat (2019) asserted that, like all other things in nature, human language evolved from something that was already there; i.e., it is a modified form of some pre-existing structure. One theory is that it evolved from gestures. A predictor for future language development and skills is a baby’s use of gestures around the first year of life, and adults gesticulate while speaking, even while talking on the phone (Kalat, 2019). Ghazanfar (2013) noted that gesticulation of the mouth muscles is uniquely important to monkeys while

communicating, and that they pay attention to one another's mouths when vocalizing and creating labial rhythms; he argued the plausibility of this as a precursor to language.

Chomsky (1980) and Pinker (1994) proposed that humans, even deaf ones, have an intrinsic instinct in their brains to manifest language, termed the *language acquisition device*, a theory that is both supported and rejected. In support, Konopka et al. (2009), for example, have explored a gene that appears in humans and chimpanzees and has an effect on brain development in both, yet has a more pronounced effect on humans' throat and jaw development, two structures important to speech production. However, de Bot (2015), a linguist whose primary study is second language acquisition, rejects it as pseudoscience. A similar theory argued by many psychologists that remains controversial is "that the human brain contains several mechanisms specifically evolved for language learning, so... language learning is 'wired into' our brains from the start" (Reisberg, 2013, p. 352). In essence, this theory is pointing to a dormant talent just waiting to emerge once given the right environment, grammatical parameters, and contextual meanings. A condition known as *specific language impairment*, in which a child has normal intelligence and normally functioning speech production muscles but is slow to learn language and has difficulty understanding and producing sentences as an adult, provides support for this theory (Reisberg, 2013).

The final theory discussed herein, though certainly not the last of all that exist, is that language is a concomitant effect of socialization in infancy and childhood, an incubator period, of childhood dependency (Deacon, 1992, 1997). Either way, infancy and childhood are profoundly important stages for language development and acquisition, as was suggested above.

The Neuroanatomical Foundations of Speech Production

Rouse (2020) defined language as “a generative and dynamic code containing universal characteristics whereby ideas about the world are expressed through a conventional system of arbitrary symbols for communication” (p. 264). There are three fundamental components to all variations of language: content (semantics), form (grammar and mode), and use (pragmatics or practicality). The multi-faceted definition and three fundamentals alone paint a picture of an incredibly complex system (Rouse, 2020). If one thinks of *language* as a container, it becomes the holding space for multiple forms of expression. Humans can express language through speech (spoken words) and also through writing, gesturing, signing, and body language. For the purposes of this argument, I will focus mainly on communication through speech production.

Speech is a complex subunit of the larger motor system, comprising the motor speech system. Speech, in fact, not only is sensed aurally, but also through somatosensory information, specifically kinesthesia and proprioception (Rouse, 2020). Initiation of speech “is best thought of as being a whole-brain activity” (Rouse, 2020, p. 244), with the cerebral cortex, the prefrontal cortex, and the limbic system taking center stage. Rouse (2020) calls the motor speech system “a multilevel division of control” (p. 244), i.e., a divide-and-conquer-like process in the brain. The first level of the motor speech system, called the conceptual level, begins with a private idea or thought and the need or impetus to share it, thereby allowing another person into one’s personal world through communication (Rouse, 2020). In a non-neurodivergent person, this thought, feeling, or idea is then taken on an eight-tiered journey of planning, decision making, assigning, pruning, organizing, editing, etc., through the brain and motor system and is transformed into a mode of communication in a matter of milliseconds.

Rouse (2020) described the next step, the linguistic planning level, as a sort of “dressing” (p. 244) of one’s thoughts in language (technically called encoding), almost as if dressing it in

the garments or mask of a certain character to play a specific role in the story one is creating at any given moment, which generally is in response to the person(s) with whom he/she/they is communicating. The next six divisions of control of the motor speech system – (a) the motor planning and programming levels, (b) the motor control circuits, (c) the direct motor pathway, (d) the indirect motor pathway, (e) the final common pathway, and (f) the sensory system (Rouse, 2020) – involve functions concerning musculature, articulators, and intricate neuroanatomy, much of which is beyond the scope of this paper, yet could be highly informative if and when explored in further depth and translated into drama therapeutic techniques with intentionality (for example, when addressing specific speech issues associated with any of the above divisions of control). To be noted, however, is the final common pathway (FCP), so called because “it is the [near] last leg of the journey for all motor signals” (Rouse, 2020, p. 253).

Respiration, phonation, resonance, and articulation, the four main subsystems of speech, are all activated by skeletal muscle contractions that are stimulated by spinal and cranial nerves involved with speech’s FCP (Rouse, 2020). Rouse (2020) describes these subsystems as such:

- *Respiration provides the power for speech.*
- *Phonation provides the raw sound for speech.*
- *Resonance provides the tonal qualities for speech.*
- *Articulation provides the speech sounds for speech (p. 254).*

An example of the importance and function of knowledge of the motor speech system, and one that correlates with a current trend in counseling, lies within the subsystem of phonation. “The vagus nerve [the tenth cranial nerve, which begins directly behind the ear and extends all the way down to the viscera, reaching to the colon and playing an important role in resonance and articulation] is a crucial nerve for proper phonatory function” (Rouse, 2020, p, 255). Simply put,

the vagus nerve splits into two branches at the larynx – the superior laryngeal nerve and the recurrent laryngeal nerve – each of which innervates specific laryngeal muscles. Bilateral damage to the upper motor neurons (UMN) “can paralyze both vocal cords... and lead to a more significant strained-strangle phonation” (Rouse, 2020, p. 255), i.e., a breathy voice and/or immodulated pitch control. The vagus nerve also innervates most all muscles of the velum (soft palate), and bilateral UMN damage leads to hypernasality (Rouse, 2020). The general term for weakened speech muscles due to problems in or damage to the nervous system is dysarthria. When a condition progresses to a person having no speech at all, it is called anarthria.

Assessment in Speech-language Pathology

There are assessment procedures within speech-language pathology common to most communicative disorders, generally beginning with an orofacial examination (Shiple & McAfee, 2019). When assessing for a communicative disorder, a valid assessment and interpretive expertise of orofacial structures is important in order to eliminate any anatomical or physiological factors that may contribute to etiology. Common observable abnormalities include, asymmetry of the face or palate, enlarged tonsils, missing teeth, mouth breathing, irregular gag reflex, and structural weakness, among several others that may be difficult for layman readers to understand (Shiple & McAfee, 2019).

As part of speech-motor assessment, an evaluation of clients’ diadochokinetic (DDK) syllable rates is important in order to determine their abilities “to make rapidly alternating speech movements... DDK rate provides information about a client’s motor and speech-planning ability” (Shiple & McAfee, 2019, p. 131). When assessing this domain, clinicians watch for abilities such as sequencing of syllables, production accuracy, fluency, rhythm, breath coordination, and articulation. Generally, clients are asked to repeat the sequenced set of

syllables ‘puh-tuh-kuh’ [pʌ / , /tʌ / , /kʌ /] as quickly as possible (Shipley & McAfee, 2019). Each of these sounds constitutes a lingual formation at different placements in the mouth and indicates any weaknesses in particular areas of speech production. Based on intake knowledge, a clinician may deduce localization of a lesion, which helps draw focus to an intervention and treatment planning (Amanda Kilburn [licensed SLP], personal communication, February 22, 2021).

The most time-consuming yet perhaps most fruitful portion of a speech-language assessment is speech and language sampling, which provides insight into a client’s communicative abilities in a narrative and/or conversational context (Shipley & McAfee, 2019). In order to elicit at least 50-100, but preferably 200, utterances of speech, a clinician has several options for starting a dialogue with a client. One of these is to provide a simple prompt or stimulus question like, “Have you ever gotten lost at the store?” or “Tell me about a recent vacation” (Shipley & McAfee, 2019, p. 133). Especially “helpful when assessing clients with significantly impaired intelligibility” (Shipley & McAfee, 2019, p. 133) is the use of pictures to stimulate a dialogue. Generally, pictures depicting activity are most beneficial for the client, as they present a larger variety of images to explain and can easily segue into conversation. A final method of speech and language sampling is the use of narrative, which differs from conversation, because the client is alone in speaking, and the format recruits and assesses executive function skills, such as planning, organization, and sequencing. Ways of going about this are either to have clients repeat back stories that clinicians just told them, retelling a familiar children’s story or movie plot, or sequencing picture cards (Shipley & McAfee, 2019).

Other common assessment procedures in speech-language pathology are (a) reading passages, (b) evaluating rate of speech, (c) determining intelligibility, (d) syllable-by-syllable stimulus phrases, and (e) charting, all of which culminate to present a composite picture of a

client's articulation, fluency, reading abilities, intelligibility, voice production and quality, prosody, stimulability, and breathing, to name a few (Shipley & McAfee, 2019). In the end, a speech-language assessment is meant to provide a clinician with a picture of clients' communicative abilities in order to draw up a targeted treatment plan for both the clients and their communication partners so that the clients may express themselves more effectively (Shipley & McAfee, 2019). Speech-language pathology treatment's important role is to rearrange communication and listening patterns between clients and their communication partners, and "the [speech-language] clinician is the first listener who effects changes in a client's behavior..." (Hedge & Kuyumjian, 2020, p. 239).

Finally, Shipley & McAfee (2019) assert five principles of a good speech-language pathology assessment:

1. *A good assessment is thorough.*
2. *A good assessment uses a variety of assessment modalities.*
3. *A good assessment is valid.*
4. *A good assessment is reliable.*
5. *A good assessment should be tailored to the individual client" (p. 4).*

Multiple Theories on the Origins of Theatre

The theory that theatre evolved from ancient mythological and spiritual ritual into the performative endeavor it is today is widely held and plausible, but it must be remembered that this theory is just that: a (pseudoscientific) theory. More specifically, it is an assumption with little, if any, concrete evidence (Brockett & Hildy, 2014; Nellhaus, 2016; Rozik, 2002). So rapt are we of the West in this occult notion of theatre being borne from religious ritual that it continues to permeate the intellectual thought of laymen and scholars alike (Rozik, 2002). The

theory comes from an assumption contrived from the anthropological mindset of social Darwinism of the late-19th and early-20th centuries – the ideas of survival of the fittest and that Western culture was more evolved than, say, that of the Yanomami peoples of the Amazon. The prevailing notion was that European nations’ aesthetic forms of theatre-making had evolved to their autonomous states from the mythological and ritualistic practices of their prehistoric days and that, essentially, most everyone else in the world had yet to catch up to their level of sophistication (Brockett & Hildy, 2014; Rozik, 2002). In fact, these anthropologists of late-19th, early-20th century Europe and America “assumed that societies that had evolved such autonomous arts as theatre were superior to those in which the arts had not been separated from ritual” (Brockett & Hildy, 2014, p. 2).

In spite of this, myth and ritual came to be viewed as instrumental and effectual aspects of societies after World War II, when a disillusionment with the technological and fractious world descended upon Westerners, and anthropologists began to study further the lifestyles of these *primitive* worlds, in which they found societal value in practices centered around cultural narrative and group cohesion. (Around this same time, Joseph Campbell, the preeminent scholar of comparative mythology, began publishing his thoughts and findings on these very topics, adding a new dimension to Western discourse [Campbell, 1949; Campbell & Moyers, 1991].) “Myth and ritual came to be looked upon as tools, comparable to language, through which a group discovers, promulgates, and reaffirms its values, expectations, and societal relationships” (Brockett & Hildy, 2014, p. 3).

Thence came the time when rites and ceremonies in all societies, particularly secular ceremonies and those of the courts, came to be viewed as ritualistic and “serv[ing] as unconscious guidelines for behavior” (Brockett & Hildy, 2014, p. 3), e.g., weddings,

graduations, judicial trials, etc. Anthropologists began arguing for all societal exchanges as performative; essentially that theatre was no longer seen as evolving from ritual, but that theatre and ritual were one in the same (Rozik, 2002). “Ritual and theatre were viewed as coexisting modes in which the same elements might be used for differing functions within the same society” (Brockett & Hildy, 2014, p. 3). If we as modern Americans were to consider this notion, we might notice that ritual and theatre use many of the same elements in order to transform time and space and achieve their intended goals: defined parameters, active participants, costumery or symbolic clothing, etc. Again, this theory is highly plausible; however, there is no concrete evidence, and one must remember that these assumptions were and are made by Western peoples without complete knowledge of the *primitive* cultures with whom they compare themselves. A Yanomami person might look upon our events that have elements of theatricality – a concert, a sports game, a church service, a political rally – and assume that they are one and the same with our theatre, not realizing that each serves a different purpose and that distinctions are made within our culture (Brockett & Hildy, 2014).

Given this presumed relationship between theatre and ritual, Brockett & Hildy (2014) posited the construct that, as suggested above, performative activities encompassing most all human “transactions” (p. 3) required the use of similar elements found in real life. These fundamental elements included time, place, cast of characters (i.e., people with whom one is interacting), conflict or scenario (i.e., dramatic tension), clothing, makeup, sounds, etc. What might take two hours or an entire day or year in real life is distilled into a focused representation in a play, e.g., the dramatic representation of the passage of two days through indications in the spoken text or a costume change or a shift in lighting. Pieces of theatre, having “the same basic elements as other human activities do but, having different purposes in mind, choose the

particular form needed for each element and then organize these elements to achieve their purpose” (Brockett & Hildy, 2014, p. 3). From the perspective of interpreting theatre through a scientific system of iconicity and semiotics, Rozik (2010) credited German theatre scholar Erika Fischer-Lichte of the Prague Linguistic Circle as contending “that the theatrical text is not a mere transference ‘into another medium’, but a ‘translation of signs from a linguistic sign system into those of a theatrical sign system’” (p. 13).

Other plausible theories for the origin of theatre involve storytelling, narrative dance, pantomimes, and imitation of animals (Brockett & Hildy, 2014). Generally speaking, most “relationships and encounters in life involve the creation of some sort of persona or mask to reflect the character one wants to project at a given moment [think back to the linguistic planning level of the motor speech system and *dressing* our thoughts in language]... The human propensity to assign meaning to events is an evolutionary capacity of memory, which itself is an adaptive part of what has led to [humans’] survival” (Freeman, 2018, p. 4). An emotionally charged memory is one that formed quickly and indelibly, encoding not only the memorable event itself, but also what happened just prior to and just after it. When your emotions are heightened – your first kiss, for example, or coming within inches of being struck by a car while crossing the street – your body is coursing with hormones and natural chemicals that, in turn, activate parts of your brain that are crucial to memory consolidation (Kalat, 2019). It could very well be that theatre and storytelling itself evolved as survival techniques. “This distinctly human propensity to expand meaning into a narrative that gets passed along through the generations” (Freeman, 2018, p. 4) is perhaps an extension of the evolutionary survival asset of quick memory consolidation when meaning is assigned or emotion is heightened. The reenactment of a near-death encounter with the saber-tooth tiger who lives just on the other side of the woods makes

for a much more memorable warning when narrative, dance, costumes, music, make-up, emotional investment, and dramatic language are incorporated (Freeman, 2018). This is a hypothetical example of an early need for communication skills for survival, similar to what was discussed above in the section outlining the biological and neurological roots of language.

Some theorists have designated the search for an origin of theatre as moot, arguing that there are far too many performative activities throughout history to be able to identify one as “the source” (Brockett & Hildy, 2014, p. 5; Rozik, 2002). In *Theatre Histories*, Nellhaus (2016) introduces readers to many histories and theories of theatre. He asserted that one must think also of social context, corresponding events, their meanings, and their influences on societies when conceptualizing theatre in any given culture and in any given epoch, and he literally tracked the evolutions of societies’ modes of communication and parallelisms in performance.

Furthermore, Nellhaus (2016) postulated that it does not serve a person well to think of theatre in a culturally myopic sense. Especially given the globalism of today’s world, theatrical traditions, texts, popular cultures, and styles are crossing borders and infusing one culture’s theatre with the history and vibrancy of another’s. Throughout his text, Nellhaus (2016) acknowledged the extreme complexity of viewing theatre history and tradition through the lens of societal context and pays special attention to trends in a society’s means of communication (e.g., speech, writing, technology). He argued for what he calls *the primacy of practice*, “a theory about the formation of knowledge, which holds that many of our ideas and thought processes arise through ordinary practical activities rather than abstract reasoning” (Nellhaus, 2016, p. 11). In other words, Nellhaus (2016) argued for an action-based, engaged sort of way of going about epistemology, i.e., communication with society rather than introspective pontification – a dialogue vs. a soliloquy. He pointed to modern cognitive and linguistic

sciences and their support of human thought being “structured by metaphors derived from experiences interacting with the world” (Nellhaus, 2016, p. 11). This, however, speaks more to a way in which theatre evolves with time, culture, and society, keeping pace with means of communication. Reminiscent of Aristotle (c. 335 B.C.) and his *Poetics*, perhaps what Nellhaus (2016) suggested is that theatre is so multitudinous, so multi-cultural and ever-present, that it simply resides in the human psyche and must be placed within the context of ever-evolving society, culture, and communication to thrive and evolve itself.

In *The Necessity of Theatre*, Woodruff (2008) argued that theatre is anywhere and everywhere; it is a necessity of life, which, again, is reminiscent of Aristotle’s (c. 335 B.C.) *Poetics* and the notion that theatre is intrinsic to the human psyche. Through the lens of Woodruff’s philosophical reasoning, theatre is dichotomous, consisting of the people who “know how to receive attention” and the people around the stage who “know how to give it their attention” (p. 4). If a young girl were alone enacting a scenario with her My Little Pony dolls, she simply would be playing. But if her uncle were to come into the room and engage with her by watching, she would be aware that she is receiving attention, perhaps feel validated by it, reciprocate the engagement, and likely elevate her behavior to something more performative, deepening and expanding her inner thoughts (think back to the motor speech system) and further activating her means of expression and communication (Woodruff, 2008).

Finally, another early argument dating back millennia, particularly strong amongst the Greeks of antiquity, whose drama was more humanistic for the time and in which human characters were “assigned a major share in action and control”, was that theatre, as stated above, was “something basic to the human psyche” (Brockett & Hildy, 2014, p. 5), and that people were naturally and by instinct mimetic, taking pleasure in such activity. “Imitation comes naturally to

human beings from childhood (and in this they differ from other animals, i.e. in having a strong propensity to imitation and in learning their earliest lessons through imitation); so does the universal pleasure in imitations” (Aristotle, c. 335 B.C., 3.1).

In discussion of Aristotle’s (c. 335 B.C.) *Poetics*, Rozik (2002) draws a distinction in the concept of mimesis – or that all drama is an imitation of life and “consists [of] iconic replicas of doings, including speech acts” (p. 140). Aristotle (c. 335 B.C.) said that the Dorians, one of the four ethnic tribes of ancient Greece, “lay claim to tragedy and comedy” (2.3); the Dorian word for *doing* is *dran*, which is an early root in the etymology of the modern word *drama*. “This is the reason – some say – for the term ‘drama’: i.e. that the poets imitate people doing things” (Aristotle, c. 335 B.C., 2.3). So, in a sense, mimesis is drama, and drama is action. Aristotle (c. 335 B.C.) wrote, “Tragedy [and comedy are] not an imitation of persons, but of actions and of life. Well-being and ill-being reside in action, and the goal of life is an activity, not a quality; people possess certain qualities in accordance with their character, but they achieve well-being or its opposite on the basis of how they fare” (c. 335 B.C., 4.3). The *poetics* of which Aristotle (c. 335 B.C.) writes are the dithyramb, a hymn honoring Dionysus, and the phallic song, a similar poetic hymn frequently performed at fertility rituals, both from which tragedy (dithyrambs) and comedy (phallic songs) hypothetically evolved (Aristotle, c. 335 B.C.; Heath, 1996).

Aristotle (c. 335 B.C.) also presented readers with an outline for narrative and dramatic structure in *Poetics*, i.e., storytelling: “... for in fact every drama alike has spectacle, character, plot, diction, song and reasoning. But the most important of them is the structure of the events” (Aristotle, c. 335 B.C., 4.3). In outlining the basic concepts of plot, under the heading *Completeness*, Aristotle (c. 335 B.C.) established the necessity of a beginning, a middle, and an end in order to constitute a *whole* – a complete narrative or story, which consists of *agents*

(actors) taking action in a fictionalized depiction of real life. Even if a drama is historical or based on real facts or biographical, it remains a semiotic representation of a story. Aristotle's (c. 335 B.C.) treatises exist to varying degrees in all Western plays to this day. Though theatre has evolved to something drastically more streamlined, his five-act structure – exposition, rising action, climax, falling action, resolution – remains the basic format for storytelling and playwrighting. American acting and script analysis teacher Jayd McCarty (personal communication, March 24, 2021) asserted that following Aristotle's (c. 335 B.C.) basic structure (i.e., reading a script and making acting choices while knowing that the climax [the point in the play with the most suspense] cannot happen immediately after the exposition of the first scene [which establishes baseline normalcy] or that the rising action [introduction of complications and obstacles] cannot take place in the first scene and disrupt the normalcy of the characters' lives before it has been established through the exposition) allowed actors and readers to receive the ultimate dramatic impact and understand the playwright's intentions for the arc of the story being told through the language of the play.

Several other theories of the origins of theatre exist, spanning Egypt and other North African civilizations to empires of the Near East (Brockett & Hildy, 2014). They all are similar to theories discussed above yet are beyond the scope of this paper. In truth, probably there is not one single point of theatrical origin, though it can be argued that theatre likely correlates strongly with the evolutions of linguistic and communicative needs and abilities. Let us now fast-forward a couple thousand years to America in the early-20th century and the dawn of acting and the theatre as legitimate literary and performative artforms in this country.

The Ascendency of Theatre as an Artform in America

When dramatic practices began being taught at American universities in the early-20th century, they were part of English departments and focused on playwrighting and the scholarly study of drama as literature (Bartow, 2006; London, 2013). The first such example of this was when drama critic Brander Matthews was made a professor of Dramatic Literature at Columbia University in New York in 1900 (*Wikipedia*, 2021). A decade later, in 1912, four years after founding the Harvard Dramatic Club, George Pierce Baker began teaching a playwrighting class at that university, listed as course 47 in the English department (Brustein, 2013).

As Baker's course grew to encompass not only playwrighting, but also performance and production, it became famously known as Baker's 47 (or Workshop 47) yet still was regarded as primarily a literary enterprise and, hence, focused on the art of language. Eugene O'Neill, Sidney Howard, and Philip Barry, all Pulitzer- and other award-winning American playwrights, were students in this class at some point. However, because of Harvard's disregard for the theatre, sheer disdain in fact (the university refused to offer credit for Baker's course [Brustein, 2013]), Baker took his teachings to New Haven and established the Yale Department of Drama – now the Yale School of Drama (Baker, 1919; Brustein, 2013).

Within the same epoch – the second decade of the 20th century – theatrical classes and troupes began popping up at universities throughout the burgeoning United States, all of which were subsidiaries of English departments and centered around literary playwrighting and reading (acting in America still was viewed largely from a Puritanical perspective, which regarded the practice as disgraceful, worse yet, criminal – the work of the devil [Houchin, 2003]) (Bartow, 2006; London, 2013). The first acting department in the U.S. was established at the University of Michigan in 1906 (Bartow, 2006), and one of the first university-based troupes was the Carolina Playmakers at the University of North Carolina in Chapel Hill. Founded in 1918 by

Frederick H. Koch, the troupe sought to lift the poetic voices of young, native playwrights and create a theatre that spoke to the people of the region, largely producing plays drawn from local legend and lore (London, 2013). Again, the stars of these courses and the productions were the playwrights; the acting troupes were secondary. (It was not until the early-1920s that Stanislavsky and his Moscow Art Theatre [MAT] troupe visited the U.S. and exposed Americans to his revolutionary system of acting [Magarshack, 1968] and not until the 1930s, through the enduring influence of MAT ex-patriots Richard Boleslavsky and Maria Oupenskaya, that this technique began infiltrating the craft of acting in America, primarily through the experimental Group Theatre [Clurman, 1945, 1975], elevating it to a respectable artform [Magarshack, 1968].) Paul Green and Thomas Wolfe, both native North Carolinians, are just two notable names that came out of the Carolina Playmakers.

Happening simultaneously, primarily in the bohemian Greenwich Village section of New York, experimental theatre troupes of young radicals were flourishing (Heller & Rudnick, 1991). As part of what seems to have been the collective unconscious of the 1910s, America and its people were restive and ripe for change. The country was still controlled in many ways by the old guard of Victorian civility, but many citizens were in search of a “new American cultural identity” (Heller & Rudnick, 1991, p. 227) and dared to disrupt social mores and ways of thinking. Politically minded, well read, sexually liberated, and socialist-centered revolutionaries were impassioned by the notion that the theatre could and would be their vehicle for discovery, communication, and change. At the vanguard were the Provincetown Players (Heller & Rudnick, 1991; Ozieblo, 1994; Vorse, 1942, 1991), who “drew their energy from a mix of American pragmatism, the politics of anarchism, and the philosophy of Nietzsche” (McConachie, 2016, p. 387).

Barbara Ozieblo (1994) quoted William Archer, the first American translator of Ibsen, as saying, “In the region of Washington Square or Greenwich Village, or... among the sand dunes of Cape Cod – we must look for the real birthplace of the New American Drama” (p. 10). Disenchanted with the banal vaudeville and melodrama of Broadway, husband and wife George Cram Cook and Susan Glaspell collected a group of like-minded writers and theatre practitioners while retreating at the now infamous artists’ colony on Cape Cod in the summer of 1915 (Heller & Rudnick, 1991; Ozieblo, 1994; Vorse, 1942, 1991). So began a radical shift in American theatre, perceptions of the self, and the artform’s evolution as a means of communication. Influenced by the new doctrines of Freud and the popular yet complex paradigms of cubism, impressionism, expressionism, and allegory, the Players were devoted to the advancement of the voice of the American playwright and established themselves as an early experimental theatre where “‘artists of the theatre’ ... could ‘play with’ and ‘... work out their ideas in freedom’, unhampered by commercial concerns” (Ozieblo, 1994, p. 10).

By the time 1920 rolled around, New York City had fixed itself as the theatre capital of the United States, attracting a wealth of raw talent and cementing a history of theatrical receptivity and dominance that had been in the works since the Civil War (Houchin, 2003).

A new generation of producers, playwrights, and designers had witnessed the disaster of war, revolution, and the loss of ideals, and attempted to transform theatre into a forum where this new and uncomfortable discourse might take place. Provincetown Playhouse introduced New York audiences to Eugene O’Neill and proved that American playwrights were indeed artists... Eugene O’Neill introduced New York audiences to a frank and often brutal portrayal of the human condition (Houchin, 2003, p. 72).

Though two more iterations of the group operated at the Provincetown Playhouse on MacDougal Street in Greenwich Village until 1929, the original Players disbanded officially in 1922. By that time, they had written and produced close to a hundred plays and launched the literary careers of Susan Glaspell and Eugene O’Neill, both of whom are considered Expressionistic writers (McConachie, 2016). What resulted from the whole was a theatrical collection rich in challenging plot material, complex characters with points-of-view and inner lives that informed their actions, and dynamic language which lent itself to relatable expression of inner lives (i.e., mimesis), deep thought, and meaning making. American theatre, playwrighting, acting, spectating, and thinking would never be the same.

Final Discussion

To consider the language of the theatre as a construct for use as therapeutic intervention may seem vague and implausible. How can language be any different from real-life language simply because it is paired with the theatre? As was established above, *language* and *theatre* are both means of communication, and communication is necessary for human survival. In fact, the fundamental necessity of communication has been the common theme throughout this colloquy. “Like the art of language, the art of theater [sic] is one of the things we have to have in order to be human” (Woodruff, 2008, p. x). Let us go back to Aristotle (c. 335 B.C.) and look at how he described *diction*, one of the six elements he deemed necessary for the creation of drama, which he paired with *reasoning*: “Under reasoning fall those effects which must be produced by language; these include proof and refutation, the production of emotions (e.g. pity, fear, anger, etc.), and also establishing importance and unimportance” (Aristotle, c. 335 B.C., 9.1).

Similar to the theories of Brockett & Hildy (2014), Woodruff (2008), Rozik (1992, 2002, 2010), and McCarty (personal communication, March 24, 2021) discussed above, Aristotle

asserted that language in the theatre is specifically chosen to steer the attention of audiences and actors alike and produce a certain outcome. “It is no wonder, therefore, that the theatre... [is] an illusion of life that the audience is allowed to observe. However, this illusion should not detract from our awareness that the theatrical performance is in fact a text, a formulation of iconic terms, the aim of which is to evoke and categorize a fictional world in the minds of the spectators” (Rozik, 1992, p. 15). Rozik’s statement is in accord with the *conceptual level* of speech production in the brain, the *iconic terms* of the theatre eliciting visions, imagery, feelings, and thoughts about *a fictional world in the minds of the spectators*, then requiring those spectators to advance to the *linguistic planning level* and dress their thoughts in the costumery of language.

In closure of his brief statement on *reasoning*, Aristotle (c. 335 B.C.) asked, “What would the speaker’s [i.e., actor’s] function be if the necessary effect were evident without the use of language?” (9.1). What indeed? What distinguishes theatre from dance, visual art, or music? What and whom are the instruments of creation in these artforms? Bear in mind here that I am not discussing a strict code of meaning-making. As in all art, that is left to the spectator. As is stated above, language encompasses different codes of semiotics – speech, written word, signing language, gesticulation, facial expression, body language – all of which can be involved in theatre-making. I am, however, arguing that a playwright – the creator of a piece of drama – writes with specific intention, and the language he/she/they encodes into the script, whether spoken or directional, is carefully chosen to elicit a particular outcome in the story and guide actors in their acting choices, not necessarily imbue a particular meaning. “... [T]here is no fixed meaning which is ‘brought to life’ in production. Meanings differ according to different, though often related, semiotic systems. The according of prime status to one system only is

untenable. Intentions to mean in one system should not be used as a means of privileging meanings in another system” (Birch, 1991, p. 10).

Under *Basic concepts*, Aristotle (c. 335 B.C.) outlined that “[d]iction as a whole has the following elements: phoneme, syllable, connective, noun, verb, conjunction, inflection, utterance” (9.2). This aligns directly with an important component of actor training: voice and speech. In describing the first element, Aristotle (c. 335 B.C.) said, “A *phoneme* is an indivisible vocalization – not any kind, however, but one which can be part of a composite vocalization; some animal noises are indivisible, but these are not what I mean by phonemes. Phonemes are classified as vowels, continuants and mutes” (9.2.i). Think back to the first section on the biology of language: animals other than humans have calls and sounds they produce to communicate simple messages with one another, vocalizations comprised of one or two, maybe three, phonemes. Human animals, however, are capable of painting pictures in the minds of their communication partners with their phonemes, so variegated and diverse are they. Arthur Lessac (1997) offered just one method of vocal training for actors, and he stated:

*[O]ur human sensing system functions not only through the five outer fundamental senses (hearing, sight, touch, taste, and smell) but also through an **inner harmonic sensing** system. As with musical instrumental and vocal pitches, each of our outer fundamental senses can also produce ‘harmonic offspring’; and once the outside signal is registered internally, it transmutes and becomes synergized into sensory harmonics and overtones, creating new dynamics, new essences, and new intelligence, thus producing its own indigenous resonances, vibrations, reflections, images, and movements through our innate kinesensic [sic] feeling process (p. 5).*

The human voice possesses tremendous power to connect us with our own identities, deepen our relationships both internally and externally, and ultimately transform our personal codes of semiotic meaning in life.

This thesis encompasses much to consider in terms of identifying, harnessing, and systematizing dramatic language for use as drama therapy's medium specific to its corresponding artform. The argument throughout has been that language, in all its forms, is the primary medium of the theatre and one that could be harnessed for universal use within drama therapeutic practice. Theatre itself is a medium of communication, and communication is essential for human survival. My intention is for this to be a mere beginning: a planting of the seed and an early attempt at examining historical factors and theories that potentially could support future research and theoretical development. I propose and plan my own future research into a multitude of national and international theatrical origins, practices, techniques, cultures, representations, and means of communication to insure the inclusion of all modes of expression. Furthermore, interconnected factors that will need to be researched in future studies, among several others, are the physiology of human vocal cords and surrounding musculature as well as the physiology of breathing. Hopefully, some of the analyses herein have sparked the imaginations of readers and inspired syntheses and potential practical uses on their own accords. I will, however, make a few proposals for future directions:

First, the creation of a taxonomy of pre-existing dramatic text that coincides with Landy's (2021, 1994) role theory and is classified by parameters that include theatrical writing styles (e.g., Absurdist, Classical, Expressionistic, Minimalistic, Epic, melodramatic, etc.), playwrights with distinct literary voices and artistry of language (e.g., Kushner, Glaspell, Wilson, Simon, Hansberry, Williams, Fornés, Mamet, O'Neill, etc.), archetypal characters (e.g., hero, clown,

nurturer, hedonist, doctor, etc.), those characters' super-objectives (e.g., to save a friend from [metaphorical] impending doom, to provide sustenance for a child, to survive, etc.) and their corresponding actions (i.e., tactics one will try in order to achieve the super-objective). That taxonomy can then be supported by a structured theory that outlines therapeutic techniques for its efficacious use as a model of practice in five clinical domains.

The five domains I propose are 1) a means of assessment specific to drama therapy that is standardized, valid, and grounded by speech-language pathology theory and medical facts about the human voice, physiology, kinesthesia, proprioception, and neurology; 2) an empirical means of clinical diagnosing that also is grounded in pre-existing speech-language pathology and medical theory and technique; 3) ingress and rapport building between client and clinician (e.g., using a pre-existing dialogue to initiate conversation, trust, collaboration, and co-creation, selection of which would be informed by the dramatic language taxonomy and the presentation of the client); 4) intervention (e.g., spontaneous use of a piece of pre-determined text in order to regulate clients or aid them in putting their hard-to-express feelings into words, selection of which also would be informed by guidelines in the dramatic language taxonomy), and 5) treatment planning (i.e., scaffolding pieces of text based on clients' levels of capabilities and needs, informed by the therapeutic goal, possibly leading to the creation of their own texts or segueing into ethnodramatherapy [Snow & Bleuer, 2021] or autobiographical therapeutic performance [Pendzik, 2021]).

Secondly, a more intentional review of voice and speech training for actors is needed. Up until the early-20th century, this was a primary means of training actors (Bartow, 2006), and today, in addition to myriad acting techniques, a wealth of voice and speech training techniques exists for supporting actors in embodying a character and bringing to life a piece of dramatic

text. These techniques range from more classical styles which require meticulous adherence to phonetic sounds and diction (Berry, 1973):

The voice is the means by which, in everyday life, you communicate with other people, and though, of course, how you present yourself – your posture, movement, dress and involuntary gesture – gives an impression of your personality, it is through the speaking voice that you convey your precise thoughts and feelings. This also involves the amount of vocabulary you have at your disposal and the particular words you choose. It follows, therefore, that the more responsive and efficient the voice is, the more accurate it will be to your intentions (p. 7)

all the way to contemporary techniques that incorporate actors' entire bodies, a focus on strengthening their natural ways of speaking, and bioenergetics (Fitzmaurice, 1997, 2003):

Since the physical and emotional aspects and the awareness levels of the actor can be deeply affected by this work, the resulting growth of the personality helps create a more mature artist, with increased potential for both sensitivity and pro-action. Through self-reflexive contact with the autonomic nervous system the actor acquires not only a more functional vocal instrument but also gains an autonomy, authenticity, and authority, which impact both personal and social behavior, as well as aesthetic choices (1997, p. 3).

Despite stylistic differences, all methods of voice training are meant to enhance the quality of actors' physical and expressive instruments, develop clarity of thought and sound production, enhance breath quality, and imbue confidence. If translated for use in therapeutic settings with non-actors, these techniques could be beneficial in client treatment, particularly in the early stages of ingress and in the clients' developing a heightened awareness of their internal lives.

An example of a potential intervention that synthesizes most every topic discussed throughout this thesis is an embodied adaptation of semantic feature analysis (Coehlo, et al., 2010), a technique used in speech-language pathology, in which a client (typically one with aphasia or impaired discursive word retrieval abilities) performs circumlocution around a word of his/her/their choice, eventually strengthening semantic networks in the brain and building the mental and verbal stamina needed to free associate and speak with greater ease while in conversation (Amanda Kilburn, [licensed SLP], January 4, 2021, May 3, 2021; Peach & Reuter, 2010). By engaging with words of their choices, clients would be acting upon the speech motor system and bringing a personal idea to the fore, then dressing it in free-associative language of their choice (think neuroanatomy of speech). Part of this physical exploration could be isolating the monosyllabic phonemes (think Aristotle) of their words and experimenting with the bodily sensations and different meanings and roles (Landy, 2021, 1994) associated with these separate sounds (think voice training for actors) – perhaps imitating animals (think neurology and mimesis), building word ladders, or creating new words or syntaxes that they could eventually move into a piece of autobiographical text, thereby entering themselves into the American canon of expressive dramatic literature (think early-20th century theatre in America).

By physicalizing and embodying the words and sounds, the above intervention is placed in alignment with existing theories and techniques of drama therapy. Through this or similar extrapolations, clients eventually could find deeper resonance and comfort with their own unique languages, their voices, the patterns and manifestations of their thoughts and inner lives, and more diverse and personally pleasurable lexicons. After acquiring these stronger means of expression, clients may then find clarity in identifying their individual values and purposes in life, and perhaps a more meaningful way of relating to and communicating with the world.

References

- American Speech-Language-Hearing Association (ASHA) (n.d.). *Home page*. Retrieved March 15, 2021. <https://www.asha.org>.
- Andreasen, N. C. (2006). *The creative brain: The science of genius*. Plume, a member of Penguin Group.
- Aristotle (1996). *Poetics*. (M. Heath, Trans.). Penguin Group. (Original work published c. 335 B.C.).
- Baker, G. P. (1919). *Dramatic technique*. The Riverside Press, Houghton Mifflin Company.
- Bartow, A. (2006). Introduction. In A. Bartow (Ed.), *Training of the American actor* (pp. xv-xlii). Theatre Communications Group.
- Berry, C. (1973). *Voice and the actor*. Wiley Publishing, Inc.
- Birch, D. I. (1991). *The language of drama*. St. Martin's Press, Inc.
- Bornstein, M. H., Chun-Shin, H., Putnick, D. L., & Pearson, R. M. (2018). Stability of core language skill from infancy to adolescence in typical and atypical development. *Science Advances*, 4(11), 1-12. <http://advances.sciencemag.org/content/4/11/eaat7422>
- Brander Matthews (2021, April 10). In *Wikipedia*.
https://en.wikipedia.org/wiki/Brander_Matthews
- Brockett, O. G., & Hildy, F. J. (2014). *History of the theatre* (10th ed.). Pearson Education Limited.
- Brustein, R. (2013). American Repertory Theater. In T. London (Ed.), *An ideal theater: Founding visions for a new American art* (pp. 514-524). Theatre Communications Group.
- Campbell, J. (1949). *The hero with a thousand faces*. Bollingen Foundation by Pantheon Books.

- Campbell, J., & Moyers, B. (1991). *The power of myth*. Anchor Books, a division of Random House, Inc.
- Chen, J., Justice, L. M., Tambyraja, S. R., & Sawyer, B. (2020). Exploring the mechanism through which peer effects operate in preschool classrooms to influence language growth. *Early Childhood Research Quarterly*, 53(2020), 1-10.
<https://doi.org/10.1016/j.ecresq.2020.02.002>.
- Chomsky, N. (1980). *Rules and representations*. Columbia University Press.
- Clurman, H. (1945, 1975). *The fervent years*. Da Capo Press, Inc., a member of Perseus Books Group.
- Coelho, C. A., McHugh, R. E., & Boyle, M. (2010). Semantic feature analysis as a treatment for aphasic dysnomia: A replication. *Aphasiology*, 14(3), 133-142.
<https://doi.org/10.1080/026870300401513>
- Cohorst, D. B., Ward, E., Watt, C., & Feldman, D. (2021). The ENACT method. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 306-337). Charles C. Thomas.
- de Bot, K. (2015). *A history of applied linguistics: From 1980 to the present*. Routledge.
- Deacon, T. W. (1992). Brain-language coevolution. In J. A. Hawkins & M. Gell-Mann (Eds.), *The evolution of human languages* (pp. 49-83). Westview Press.
- Deacon, T. W. (1997). *The symbolic species*. Norton.
- Dunne, P., Afary, K., & P. Paulson (2021). Narradrama. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 206-249). Charles C. Thomas.
- Emunah, R. (2020). *Acting for real* (2nd ed.). Routledge, Taylor & Francis Group.
- Emunah, R., Butler, J., & Johnson, D. R. (2021). The current state of the field in drama therapy.

- In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 22-36). Charles C. Thomas.
- Emunah, R., & Ronning, D. (2021). The integrative five phase model. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 39-81). Charles C. Thomas.
- Fitzmaurice, C. (1997). Breathing in meaning. In M. Hampton (ed.), *The vocal vision*. Applause Books.
- <https://static1.squarespace.com/static/5569e19fe4b02fd687f77b0f/t/5a754aaac830259c538410f6/1517636267248/Breathing+is+Meaning+2018.pdf>
- Freeman, F. E. (2018). *Theories of drama therapy final paper*. [Unpublished master's final paper]. Lesley University
- Fujii, M., Maesawa, S., Ishiai, S., Iwami, K., Futamura, M., & Saito, K. (2016). Neural basis of language: An overview of an evolving model. *Neurologia medico-chirurgica (Tokyo)*, 56(7), 379-386. <https://doi.org/10.2176/nmc.ra.2016-0014>.
- Ghazanfar, A. A., Morrill, R. J., & Kayser, C. (2013). Monkeys are perceptually tuned to facial expressions that exhibit a theta-like speech rhythm. *Proceedings of the National Academy of Sciences of the United States of America*, 110(5), 1,959-1,963.
- <https://doi.org/10.1073/pnas.1214956110>
- Gluck, J. (2021). Insight improvisation: Integrating mindfulness and meditation with drama therapy. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 458-492). Charles C. Thomas.
- Heath, M. (1996). Introduction. In Aristotle, *Poetics*. (M. Heath, Trans.). Penguin Group. (Original work published c. 335 B.C.).

- Hedge, M. N., & Kuyumjian, K. (2020). *Clinical methods and practicum in speech-language pathology* (6th ed.). Plural Publishing, Inc.
- Heller, A., & Rudnick, L. (Eds.) (1991). *The cultural moment: The new politics, the new woman, the new psychology, the new art, and the new theatre in America*. Rutgers University Press.
- Houchin, J. (2003). *Censorship of the American theatre in the twentieth century*. Cambridge University Press.
- Huth, A. G., de Heer, W. A., Griffiths, T. L., Theunissen, F. E., & Gallant, J. L. (2016). Natural speech reveals the semantic maps that tile human cerebral cortex. *Nature*, 532(2016), 453-458. <https://doi.org/10.1038/nature17637>.
- Jennings, S. (2012). Drama therapy assessment through embodiment-projection-role (EPR). In D. R. Johnson, S. Pendzik, & S. Snow (Eds.), *Assessment in drama therapy* (pp. 177-196). Charles C. Thomas.
- Johnson, D. R., & Pitre, R. (2021). Developmental transformations. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 123-161). Charles C. Thomas.
- Johnson, D. R. (2021). Development of the modern profession of drama therapy in North America. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 5-21). Charles C. Thomas.
- Johnson, D. R. (2012). Diagnostic role-playing test. In D. R. Johnson, S. Pendzik, & S. Snow (Eds.), *Assessment in drama therapy* (pp. 61-90). Charles C. Thomas.
- Johnson, D. R., & Emunah, R. (Eds.) (2021). *Current approaches in drama therapy*. Charles C. Thomas.

- Johnson D. R., Sajnani, N., Mayor, C., & Davis, C. (2021). The Miss Kendra program: Addressing toxic stress in the school setting. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 362-398). Charles C. Thomas.
- Jones, P. (1996). *Drama as therapy: Theatre as Living*. Routledge.
- Kalat, J. W. (2019). *Biological psychology* (13th ed.). Cengage Learning, Inc.
- Konopka, G., Bomar, J. M., Winden, K., Coppola, G., Jonsson, Z. O., Gao, F., Peng, S., Preuss, T. M., Wohlschlegel, J. A., & Geschwind, D. H. (2009). Human specific transcriptional regulation of CNS development genes by FOXP2. *Nature*, 462(2009), 213-217.
<https://doi.org/10.1038/nature08549>
- Kovner, P., Warren-White, N., & Linden, S. B. (2021). Transpersonal drama therapy. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 284-305). Charles C. Thomas.
- Landy, R. J. (1994). *Drama therapy: Concepts, theories and practices*. Charles C. Thomas.
- Lessac, A. (1997). *The use and training of the human voice: A bio-dynamic approach to vocal life* (3rd ed.). Mayfield Publishing Company.
- London, T. (Ed.). (2013). *An ideal theater: Founding visions for a new American art*. Theatre Communications Group.
- Long, K. (2021). Psychoanalytic drama therapy: Playing on the analytic stage. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 431-457). Charles C. Thomas.
- Magarshack, D. (1968). Stanislavsky. In E. Bentley, *The theory of the modern stage* (pp. 219-274). Penguin Books.
- Mayor, C., & Frydman, J. S. (2021). Understanding school-based drama therapy through the

- core processes: An analysis of intervention vignettes. *The Arts in Psychotherapy*, 73(2021), 1-10. <https://doi.org/10.1016/j.aip.2021.101766>.
- McConachie, B. (2016). New media divide the theatres of print culture, 1870-1930. In T. Nellhaus (Ed.), *Theatre histories: An introduction* (3rd ed.) (pp. 363-395). Routledge.
- Moreno, Z. T. (2012). *To dream again: A memoir*. Mental Health Resources.
- Nellhaus, T. (Ed.). (2016). *Theatre histories: An introduction*. Routledge.
- Nielsen, J. A., Zielinski, B. A., Ferguson, M A., Lainhart, J. E., & Anderson, J. S. (2013). An evaluation of the left-brain vs. right-brain hypothesis with resting state functional connectivity magnetic resonance imaging. *Plos One*, 8(8) e71275. <https://doi.org/10.1371/journal.pone.0071275>
- Ozieblo, B. (Ed.). (1994). Introduction. In B. Ozieblo (Ed.), *The Provincetown Players: A choice of the shorter works* (pp. 10-33). Sheffield Academic Press, Ltd.
- Peach, R. K., & Reuter, K. A. (2010). A discourse-based approach to semantic feature analysis for the treatment of aphasic word retrieval failures. *Aphasiology*, 24(9), 971-990. <https://doi.org/10.1080/02687030903058629>
- Pendzik, S. (2021). Autobiographical therapeutic performance in drama therapy. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 338-361). Charles C. Thomas.
- Pinker, S. (1994). *The language instinct*. HarperCollins.
- Ramsden, E., & Landy, R. (2021). Role theory and the role method. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 82-122). Charles C. Thomas.
- Reisberg, D. (2013). *Cognition: Exploring the science of the mind* (5th ed.). W. W. Norton &

Company.

Rouse, M. H. (2020). *Neuroanatomy for speech-language pathology and audiology* (2nd ed.).

Jones & Bartlett Learning, LLC, an Ascend Learning Company.

Rozik, E. (1992). *The language of the theatre*. Theatre Studies Publications.

Rozik, E. (2002). *The roots of the theatre: Rethinking ritual and other theories of origin*.

University of Iowa Press.

Rozik, E. (2010). *Generating theatre meaning: A theory and methodology of performance analysis*. Sussex Academic Press.

Shipley, K. G., & McKafee, J. G. (2019). *Assessment in speech-language pathology: A resource manual* (6th ed.). Plural Publishing, Inc.

Snow, S., & Bleuer, J. (2021). Ethnodramatherapy. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 250-283). Charles C. Thomas.

Snow, S., Johnson, D. R., & Pendzik, S. (Eds.). (2012). *Assessments in drama therapy*. Charles C. Thomas.

Speech Pathology Graduate Programs (n.d.). *What is speech-language pathology?* Retrieved March 15, 2021,

<https://www.speechpathologygraduateprograms.org/what-is-speech-language-pathology/>

St. Amant, M., & Melville, P. (n.d.). *Hippocampal commissure*. Radiopaedia.

<https://radiopaedia.org/articles/hippocampal-commissure?lang=us>.

Volkas, A., Van, I., & Wheat, A. (2021). Society as the client: Healing the wounds of history.

In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 162-205). Charles C. Thomas.

Vorse, M. H. (1942, 1991). *Time and the town: A Provincetown chronicle*. Rutgers University

Press.

Wiener, D. J., Ramseur, C., Osborne, J., & Sand, M. (2021). Rehearsals for growth: A drama therapy of relationships. In D. R. Johnson & R. Emunah (Eds.), *Current approaches in drama therapy* (3rd ed.) (pp. 399-430). Charles C. Thomas.

Woodruff, P. (2008). *The necessity of theater: The art of watching and being watched*. Oxford University Press.

THESIS APPROVAL FORM

**Lesley University
Graduate School of Arts & Social Sciences
Expressive Therapies Division
Master of Arts in Clinical Mental Health Counseling: Drama Therapy, MA**

Student's Name: F. Edward Freeman III

Type of Project: Thesis

Title: Language as the Medium: A Literature Review. Harnessing the Prolific Power of Dramatic Language as a Therapeutic Tool in Drama Therapy

Date of Graduation: May 22, 2021

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: Laura Wood