

# MYTHPRINTS IN THE SAND: COMPARING THE MYTHOGRAPHICAL APPROACHES OF SANDPLAY AND SANDTRAY-WORLDPLAY

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Sandtray work is a multidimensional medium that lends itself to a multiple level analysis. The dialogue in the treatment community comparing the theory and methodologies of Dora Kalff and Gisela De Domenico has been focused on their psychological tenets. However, to say that Kalfians follow Jungian tenets is not entirely accurate, since they, in fact, dispute some significant elements of Jung's thoughts. It is equally false to say, as critics have, that Sandtray-Worldplay (ST-WP) is "anti-Jungian"; to the contrary, that practice mirrors important aspects of Jung's own work with the unconscious. Further, it may be a misjudgment to evaluate the two approaches solely by their psychological tenets because sandtray work is equally based in the spiritual and the mythic. Perhaps some new dimensions can be added to the on-going theoretical discussion by looking at each school's theory of mythography (how each studies mythic thought). My intention is to demonstrate how the customs and rituals of the therapeutic encounter portray each school's underlying beliefs about mythic thought.

A basic aspect of both mythology and psychotherapy is the exploration of the Other. Mythologists explore the Other from a different time or culture. Psychotherapists see the Other as either the client or the client's psyche. Beliefs about the Other are portrayed in the manner in which the investigation is conducted (Downing, 1999). For example, it is possible to have a phenomenological approach, a sociofunctional approach, or a structuralist approach. Each brings its own ideas of who the Other is.

Understanding one's personal myth has become increasingly popular (Feinstein & Krippner, 1997). It has been said that the sandtray therapist functions as both anthropologist and therapist (De Domenico, 1993). I propose that the title of 'mythologist' is an apt union of these practices, for the ST-WP therapist listens to the stories, observes the rituals, and follows the symbols in order to understand how these become meaningful experiences for each person. The ST-WP therapist guides clients to ask of themselves precisely the same questions a mythologist asks in looking at how one's personal identity is revealed through a particular myth: "Who am I? Who have humans like me been? What are the possible ranges of being human?" (Doty, 1986, 33).

Mythic thought is a way of being in the world. It should not be narrowly defined as responding to ordinary life with one's imagination, for it goes much deeper. In sandtray therapy, personal myth is released through intimate work with sand,

water and objects. Sandtray Worlds express one's symbolic life and one's relationship to the Self. They also lay a mythic pattern that reveals the meaning of one's world. Thus the construction of personal myth in the sandtray serves a similar function for the individual as collective myth and ritual does for a culture.

Both myth and sandtray worlds are products of our primary process. Sandtray work, possibly more than dreamwork or art therapy, has kinship with cultural mythology because it creates the context of 'world'. The Sandtray World holds a psychological ecosystem composed of terrain, climate, vegetation, peoples, animals, customs, taboos, and spirituality. As with any culture, each Sand World has a creation mythology. Accordingly, a sandtray process allows for the same experience William Doty (1986) attributes to mythic metaphor: "Alive in a world of metaphoric and symbolic meanings, they allow experimentation and play with images, ideas, and concepts that otherwise would remain too incorporeal to be engaged". Sandtray Worlds thus lend themselves well to be evaluated as mythologies.

Currently, there are two schools of sandtray therapy. Sandplay was developed by Dora Kalff, and Sandtray-Worldplay was created by Gisela Schubach De Domenico. With respect to the structure of sessions and theoretical assumptions, these two methods of sandtray work are very different. Interestingly, each school claims the same merits and alleges the other lacks them. Both schools claim to be experience focused (Bradway & McChord, 1997, 37; De Domenico 1989). Both claim to honor the natural process of the unconscious (Kalff, 1980) or depth of consciousness as De Domenico prefers to describe it (1989). Both claim to be non-interpretive (Bradway & McChord, 1997, 46; Weinrib, 1983, 13; De Domenico 1988). Ironically, each continues to point the proverbial finger at the other, broadening the professional schism and promoting polarity, a negative construct which each claims to be healing (Weinrib 1983, 69; De Domenico, 1989).

How can this be? I hypothesize that each method can claim its merits because of its mythography, the underlying belief structures about mythic thought that influence: how clinical data is acquired, how differences and similarities are approached, and whether client issues as mythic themes are regarded primarily as affective, rational, or imaginal (Downing, 1999). First, I will explore the nature of each theorist's bias by how each office is designed for sand play, and how each method explores the sand world made by the client.

I will next describe each therapy using three mythography indices:

- 1). Other as primitive vs. Other as contemporary
- 2). Structural approach vs Phenomenological approach
- 3). Monomythic vs. Pluralistic

I will then outline the typical therapeutic setting and process of each method. Finally, I will compare the methods of therapy using the above indices.

## **Other as Primitive vs. Other as Contemporary**

Each therapeutic culture has customs and rituals to behold the Other, the client. Classically human science has a polarized view of the Other: we are either the same or we are different. If difference is perceived, then a hierarchy is established where "we" are superior to "they". Even Jung held that primitives were guided by fantasy thinking compared to contemporary man who is guided by directed thinking (Segal, 1998). Kalfians follow the traditional psychotherapy model where the client is evaluated on a hierarchy of ego-development. The patient is seen as less psychologically sophisticated, as having a weak ego structure, and as being more vulnerable to the unconscious than the clinician. The therapist as the expert understands the patient's true problem and is capable of containing the unconscious material temporarily until the patient's ego is strong enough. Thus the patient is perceived as a primitive with inferior ego strength and subject to the unbridled and chaotic unconscious.

In a Kalfian sandplay room, the collection of miniatures and trays of sand are ideally veiled behind a divider which mirrors the hidden and unseen nature of the unconscious, and protects the analysand from premature exposure to unconscious material (Devine & Hyde, 1996). Some analysts do not suggest the use of sandplay materials to the analysand; the impetus has to come completely from the patient's psyche (N. Lamb, personal communication, Oct. 1994). Kalfians are adamant in protecting the patient's ego from the patient's psyche. At a training for professional therapists to become ISST (International Society for Sandplay Therapy) certified, the instructors had dry sand for participants to touch, but they did not bring any miniatures. They advised a sandplay therapist to enter into one's own individual sandplay process to experience sand and miniatures together. To have contact with objects in sand in this setting, they explained, would be "too provocative and psychically stimulating" (Devine & Hyde, 1996).

When playing in the sand during a sandplay session, the analysand stands in front of the sandtray, which is ideally set against the wall. The analyst sits at a distance behind the patient as to engender a blank screen and records the development of the scene and choice of objects. The patient or "player" is discouraged from looking at the tray from any other angle other than the front. The back contents of the tray are considered unconscious material (Ammann, 1991). The patient is not allowed access to photos taken by the analyst until the Review. After the patient has completed a scene, the analyst does not initiate any inquiry about the sand play. If the patient makes spontaneous statements, the analyst's comments are brief and reflective.

Contrary to their own Jungian heritage, sandplay therapists do not interact verbally with the patient's myth material. During the session, "the therapist 'enters' the sandtray with the patient and participates empathically in the act of creation, thus establishing a profound wordless rapport. "The silent capacity to enter into the creation of this world with the patient can, in itself, help repair the

feeling of isolation with which so many people are afflicted." (Weinrib, 1983, 30). Bradway and McChoard (1997, 9) cite psychoanalyst Robert Lang who ranks silence as "the primary form of intervention". The authors add "understanding and empathy are both essential, although they need not be voiced". Accordingly, Kalfian's discourage any verbal discourse for fear it will "encourage cerebral verbal discussion" (Weinrib, 1983, 13) and "[fix] the picture's interpretation intellectually" (Ammann, 1991, 3). Their efforts to minimize verbalizations attempt to steer away from traditional Freudian analytic interpretation of dreams.

Active Imagination, developed by Jung, is seen as inappropriate for sandplay until the Self is constellated and even then it may not be advised (Weinrib, 1983). Kalf and Bradway unequivocally insist that sandplay is not a tool for Active Imagination practice. Further, Kalfians admit "much of the personal may not be known until the review of slides with the sandplayer" (Bradway & McChoard, 1997, 47). Thus they neither gather personal information nor inquire about any intrinsic associations to a symbol. Here they follow Jung and silently decipher the tray to themselves using archetypal and cross-cultural interpretation of symbols.

The analysand is given the opportunity to review his or her process one to five years after the ending of therapy (Devine & Hyde, 1996). The review consists of viewing slides of their sandtrays in sequential order with shared remembrances and interpretation by the analyst. Some clinicians prefer a five to ten year delay for the viewing (Bradway & McChoard, 1997, 29). The time delay assures that "an ego now exists that is capable of integrating heretofore unconscious material" (Weinrib, 1983, 80).

In summary, Sandplay's mythography views the client as a primitive Other: the patient's ego is inferior to the therapist, for it is unable to safely tolerate content of its own mythic material. The patient's psyche is also a primitive Other for it is chaotic, unaware of its impact, and thus capable of harming the ego with unconscious material. The therapist's silence is a way to remain in a traditional scientific stance believing an active exchange could alter or negate healing.

De Domenico, like her contemporaries in other fields of study, chose to step out of a historical dichotomy and find a new method that honored the experience of the subject. Breaking away from the duality of intellectualizing or silence, she founded a third method, the hermeneutic process. Her method emphasizes understanding the client's unique experience of his or her inner world by actively engaging with the myth material as it appears in the sandtray world. This follows Jung's approach (1989, 192). Speaking about his work with unconscious material he writes:

...the material would have trapped me in its thicket... I took great care to understand every single image... that is what we usually neglect to do. We allow the image to rise up, and maybe wonder about them, but that is all... this stopping-short conjures up the negative effects of the unconscious.

In a ST-WP playroom the shelves of objects are clearly visible throughout the room. The client is encouraged to explore the shelves and trays of sand even during his/her first visit to the office. The therapist is free to invite the client to build in the sand. During building, the sandtray is placed between the builder and witness. The intentional use of the terms "builder" and "witness", as opposed to "patient" and "therapist", demonstrates the recognition of Other-as-peer. In fact, the builder is seen as the expert who teaches the witness. The witness takes notes regarding the development of the World, object choice and placement. The builder is encouraged to look at the World from all angles. It is believed that Psyche reveals several perspectives on an issue, and that different perspectives may be seen when looking at the World from different vantage points. The Psyche is seen as an ally who directs the entire play process for the ultimate benefit of the client's growth, development and healing. (De Domenico, 1989). There are two phases for processing: silent reflection and verbal association, followed by joint experiencing (De Domenico, 1989). Builders are given photos and notes of their sand Worlds, if they want them, and a review of the process is given any time during the treatment or later, depending on the client's preference. The review is an exchange of ideas and experiences by both therapist and client.

During a session, the therapist's emphasis is to awaken the builder to his or her experiences in the World. De Domenico (1988) outlines the Dimensions of Reality that are experienced during World building as:

- 1). Uniquely individual/idiosyncratic Realm
- 2). Familial and social/conventional Realm
- 3). Ancestral Realm
- 4). Archetypal Realm
- 5). Transpersonal/elemental soul (Nature) Realm
- 6). Universal/energetic (Spirit) Realm

These are experienced with seven vehicles of consciousness/awareness:

- 1). Physical
- 2). Emotional
- 3). Cognitive - individual and social
- 4). Temporal - memory and intuition
- 5). Voice - storyteller and sounding
- 6). Soul body
- 7). Spirit body

While many of these experiences can be verbally expressed, the skilled therapist knows how to deepen the builder's awareness and prevent an intellectualized interpretation. De Domenico (1988, v3. 44) believes: "It is a grave omission to exclude the richness of the human verbal tradition from the sand play for it creates another artificial split in the human psyche." Having builders interact with their Worlds teaches tolerance of psychophysiological experiences and

recognition of individual meaning and bonds them to their creations. The client may be engaged to express experiences in the world using amplification: physically moving as a being within the world, telling the tray's creation myth, having images dialogue with each other (as in Active Imagination) and many other creative ways (De Domenico, 1989).

In summary, ST-WP views the client as contemporary Other: the builder has the capacity to engage with their own mythic material and discover its meaning. The psyche is also a contemporary Other seen as an ally to the therapeutic process. The experiential focus places a value on the intrinsic meaning of the symbols and images. ST-WP allows the therapist to be involved in the client's discovery process.

### Structuralism vs. Phenomenological Approach

Through the lens of Structuralism, "mythology is static, we find the same mythological elements combined over and over again, but they are a closed system" (Levi-Strauss, 1979, 40). The goal is to create the order out of chaos by finding the patterns. To the structuralist, the emphasis is on the intellectual function of the subject rather than on his or her emotional process. A scientific distance is preferred to assure no influence is placed upon the subject or in the mythic material produced.

While all the aspects of the Structural approach do not apply to Kalffian sandplay, the primary belief that order begets meaning is the salient link. The therapist is expected to place an order on the chaos of the client's psychic material. Some Kalffians use a template grid system that delineates areas in the tray to aid in symbolic interpretation of the spatial phenomena. Some of the identified areas reveal the conscious, unconscious, instincts, personal mother relationship, devouring impulses, and school issues (Ammann, 1991). Another way to order trays is by looking at an entire sandplay sequence over time, as it is taught that a certain progression in a process will appear (Weinrib, 1983; Kalff 1980; Devine & Hyde, 1996).

ST-WP is a phenomenological method of sandplay. Clark Moustakas (1994) outlines the following as some of the tenets of phenomenological research: a focus on the wholeness of experience rather than segments; a search for meaning in the essence of experience rather than in measurements and explanations; first account descriptions; experience and behavior as integrated and inseparable in relation to the subject. Hermeneutics, fostered by the work of the Hungarian mythologist Karl Kerényi, expresses the practice of ST-WP. Moustakas (1994, 9) interprets hermeneutic science to be "the art of reading a text so that the intention and meaning behind appearances are fully understood". ST-WP demonstrates this in the Joint Experiencing Phase. A builder learns to translate experiences from the different realms into consensual language, a language that holds the true nature of the experience, so that he or she may communicate to the ego-self and others. Phenomenology and hermeneutics

provide a personal element in which the researcher's humanity becomes an integral part of the research process as opposed to the classic scientific approach. De Domenico (1988, v3. 47) explains: "Applying phenomenological methods, we actually become part of the World building process. We do not detach ourselves from the experience. We enter the experience".

Applying a phenomenological approach honors the subject and requires analytic flexibility. Here, the therapist activates the bodies of conscious experiencing but does not interpret them. De Domenico's approach of encouraging experimentation and playfulness can be seen as mirroring Kerenyi's idea that curiosity and wonder, rather than unequivocal data, brings breadth of thought. "It was not our aim," writes Kerenyi (1963, 155), "to resolve and iron out the logical contradictions inherent in mythological experiences... [or to] simplify, or garble it just to make it easier". Further he challenges us to consider "in what direction we must enlarge our thoughts in order to stand in fit relationship to the phenomenon"[his emphasis].

By using the specific skills of psycho experiential observation, the ST-WP therapist connects with the essential and intrinsic meaning of the World for the builder. The ST-WP therapist learns to navigate in the client's unique realm of the imagination with the attitude of wonder and curiosity. De Domenico is hermeneutical in her drive to extend herself and meet the client in their inner world. "We are concerned with the interconnectedness of all human experiences", writes De Domenico (1988, v3. 46) "We seek contexts from which the World building process emerges... only after the experience may they be translated into descriptions."

### Monomyth vs. Plurality

Some theorists contend there is a central theme for all humankind and that all myth can be contained in this one theme. James Frazer postulated the core theme in myth was death and rebirth. Joseph Campbell focused on the hero's journey. Each examined how their central theme was represented in various cultures and studied the multicultural permutations of these themes.

Sandplay therapy has a monomythic structure. Sandplay is for healing. Healing is defined as: manifestation of the Self (Kalff, 1980; Weinrib, 1983) where the "ego has relinquished its illusion of dominance" (Weinrib, 1983, 20). While a few analysts refer to transformation as a possible outcome of sandplay, comparatively little discussion or technique is shared (Ammann, 1991). It is clear by Kalffian's relative silence on other themes that healing is the function of sand play. They also portray a singular purpose: sandplay is only to be used in a one-on-one therapeutic setting. It concerns itself with one Self, not many.

This monomythic bias is manifest in the sandplay room. Only one size of tray is provided (57x72x7cm). This size "limits the player's imagination and thus acts as a regulating, protecting factor "(Kalff, 1980, 31). It is considered "a manageable

size...[to] avoid overflow of fantasies" (Ammann, 1991, 20). Only one kind of sand is made available, tan beach sand. Often the miniatures are all of the same proportion (N. Lamb, personal communication, Oct. 1994). These three factors limit the variety of sand pictures clients can create. The unidimensional supplies silently express the therapists' monomythic viewpoint. One wonders if the restriction of supplies covertly influences their findings.

Categorizing mythic thought as monomyth seems to be a minority view of mythologists. According to Yeats, "It is the charm of the mythic narrative that it cannot tell one thing without telling a hundred others" (Doty, 1986, 20). Doty reminds us that the plurality of myth exists in the original multiple dynamics and in its levels of being known - not just rationally but "sensual-aesthetic, moral and emotional as well"(24).

The plurality of myth is a main philosophy in ST-WP. De Domenico (1989) cites sixteen common basic experiences found in sandtray processes, and she invites therapists to identify additional ones. Her themes not only include the manifestation of the Self but experiences of transformation, meeting the destructive one, the experience of chaos, building community, and experiencing the ancestors. Her method lends itself for couples, families, groups, classrooms, communities and corporations.

The ST-WP office mirrors this stance by the availability of various tray sizes and colors of sand. De Domenico (1988) discourages the sole use of the traditional rectangular tray for it tends to promote polarities. Additional sandtrays available are square, round, water trays, muddy trays, and trays small enough to fit inside other trays. Sand colors may include tan, black, pumpkin, white, amethyst, and Hawaiian (very coarse with minute shells). The miniatures come in all different sizes. The variety of supplies provides expression for as full a range of mythic thought as a client may embody.

## Conclusion

Sandtray therapies are multidimensional modalities that are best evaluated in a multilevel fashion. By comparing Sandplay and ST-WP in relation to their theories of mythic thought, the differences become clear. Sandplay views the Other as primitive, uses a philosophically structuralist approach to organizing psychic material, and holds a monomythic viewpoint in regards to treatment goal, therapeutic population, and treatment supplies. ST-WP sees the Other as contemporary, uses a hermeneutic approach for the exploration of mythic thought, and encourages a position of plurality with treatment goals, therapeutic population, and treatment supplies.

The intent of this review and future ones should be to expand the approach analysis beyond the unidirectional label of being a "Jungian" or "Non-Jungian" theory. The existence of Post-Jungian thought and practice needs to be acknowledged in the field. A closer biographical exploration of these two

German clinicians might shed more light as to the historical and political influences effecting their methodologies. It is of interest that both Kalff and De Domenico are German-born women. Kalff was raised in pre World War II Germany and De Domenico was raised in post World War II Germany. Both left their native land, with Kalff moving to Switzerland, and De Domenico to the United States. Both based their theories of sandtray work on Lowenfeld's ideas but each developed dramatically different practices. One could surmise that their personal histories of being reared in Nazi and post-Nazi Germany are reflected in their beliefs concerning the psyche and the unconscious as seen in their differing treatment methods.

Therapists are encouraged to evaluate their beliefs about the psyche, mythic thought, the role of imagination in healing, and their definition of healing prior to pursuing professional training and providing sandtray experiences for clients. Then they may choose the practice that most closely follows those essential beliefs. This assures the presence of the greatest healing indicator in psychotherapy: authenticity of the therapist.

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