

Being an Effective Auxiliary

SOME REFLECTIONS ON DOUBLING AND DEPENDENCY IN PSYCHOTHERAPY

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ABSTRACT

As a term, J.L. Moreno's concept of 'auxiliary' captures the idea of entering into a psychotherapeutic relationship for the purpose of consciously assisting another person to develop spontaneity in a specific context. This paper focuses on a number of important elements in this regard: the importance of being an adequate auxiliary able to enact roles in response to specific social atom constellations; the importance of doubling within a role constellation to bring about social atom repair; the importance of allowing dependency in long term therapeutic relationships so that effective auxiliary functioning is maintained over time to promote the development of progressive embryonic roles. The concept of auxiliary is particularly helpful if we keep ourselves involved with the role constellations present in a person's inner world and the needs of the client within a specific context.

KEY WORDS

auxiliary, clinical psychodrama, dependency, doubling, relationship matrix, role constellation, social atom

Introduction

Over the last few years I have become interested in the clinical aspects of psychodrama, by which I mean appreciating the way that change happens for a client or group through my work as a psychotherapist. The purpose of this article is to explore the phenomenon of dependency in this relationship and to reflect on the psychodramatic method as it relates to this. It focuses on four significant areas in this regard.

1. Moreno's notion that a role develops in response to a specific relationship matrix, exists in this specific social context and tends to be re-enacted when similar role constellations are present.
2. The psychotherapist, as effective auxiliary, enacts roles in response to the client's specific social atom constellations with the intention of producing spontaneity.
3. The value of dependency when effective auxiliary functioning is maintained over time and the way this promotes the development of progressive embryonic roles.
4. Effective doubling as an auxiliary function within a role constellation.

The paper interweaves reflections on these four conceptual areas with two illustrative descriptions, one drawn from my family and the other from my work with a client in long term psychotherapy.

Being an Effective Auxiliary 'In Situ'

My daughter Kate is 6. One and a half years ago she began school and as we live just 200 meters from the school gate, she and I enjoyed walking together to her school. During these walks she enjoyed holding my hand and at her classroom door she liked to give me a kiss and a cuddle before bidding me farewell.

After a few months I suggested she might like to walk on her own to school. She became very excited at this prospect and a while later, I walked her to the front gate of our house and we said good-bye with a kiss and a cuddle. Kate walked off and about every twenty meters she turned around and waved excitedly, enjoying the fact that she was walking herself to school and sharing this enjoyment with me. Over the last year and a half, she has sometimes preferred to walk by herself and sometimes preferred that I walk with her. When we walk together, she has mostly stopped holding my hand and she just waves goodbye at the school door. Sometimes she complains that I walk too fast and at these times I walk just behind her shoulder and match her pace. At these moments she takes great delight in going faster and slower, appreciating the way that I stay with her. With this doubling she becomes experimental.

Before suggesting Kate might like to walk by herself to school, her mother Johanna and I had several conversations in which we addressed our anxiety about Kate walking along the road. We had to consider to what extent our fears were reality based and what chance there was that Kate might be taken from our street on her way to school. We decided that the street was safe enough. We did not share our anxiety with Kate although we did have some conversations with her about strangers.

I draw your attention to several aspects of this description. Notice the development of Kate's warm up to being self-reliant and the expansion of progressive roles that this warm up leads to over a period of a year and a half. This warm up develops within Kate and exists within the context of her relationship with me and Johanna. While it is unique to Kate and emerges from

Kate's spontaneity, it requires the relationship matrix for its existence and expansion. This process of development seems congruent with Moreno's (1946:153) concept of role: "The functioning form the individual assumes in the specific moment he reacts to a specific situation in which other persons or objects are involved." Lynette Clayton (1975:144) explicates, "A role is therefore a unit of behavior which is observable. It is specific to a situation and to the people or objects present in that situation. Its meaning as an act cannot be understood outside the context in which it takes place." Roles are interactive and require relationship for their development.

Kate's development of self-reliance in walking to school has taken a year and a half and she has had many experiences of doubling over this period. It is significant that this doubling occurred in consistent relationships. It seems to me, that for her, self-reliance is invigorating within the context of being in the wider social system while knowing support is available when she needs it. The relationship matrix is secure and thus supports exploration, new endeavours and new functioning. There is no sense within this relationship matrix that self-reliance is a necessary coping function to resolve issues of isolation or achievement anxiety.

The second area I want to bring to your attention is the quality of mutuality between Kate and myself. I have a close and attentive appreciation of Kate and her developing self-reliance and I take great delight in playing with her and being responsive to her experience of walking with me. She also delights in my relationship with her. I am aware that as she becomes more self-reliant she initiates less closeness. Her developing self-reliance informs her whole experience of living, so that later it is evident that hand holding was, to some extent, a reassuring thing to do and kissing and cuddling at the school door a necessary process in her leave taking. As her lived experience changes, these rituals are no longer needed in the same way and so she modifies them. I can see her as Amelia Earhart, an enlivened expeditionary. Amelia flew above the earth with the security of knowing that she could return. However, I doubt that Kate would maintain a reciprocal relationship with me if I was to introduce my anxiety about the safety of the road into my relationship with her. The capacity for role reversal will develop later, when she does not need me as a figure of security and certainty in quite the same way. Thus for me, an important aspect of my total warm up to the situation remains in my awareness and is not communicated to Kate, so that I am an effective auxiliary to her developing self-reliance.

Dependency in Psychotherapy and Recognising the Enactment of Auxiliary Roles

A therapeutic relationship can potentially provide the relational context that was missing in the original social atom. For clients where there has not been adequate parental attunement and doubling, many roles remain embryonic or underdeveloped or there is a tendency towards an over-reliance on coping roles.

Being in an effective auxiliary relationship allows a person to experience themselves enacting progressive roles rather than the conserved coping roles they rely upon when they are isolated or needing to be self-protective. For some people, such as the patient with the developmental needs I describe below, doubling and other effective auxiliary work may be needed over quite a long period of time in order for lasting change to occur.

I introduce you to Jane¹ in order to reflect on and illustrate individual psychotherapy as a series of opportunities for the development of effective auxiliary relationships over time. I present three vignettes from the first three years of our work together, when Jane comes to weekly therapy and also attends three day experiential psychodrama workshops every four months.

Jane is an upper middle manager in a large organisation. She is currently 61. She self-refers to therapy and initially presents issues to do with her workplace. Jane is known by her staff, behind her back, as the 'ice queen'. At the time of presenting for therapy, she is heading and organising a panel. She is experiencing overwhelming terror in the face of the public nature of her panel position, which requires more visibility than she can tolerate. This terror causes her to dissociate, to freeze and to lose her ability to speak.

In the first six months of therapy Jane is unable to talk about herself. Often she sits quietly with her head down, struggling silently with her experience. In the therapy room she appears very fragile. She describes going to therapy once before and running away after seven sessions. She seems determined to do something different this time but she is also very scared. When she does begin to talk about herself, with me doubling her, she stops abruptly and giggles appealingly. Gradually an effective auxiliary relationship develops. As she comes to trust that I will allow her to speak, Jane begins to experience her feelings of vulnerability and sadness and she spends long periods sobbing. Slowly she begins to speak of her father's violence towards her. Haunted by images of violence, she describes waking up one morning at age seven to find a hole in the wall, and her mother's cherished sewing machine and means of work broken and in pieces against the wall. This is not spoken about in her family.

It becomes clear that Jane experiences work as a dangerous place. She persistently warms up as if almost every person she meets is a violent and dangerous ogre. This warm up makes sense in relation to a constellation of roles in her early social atom and I find myself appreciating some specific elements of it. I begin to consider that she is experiencing her violent family system in her work place. This leads her to protect herself by enacting the coping roles she has developed in relation to these specific early social atom experiences which included violence, the threat of violence and an absence of adequate parental relationships or doubling. Jane comes to therapy at a point in time when she is experiencing these coping role constellations as no longer sufficient to sustain her functioning.

At the beginning stages of therapy, Jane regularly expresses a fear of dependency. I understand her to mean that she is frightened of losing her sense of identity and perhaps that if she allows herself to depend on me I will

dominate her, hurt her or prove myself unreliable. Yet as she begins to talk and feel, she experiences great relief. It is as though something that has been missing is now present. Many progressive embryonic roles begin to emerge and develop as she experiences this relationship with an effective auxiliary. For example, she begins to trust herself to speak. This new warm up is possible because she has placed herself within the context of an ongoing and reliable therapeutic relationship in which the original social atom experiences of violence are related to by us, rather than being enacted between us. I think of this as an adequate role relationship. Jane can now allow herself to experience dependency as this is inherent in the role relationship that is being enacted between us. That she is also frightened of this dependency is congruent with her early role system in which there was no one upon whom she could safely depend. The relationship dyad contains the complexity of past experience and present experience. Both are present in the therapy room simultaneously. Awareness of this complexity, accurate doubling and Jane's experience of being visible, enable change. These are some features of an effective auxiliary relationship that encompasses the need for therapeutic dependency.

During the second year of therapy, Jane begins to understand that her mother abandoned her to her violent father. It is during this period that she makes sense of a childhood image, mentioned frequently in therapy and retold like a dream, that has haunted her throughout her life. In this image she is wandering aimlessly and alone in the hallway, age eight. Strong and excruciating feelings of isolation now fill this image.

Now that a sufficiently reliable doubling relationship is established between us, Jane begins to experience the feelings associated with this image. This context of an ongoing, regular therapeutic relationship provides the means for her to experience her feelings of isolation. As a result, the roles that will enable her to form genuinely mutual relationships with others begin to develop. As we talk about her isolation and she begins to experience its depths, it becomes apparent to us that hiding her experience from others and denying it to herself is a self-protective response that makes sense in relation to her early home environment. There is a resulting experience of despair that fills her daily life. It has not occurred to Jane that the despair is specifically related to emotional isolation until we experience it together, in relation to her image of being alone in the hallway. I use the phrase 'we experience' here because I feel Jane's isolation when I am doubling her and therefore 'experience' alongside her. In this instance, being an effective auxiliary means being willing to 'be with'. It is significant that these feelings do not take over my whole experience. I am neither overwhelmed by them nor do I avoid them. Jane's dependency on me is enabling her to become aware of her earlier lack of dependable doubles.

In the third year of therapy, Jane frequently enacts the role of the 'ice queen'. Initially this results in a symmetrical relationship pattern in which Jane demands I accommodate her, for example by finishing the sessions at the time she considers the end, and I refuse. Jane then rejects my refusal but does not reject me. She experiences a fair amount of rage during these interactions. It is a new thing for Jane to fight like this and for a long period of time she expects me to retaliate. There is a dance between us in which she stands up for herself and I work to value her for doing so, while also holding to my sense of things. Perhaps she is testing our relationship. Can she go against me and will I retaliate? During one of these conflicts Jane experiences the pain of clashing with me. Until this moment she has been a frightening foe. Now, as I double her, she becomes more aware of our interaction, noticing that it relates to many specific early social atom experiences when she needed to make herself invisible to avoid her father's anger. Jane recognises that she hates being aggressive because it reminds her of her father's behaviour, which she describes as ugly. At the same time, although still fearful that I will retaliate, she loves being visible and expressing herself. A new social atom experience is being constellated as Jane notices how good it is to be able to fight. Gradually she stops feeling so frightened.

This period of the therapy is about Jane experiencing and strengthening herself as an independent and interdependent person. I see this as an individuation process, which could be described as progressive role functioning to express one's individuality while at the same time maintaining mutuality in relationships. Jane is working to stay in relationship with me while expressing difference and rage. She is developing progressive roles as a result of the constancy of my involvement with her, for I neither pull away nor become aggressive in response to her.

It assists both of us that this work is happening within the context of a consistent long term relationship which we have specifically created together. We have a history in which a strong mutually positive tele has developed. Jane is coming to trust that whatever she is experiencing at the end of each session, I will keep working to be with her and will not move away. We have a relationship that is not further complicated by dual roles and this allows the process to keep unfolding between sessions. A reflective process develops in which dreams and other symbolic activity, indicative of new development, occur regularly. Jane and I remain intently involved with each other and the tension between us, as it develops and changes.

These three illustrations describe aspects of a therapeutic process intended to bring about individuation through meeting Jane's need to depend on a reliable person. Jane develops the ability to express her difference crisply while remaining self-reflective and focused on her purpose. This development makes a considerable difference to her work place functioning, where she is increasingly able to enact progressive roles in her leadership position. In her family, she is able to double her father as her mother dies. This makes a tremendous positive difference to the family system, as her sister and brother are unable to remain conflict free.

Psychotherapy, the Social System and Leadership

Through the psychotherapeutic process described here, Jane developed much greater personal authority and leadership capacity. In her early years she had not experienced significant others as dependable and nurturing and thus developed ways of surviving based on the reality that she was alone. She developed an inability to trust others, an inner sense of not belonging with others and in turn not being responsible for the difficulties her functioning caused within the broader social group. She was unable to feel confident or vital in her leadership position. These could be described as social failures of trust and belonging.

As I have illustrated, the therapeutic relationship needs to include dependency when it is treating these failures of trust and belonging. Maintaining an effective auxiliary relationship while these dependencies are present will allow the person to develop the personal authority that has lain dormant in them, unable to develop because the social system lacked the necessary relationship matrix. Jane developed healthy leadership functioning through this therapeutic process. Leadership is a natural social function based upon personal authority and the capacity to maintain mutuality in relationships. It is the felt recognition that one belongs to the social group coupled with the capacity to maintain mutuality with others while being oneself.

Some Concluding Remarks

Adequate auxiliary relationships need to be developed and maintained over time if individual and group psychotherapy are to produce progressive change. This paper has presented the application of this concept in two different contexts. The first situation was 'in situ' in daily family life, where I have demonstrated that dependence is a normal phenomenon in human development and that accepting this, and being an effective auxiliary at this stage of development, enables the natural emergence of progressive roles. The second situation was in the therapy room where adequate auxiliary roles were enacted in response to specific social atom constellations, enabling substantial social atom repair over time.

To be an effective auxiliary we need to be aware of the person's inner world as well as their needs within their specific context. It is also particularly necessary that we keep ourselves aware of and involved with the role constellations present in each person's social atom. This requires significant clinical capacity.

END NOTES

1. In this example the name has been changed to preserve anonymity. 'Jane' has agreed to have these words published. She has read the transcript, provided feedback about its accuracy from her point of view and reviewed the subsequent changes.

REFERENCES

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