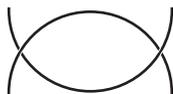


ANZPA JOURNAL #18 December 2009



ANZPA JOURNAL #18 December 2009

ANZPA Executive

President: Peter Howie

Vice President and Membership Secretary: Sara Crane

Secretary: Charmaine McVea

Treasurer: Ali Begg

Committee: Margie Abbott, Rollo Browne, Tony Densley, Marilyn Sutcliffe

ANZPA Journal Editorial Team

Editor: Bona Anna

Art Director: Alex Kennedy

Editorial Assistants: Mike Cormack, Bev Hosking, Helen Kearins, Helen Phelan,
Elizabeth Synnot

Technical Support: Walter Logeman

Design: Katy Yakmis

Cover: Painting by Annette Fisher '*Sacred Waters of the Murrumbidgee*' 2007

Reproduced with permission of the artist

Printing: Macquarie University Lighthouse Press, New South Wales, Australia

This journal is printed on Envirocare 100% recycled stock.

Correspondence and submissions for the ANZPA Journal should be addressed to the editor:

Bona Anna

Email: anzpaeditor@gmail.com

Work: +61 2 98501819

Mobile: +61 0 451046928

Address: Centre for Research on Social Inclusion, C5C384 Macquarie
University, New South Wales 2109, Australia

The ANZPA Journal is published by the Australian and New Zealand Psychodrama Association (ANZPA).

ANZPA is an organisation of people trained and certificated in Dr. J.L. Moreno's psychodrama theory and methods, their applications and developments, as a Psychodramatist, Sociodramatist, Sociometrist, Role Trainer or Trainer, Educator, Practitioner (TEP).

The purposes of ANZPA include the establishment and promotion of the psychodrama method, the setting and maintenance of standards, and the professional association of its members. Members associate within geographical regions, through this journal and electronic newsletter Socio, and at annual conferences held in Aotearoa-New Zealand and Australia.

The ANZPA Journal has been established to assist in the fulfilment of the purposes of ANZPA through the dissemination of high quality writing focused on psychodrama theory and methods, and their application by practitioners in Australia and Aotearoa-New Zealand.

For more information visit the ANZPA website: <http://www.anzpa.org>

Copyright © 2009
Australian and New Zealand Psychodrama Association Inc. (ANZPA Inc.)
All Rights Reserved

ISSN 1836-1196 (Print)
ISSN 1836-120X (Online)

Contents

Introduction	7
Reflections on Doubling	
<i>Max Clayton</i>	10
Maria Goes to Hospital	
<i>AN ORIGINAL USE OF THE DOUBLE</i>	
<i>Annette Fisher</i>	24
Please Forget That You Know What 'Role' Means ...	
<i>THE PRAGMATICS OF HUMAN FUNCTIONING</i>	
<i>Don Reekie</i>	33
The Imago Affair	
<i>JACOB MORENO'S INTERPERSONAL THERAPY AND HARVILLE HENDRIX'S RELATIONSHIP THERAPY</i>	
<i>Walter Logeman</i>	43
Psychotherapist in Search of a Psychodrama Stage	
<i>PROJECTION SPACES AS ACTION STAGES</i>	
<i>Neil Hucker</i>	56

A Vital and Relevant Life

A MORENIAN APPROACH IN PALLIATIVE CARE

Vivienne Pender 66

Self at Zero

*BRINGING SPONTANEITY TO THE TREATMENT OF BORDERLINE
PERSONALITY DISORDER*

Kate Cooke 81

Looking Through the Lenses

THE FOUR ASPECTS OF PSYCHODRAMA

Philippa van Kuilenburg 90

Book Reviews 98

Film Review 103

Guidelines for ANZPA Journal Contributors 106

Introduction

This 2009 edition of the ANZPA Journal contains eight articles and three reviews.

The first article by Max Clayton focuses on one of psychodrama's central concepts, doubling. The author sets out to present a clear, interesting and illustrative portrayal, noting that to double is to participate in an essential foundation of human growth and development. He argues that a well functioning double has a profound effect on another person's self-esteem and in addition gains a greater experience of the wonder and value of human life.

In the following article, 'Maria Goes to Hospital: An Original Use of the Double', Annette Fisher provides a unique example of doubling. This paper is focused on the importance of doubling as a therapeutic intervention in individual psychotherapy. The author summarises Moreno's four stages of development, the universal matrix of identity, doubling, mirroring and role reversal, and presents a case study where she functioned as a double in real life clinical practice to effect substantial development over time.

Don Reekie invites us to recall, review and relearn, to examine our everyday experiences, in essence to develop amnesia regarding "the baggage the word 'role' is lumbered with in the 21st century". In his view, role refers to social prescriptions and job expectations that are supposed to become to us second nature, which means that role, as a functioning form, is not widely understood as our first or true nature. To rectify this situation, he demonstrates how Jacob Moreno's concepts and methods can guide us to make sense of our ordinary everyday functioning, to consider every other person in their unique functioning form, and to assist us in the production of psychodrama.

In 'The Imago Affair', Walter Logeman reaches some general conclusions regarding the boundaries between psychodrama and other modalities. He explores the common themes shared by J.L. Moreno's Psychodrama Interpersonal Therapy (encounter) and Harville Hendrix's Imago Relationship Therapy (dialogue), and in the process raises the question of a professional's identity and identification with modalities. A stimulating discussion is provided regarding the meaning and origin of encounter and dialogue, and ways to foster both are illustrated. Of particular interest is the way that the author combines psychodrama and Imago modalities in a unique blend. When working with Imago couples it is their relationship that is the protagonist on the psychodrama stage.

Neil Hucker is a psychotherapist in search of a psychodrama stage. He elaborates six mental projection spaces of the mind that he views as psychodramatic action stages when working in individual psychotherapy. The writer describes how, using the spaces and stages concepts, the content of the imagination can be projected, differentially

concretised and modifications of the psychodrama method applied. The accompanying illustration from a psychotherapy session demonstrates how the mental projection spaces are worked with *as if* the therapy was being enacted psychodramatically on a psychodrama stage.

Vivienne Pender considers a Morenian approach in palliative care. She describes her unique way of working with individuals and families when a person is dying in a hospice environment. Several examples drawn from her experience are described within a framework encompassing Moreno's role theory and continua developed by three Swedish researchers — affinity-isolation, power-powerlessness and continuity-disruption.

In 'Self at Zero' Kate Cooke's focus is on another original application, this time the use of Moreno's theories in the treatment of Borderline Personality Disorder (BPD). Noting that the treatment of this debilitating disorder of the self has to date been largely confined to cognitive and verbal therapies, she describes how she uses non-verbal kinaesthetic activities, such as circus arts and action methods, in a specialist treatment centre. The author describes the expansive effect of this new approach on clients at the centre with reference to the development of the false self, the true self, the self at zero, and the key element of spontaneity that provides the impetus for growth.

'Looking Through the Lenses: The Four Aspects of Psychodrama' by Philippa van Kuilenburg explores similar territory to that of Peter Howie in his article 'Seeing Double', published in last year's journal. This paper focuses on the different lenses used by Morenian practitioners in various endeavours. The author makes the case that the theories and techniques used by psychodramatists, sociodramatists, role trainers and sociometrists are essentially the same, in that all aim to provide an experience that facilitates an effective learning or therapeutic outcome for clients. The difference lies in the focus, or lens, through which the practitioner looks.

This 18th edition of the journal includes two book reviews, Peter Kellermann's *Sociodrama and Collective Trauma* reviewed by Jenny Hutt, and *From One-To-One Psychodrama to Large Group Socio-Psychodrama: More Writings from the Arena of Brazilian Psychodrama* edited and translated by Zoltán (Zoli) Figusch, reviewed by Judith McDonald. Finally, Neil Hucker reviews what he claims to be 'a most psychodramatic film', *Lars and the Real Girl*.

These papers and reviews are intended to inform, stimulate and inspire, and carry forward the work of Jacob Levi Moreno.

Bona Anna
Editor
December 2009

MOTTO

*More important than science is its result,
One answer provokes a hundred questions.*

*More important than poetry is its result,
one poem invokes a hundred heroic acts.*

*More important than recognition is its result,
the result is pain and guilt.*

*More important than procreation is the child.
More important than evolution of creation is the
evolution of the creator.*

*In the place of the imperative steps the imperator.
In the place of the creative steps the creator.
A meeting of two: eye to eye, face to face.
And when you are near I will tear your eyes out
and place them instead of mine,
and you will tear my eyes out
and will place them instead of yours,
then I will look at you with your eyes
and you will look at me with mine.*

*Thus even the common thing serves the silence and
our meeting remains the chainless goal:
The undetermined place, at an undetermined time,
the undetermined word to the undetermined man.*

Jacob Levi Moreno, *Psychodrama First Volume*,
1946. Originally translated by Moreno in
1914 from p3 of *Einladung zu einer Begegnung*
(*Invitation to an Encounter*), Vienna.

Reflections on Doubling

MAX CLAYTON

ABSTRACT

This article is an effort to present a clear, detailed and interesting portrayal of doubling through highlighting what it is, and through presenting and discussing efforts to function as a double with another person. A well functioning double has a profound effect on another person's level of self-esteem and in addition gains a greater experience of the wonder and value of human life.

KEY WORDS

double, doubling, protagonist, psychodrama, psychodramatist

As I write this small piece about the nature of doubling I am recalling many experiences of being doubled myself and of functioning as a double for many people. I am very clear that the experience of being doubled has benefited me very much and that this has continued on. I imagine that I will continue to be strengthened by the actions of a double for the rest of my life. I am also delighted to have been present in situations where doubling has promoted a sense of life and of self-esteem in folk of different ages and circumstances.

I never want doubling to become something that is done by numbers. I do not want doubling to be regarded simply as a technique. I want it to be something that is expressed by people who are motivated by love. I want doubles to respect the people who come near to them. I love to be with a double who obviously has a vision of human beings becoming more and more creative in their daily lives. I want these few reflections and images to add something to our vision of what doubling is and its place in our work as psychodramatists. I am hopeful that you will be inspired to become even larger in your perception of others and larger in your capacity to be with them.

I begin with a little tale. After that I am addressing you as a group leader who is creating a psychodrama session. I suggest that which might be said and done to introduce doubling into a group, make a portrayal of a double who tunes in with a protagonist,

and discuss the effect of this on the person they are with. I then present the work that frequently needs to be done to restore broken connections between a protagonist and their double.

A Little Tale Unveils the Nature of Doubling

A cold wind is blowing across snow covered mountains in Nepal. It is a strong wind and the air is very cold. A man has been out in the snow for several days. He is so cold. He arrives at the place where a Buddhist monk lives. He thankfully knocks on the door and the monk lets him in. There is no fire inside and the man is still very cold. The monk asks if there is anything he would like. The man holds out his freezing hands and says he would dearly love the monk to light a fire. The monk indicates with his hands that there is no wood in his dwelling. Then he goes into another room and when he returns he is carrying a beautifully carved wooden statue of the Buddha. He puts some paper under the wooden carving and lights it and the man feels the warmth from the fire flowing into his frozen limbs.

Here is a simple little tale of a monk who puts his own interests on one side. Here he is tuning in with a visitor. It is a simple tale, and yet it portrays a set of actions that are an essential foundation for human growth and development. The monk lives out the essence of doubling, conveying its meaning more effectively than a mountain of definitions and explanations. Dwelling on the images presented so that they continue to play upon our soul and mind may very well result in new experience, awaken the imagination, and stir up interest in taking fresh action in response to a person in dire need.

Creating an Immediate Impression of What Doubling Is

In the course of directing a psychodrama group a psychodramatist is in the business of awakening experience, stimulating imagination and encouraging further reflection. In the beginning phase of a session, the psychodramatist works to warm up the members of the group so that they are all consciously involved. What brings this about? An important part of this work is to briefly and clearly create in each person some understanding and appreciation of the psychodrama method. There is much to be gained through doing this not only in the beginning phase, but also from time to time throughout an entire session. This piece of writing is focussed on just one aspect of the psychodrama method, namely doubling.

In my view there is little to be gained by pedestrian explanations of how psychodrama works and of the different techniques. My interest lies in suggesting a means by which group members and auxiliaries will quickly gain an impression of what doubling is. I have found that this is best activated at the point where a group member is called upon to be a double in an immediate situation. So what follows is a very simple and brief statement about doubling.

Factors to Consider in Making a Crisp Statement of What Doubling Is

The intention of this section is to suggest what is involved in beginning the task of expressing with words what doubling is. An important part of this task is the establishment of criteria for the development of usable statements.

Criteria for a Statement about Doubling

A primary aim of a psychodrama director is to inspire, to lift the human spirit, and to this end to fill their words and acts with a sense of life and movement. Thus a central criterion is that the statement about doubling conveys an image that is inspiring. A second criterion is that it warms up an aspiring double to the required actions, attitudes and values of a double. A third criterion is that it is made brief enough to be useable in educating a new group about the nature of doubling. The best statements are brief and include language that is evocative enough to awaken and sustain the interest of group members, or a protagonist who has just been asked to consider choosing a double.

A Practitioner Works to Convey the Spirit of Doubling

In the course of psychodrama practice lasting ten, twenty, thirty or forty years practitioners have most likely experimented with many phrases and gestures in an effort to convey the spirit of doubling quickly and easily. On some occasions psychodrama practitioners are at a loss for words. On other occasions group members may have been belittling of them and the value of the psychodramatic work, and practitioners are called on to describe or define doubling while being affected by the threatening mood of the group. Suddenly the practitioner is on the back foot. Their body tightens. Their breathing is shallow. Their face is red. Unsureness is apparent in their voice. The statement about doubling is unclear.

The Practitioner Succeeds

There have been countless occasions when practitioners have been defeated in their quest for crispness and clarity, have wanted to disappear through the floor and considered giving up the practice of psychodrama on the spot. Yet, the reality is that on most occasions they have expressed something about doubling and this something has become a seed that grows and enlivens the group warm up.

Imagine the practitioner going home at the end of the psychodrama group. There is the time of warming down, going to bed, and of sleep. There is the waking up in the morning. Then, in the course of their early morning reverie they can clearly see themselves working away in the group. They go over their actions with a fine tooth comb. They see themselves fumbling. They hear their tone of voice and identify the partial statement they have made. Then as they continue to lie in bed they imagine themselves saying other things. They visualise their body moving in another way and visualise themselves doubling in an OK way. Later on in the day they discuss doubling with a colleague. Later again they read a description of a drama directed by Moreno and look up a couple of references about doubling.

The next time they direct a group and are challenged to define doubling they are relaxed, and while making a response they sustain a visual image of someone doubling well. They are inspired by this image. During the presentation of doubling their functioning is congruent. The group warms up to doubling much more than on the previous occasion.

Persistently Generating New Words

The practitioner who keeps experimenting with different words and phrases nurtures a spirit of surprise and newness, and it is a very good thing to keep enlarging this ability. Being experimental involves a reliance on one's own resources, and this calls for strength. By contrast an external orientation is often associated with a concern to be correct, the development of a stereotyped language and a loss of spontaneity. At all costs a practitioner must get out of such a rut.

A Brief Statement of What Doubling Is

What is the essence of doubling? As I see it, doubling is becoming another person through entering their life. It is a process in which one person identifies with another person's view of the universe, with their actions, and with their emotions and feelings. In that process, the double develops a two-way interaction with the other person that is in tune with the direction of the other person's being. Thus doubling is expressive of a relationship with every aspect of another person, in contrast to one that involves a warm up to only one aspect or one subsystem or cluster of roles.

What the Double Is and What the Double Does

What language will briefly convey the essence of doubling? In my view the central idea of what a double is can be made very precise and clear by saying "the double *is* another person". Such a simple statement conveys a more precise image than "the double represents another person". The conception that the double is the person they are doubling implies that a double divests themselves of their own way of looking at things. There is a letting go of the constructs as they are applied to their own personal life at that particular moment.

The letting go of one's own personal constructs is not so simple. In fact it can be profoundly disturbing. A double tunes in with a unique individual and the more they succeed in tuning in, the more they discover the myriad of small differences between the two of them. No matter how many personal memories of similar experiences are awakened, there are still differences. The double often discovers that the person they are doubling lives in accordance with similar values and attitudes and has been involved in life experiences that appear the same as their own. The double says to themselves "I have lived through exactly the same thing". Yet the truth is, there are always countless differences. There are subtle differences in the style of thinking. Frequently the person is living through a slightly different stage of life.

In addition to the many differences between the experiences of the two people, there are the many aspects of the life of the person being doubled that are outside of the double's life experience and therefore unknown to them. What will the double do at this point? Will the double remain blind to the fact that the person being doubled may have worked through some of the difficulties and blocks that are still plaguing the double and other members of the group, and then act as if these difficulties are unresolved? Or will the double give themselves enough time and room to continue on in their endeavour to tune in with the total personality of this person? To do this is a very valuable thing and a great achievement.

A Double Begins to Tune In with a Protagonist: A Typical Example

Here is an example of a double establishing a working relationship with a protagonist. A member of a group is presenting her concern. In the course of previous group sessions she has typically warmed up to fear at the point where she is about to start something. Then after that initial experience of fear she starts to do a task and functions with strength and confidence.

During her enactment of a situation she selects a double. The double stands beside her and slightly behind, takes the same body position and approximates her movements. The following verbal interaction develops between her as the protagonist, and her double.

Protagonist Yeah. I know when I do start I feel better. It's just the prospect of starting.

Double Yeah, it's just the prospect that scares me.

Protagonist Yeah, that's right. Once you're really into it you'll just get over that feeling. You'll be good.

Double Yeah, the prospect of starting gets to me but after I start I am OK. I can see how things develop and I am good.

Protagonist I guess that you're going to get there at the end. Well then, maybe you shouldn't feel that way in the first place.

The Experience of the Protagonist during the Doubling

- Accepting the double. In this brief interaction the protagonist feels accepting of the double. She includes the double in her world. She responds to the double as if the double is herself and not another person. As she does this her body relaxes. As far as the protagonist is concerned everything that is presently happening is part of her world. In other words, for her there is now one world. There is not her world and another foreign world somewhere else. There is something coming into being that brings about an experience of connectedness, a sense of being at one with the rest of the universe. It is this relationship system that has the same characteristics as the universal matrix of identity described by Moreno in his book *Psychodrama Volume One*, in connection with the development of the infant.

- Extending experience to include conflict. There is then a further movement toward extending the exploration of the protagonist's own consciously felt experience. She warms up to her experience of dynamic forces in conflict. She starts to become an imperialistic commander who has the power to banish fear with just a word of command. Thus we see that the process of doubling can begin with a happy experience of mutual cooperation and then rapidly become a conflicted relationship that is a continuation of an earlier, unresolved conflict.
- Awakening of memories. When the double remains in tune and develops mutual interaction, the experience of being doubled becomes a profound experience. It awakens memories. These memories include oceanic experiences of oneness with the universe, the bliss of being totally accepted, as well as experiences of incompleteness, disappointment and partial or restrictive solutions.

Exploring the Functioning of the Double

- Gives value. We have been focussing on the protagonist. Now we turn to the work of the double. The double has felt accepting of the protagonist and has assisted her to accept herself. She has functioned sensitively. She has acted in a subtle way and conveyed this through tuning into the protagonist's world, valuing her ideas instead of imposing her own and by approaching the protagonist with subjectivity. All of these things are adequate and in that sense spontaneous. No doubt the spontaneity of the double is calling forth the spontaneity of the protagonist.
- Fosters self-acceptance. The double is fostering self-acceptance and in that sense is functioning like a mother accepting her baby or small child. There is much value in comparing the functioning of the double with the functioning of a mother. Without a mother of some kind we would not have survived. The mother has an unsurpassed capacity to tune in with a new-born baby. The experiences of the baby are transmitted and known to the mother. And as time passes the mother becomes increasingly acquainted with the infant's moods, needs and unique expressions. The continuation of such an extraordinary pattern of mutual interaction over a long time brings into being a glowing sense of life and an experience of self-acceptance that becomes a foundation for succeeding phases of life. Thus, when in a present day drama a double tunes into the world of a protagonist, memories and experience of the relationship with the protagonist's first double and with other significant doubles knock on the door of consciousness.

Doubling that Interferes with a Protagonist

A Double Inappropriately Imposes Their Point of View

There are numerous examples of a double persistently imposing an idea. Here is one such instance. During the drama the double persists in saying "I am angry". In response

the protagonist is saying “I’ve already worked that out” and “I’ve done that, I’ve been angry and it doesn’t do any good”.

A Protagonist Suffers Through Accepting Inaccurate Doubling

Suffering is sometimes brought on through inaccurate doubling, as seen in the following example. A protagonist has passively gone along with inaccurate interpretations by the double. Afterwards he realises that he has entered into areas of his life that did not concern him at that time, and that the double is working on self-initiated areas with which they themselves are pre-occupied. The protagonist is upset. He is irritated at having spent his time this way instead of doing the work he had actually wanted to do.

The Double Misinterprets the Protagonist’s Area of Concern

A protagonist has been acting in a drama. She feels unattractive. She constantly refers to her body image. She stands with her back to the audience. She says she does not want people to see her. The following interaction with the double then occurs.

Double You make me feel there is something wrong.

Protagonist I am feeling embarrassed. I feel grotesque.

Double You are grotesque.

Protagonist I don’t talk to myself like that. I just feel like crying. I am scared of talking about myself like this in front of everyone. It’s as if it’s making it worse. I’m frozen.

Here and throughout most of the drama the protagonist has been experiencing shame. She is focussed on the attitude of other people towards her. She feels ashamed. She is not feeling wrong. At the point where the double refers to something being wrong, the actions of the protagonist are demonstrating her warm up to embarrassment. However, the double’s incorrect statement stimulates her to verbally express what her experience actually is. The incorrect doubling has in fact warmed up the protagonist to her experience even more and has assisted the protagonist. At the same time the double has assisted the director in their investigation of the protagonist’s social system, or, if you like, the protagonist’s social and cultural atom.

However, the protagonist and double end up being isolated from one another. The double is not able to tune into the protagonist’s experience of isolation and assist her to explore it, so that her warm up enlarges and new perceptions develop. The double was herself preoccupied with the business of getting things right in her life and, in particular, being correct in her functioning as a double.

The Opening Up of the Self through Doubling

A basic notion of a psychodrama session is that a dramatic portrayal of events is created that is as close as possible to life itself. In life itself there are the words, actions, emotions and feelings which can be seen and heard and smelled through the senses. Then there is

another realm in which there are all kinds of unspoken thoughts and countless numbers of deeds that are never enacted in the everyday drama of our lives. In the same way, in the course of a psychodrama session, there are those things that are expressed in an obvious way and also many unspoken thoughts and deeds left incomplete at different moments during a drama. In the case of the psychodramatic enactment, emphasis is placed on creating an outward and obvious portrayal of unspoken thoughts and of deeds that have previously been left in the realm of contemplation. When this is actualised on the stage the protagonist's drama becomes larger than life. The expression is larger than life and yet is still the drama of that protagonist. The unexpressed thoughts, feelings and actions that lie above and beyond what has been expressed in life itself are technically known as surplus reality. Every one of the psychodramatic techniques has been devised with a view to bringing about an expression of the surplus reality level on the stage.

To the protagonist their drama is more true to life than that which they have previously experienced. At another time of life they were cowering in a chair, conflicted, frozen and tongue-tied in the presence of threatening and superior forces. Now, they have warmed up to this same scene, and are living through the same script. Their ideas about life, physical responses and emotions are the same as in a situation that occurred at another time and place. But there is a difference. This time the protagonist is living through the experience in the context of a group. Through participation in a group there has come about a forging of new ties that are unlike the old ones. There are auxiliaries. There is a director. And there is a method that assists a step by step unfolding of events and which works through a judicious expression of humane principles, through artistry and through application of a range of psychodramatic techniques.

Doubling is one of those techniques. When adequately done, doubling assists a protagonist to open up to the breadth of their experience. It stimulates a renewal of consciousness of the many abilities that have been developing over the whole course of life. A person's abilities may be forgotten or left sitting in the background. During the enactment of an event, doubling will often result in an easy recovery of resources. A protagonist who is being doubled may quite often think to themselves "Of course, I should have known that all along", or the following interaction with the double may take place.

An Example of Doubling Resulting in an Opening Up of the Self

- Double This situation is not so bad, is it? I think we might have dealt with other situations like this one.
- Protagonist Why didn't I think of that?
- Double That's right. I wonder why I didn't think of it.
- Protagonist Well, I didn't think of it, that's for sure. I guess I can't think of everything all the time. Most of the time I do come up with ideas about what I can do next.
- Double Sometimes I am focussed somewhere else and I just don't warm up to the whole situation.
- Protagonist Yes, that's exactly what happens. I become anxious and narrowed

down and I only see part of the picture. I see the difficulties and feel defeated.

Double I am able to deal with complex situations even when they are new to me, but when I first encounter the difficulties I want the task to be simple and easy.

Protagonist That's right. Once I realise the problem isn't going away and that I have to enter right into the situation, I start to feel a sense of challenge. In fact I am quite exhilarated.

The Work of the Double in this Interaction

In this example the double tunes in with the protagonist at a point of distress. The protagonist has taken the view that she is in a disastrous situation and lacks the resources to deal with it. She wishes to give up. The double, on the other hand, realises that this person is possessed of considerable life experience and must be more able to deal with the situation than she thinks. As an expression of this conclusion, the double says "This situation is not so bad, is it? I think we might have dealt with other situations like this one".

The double is saying something here that the protagonist has not articulated. Is the double imposing his own ideas or prejudices on the protagonist? The succeeding events suggest this is not the case. The protagonist gives every indication that the double has been expressing something that is harmonious with her own view as to how things work in the world.

We may also want to know how the double knew that this was in tune with the psyche of the protagonist. The fact is that doubles have tuned in with those who have been protagonists in a psychodrama session countless numbers of times. The greater the training and experience of a double the more frequently this occurs. The notion that a special relationship develops between a protagonist and the double within which each one taps into the unconscious level of the other, is consistent with repeated patterns of interaction. Moreno presents this point of view very clearly when he writes that "the technique of the double duplicates the unconscious processes" and that the double provides a protagonist with "an auxiliary unconscious". In the above interaction the double picks up on something that the protagonist has not been conscious of, and yet as soon as it is expressed, the two of them enter into an exploratory dialogue that flows freely and makes sense. Both the protagonist and the double warm up more. Their abilities increase, both to perceive different elements of a system and to integrate them into a new whole.

The Protagonist and the Double Both Benefit

On the face of it, both protagonist and double have benefited from being together. They have both entered into a fluid situation within which neither imposes their views on the other. The double has been involved in the same way in which Raymond Corsini perceives a non-directive therapist at work with a client. Such a therapist is non-directive, permissive and accepting, in contrast with one who utilises an approach that is directive,

analytic, interpretative or repressive. In the course of his discussion of Moreno's lecture on 'The Function of the Unconscious' in *Psychodrama Volume Two* (1959:71-72), Corsini characterises the non-directive psychotherapist as one who sees the person with whom they are working "as a living, self-directed, goal-seeking, socially responsible individual for whom reality is his perceptions, who is living here and now and who possesses the potentialities for self-improvement". In the same way, the double bases their approach on their living experience with the protagonist. The approach is open-ended, fluid and unpredictable. This is not a doctrinaire approach based on preconceived views. In the example given, the sense of challenge that wells up in the protagonist is an indication that the idea and expression of the double is beneficial.

The Director Responds to Both the Protagonist and the Double

The director of the drama is also active while the protagonist and the double are developing their relationship. But experience of the director is *now* quite different. The director is now in the presence of the protagonist, the double and the relationship developing between them. Previously the protagonist alone stood out in the foreground of the director's consciousness and this influenced the intensity of the relationship and the warm up of both of them. The director warms up in a different way now that there are three significant entities in the foreground.

Sometimes, and hopefully most of the time, both protagonist and director are seething with spontaneity. Where this is the case, their relationship becomes more and more fluid and the director is more focussed on the movement that is emerging in the drama, and on the direction of the forward movement that is apparent in the enactment. The old static ideas with which the director has been inevitably dabbling now become increasingly irrelevant. The director becomes more and more absorbed in the process emerging between these two people. The roles and role relationships become more interesting. Patterns of interaction develop with which the director identifies. Areas of life open up that demand to be enacted and investigated.

The director finds that independent thinking must be brought into being. They have to stretch themselves. Stereotyped responses simply will not do. New concepts must be generated that are in line with the new expressions that are coming forward. Thus, the director is caught up along with the protagonist in a real learning process. Any tendency on their part to be a superior 'know-it-all' is called into question. Now that the protagonist and the double have become an independent force, the director cannot fall back on functioning that draws the protagonist back into a dependent relationship with them.

The Multi-Faceted Work of a Double

A capable double who is also warmed up, is actively involved in the development of different kinds of relationships with the protagonist, the director, the auxiliaries and the audience. In my writing here I am focussing solely on the relationship between the double and the protagonist.

Possibilities for the Relationship between Protagonist and Double

There are a multitude of different relationships that emerge between the protagonist and the double. In fact each relationship is unique. This opens up a range of possibilities for generating new experience.

What are the types of relationships? Most obviously, there is the relationship within which both the protagonist and the double are dealing with matters of which they are both fully conscious. Less obvious is the relationship within which the protagonist is conscious of their experience, and possibly expressing it, but the double is not conscious of that experience. There is, of course, the reverse of that, where the protagonist is not conscious of their expression and the double is. This is most often the case where the protagonist is expressing something with their physical body and the double moves the same way and is conscious of their experience. But the protagonist remains oblivious of both their own physical movement and the experience associated with it. That circumstance is also frequently reversed. Then there is that important relationship between the two of them when they are both unconscious of what is going on. This relationship is filled with opportunity. At this time a double who is well grounded and unworried by their experience, has a powerful effect on the protagonist. Surprise and delight well up in a protagonist while being with such an unruffled person, who is also sustaining strong feeling contact. Their new response often develops into an ability to sustain a satisfying pattern of interaction that had formerly been completely unknown to them.

Expansion of the Double's Flexibility

There is much to be gained through imaginatively entering into these different types of communication. An aspiring double does well to identify these communication pathways through utilising their own experience. Many, many examples of these relationships can be remembered and relived. Small nuances of feeling and cognition can be identified. These situations can be lived and relived in so many ways. Such imaginative reliving introduces an expanded flexibility. The development of such flexibility is very desirable since doubling requires movement from one situation to another and from one warm up to another. The double lives in different worlds as the protagonist focuses on one idea and then another. The double may warm up with a protagonist to an emotion and then suddenly to a profound philosophical thought, or to a feeling and then to an action, or from fantasy to reality and back again.

A good time to develop such flexibility is upon awaking in the morning. It is then that the psyche can more easily remember and visualise events, and make it possible to play at living through interactions with people. A scene involving many different friends can be brought alive by entering into the role of each person, being each one as they express things that they may never have said before and then entering into the being of each of the others. Each one of us is a multiple role player and the double who loves the work and who frequently practises their craft soon discovers the truth of this. New experience constantly emerges while they are with a protagonist, and new actions that are based on that experience also emerge.

The double is like a person who has developed peripheral vision. They are able to

take into themselves a sense of the total environment they are in. They may be with a protagonist who is expressing happiness while they are walking freely through the countryside and the interaction develops as follows.

Double I wonder what is under that culvert over there.

Protagonist I did see that culvert and I was worried about it, but then thought I was being silly.

Here the double relates to the psyche of the protagonist as they move through the world. Every aspect of the protagonist's environment is affecting the double. This particular double has developed an imaginative consciousness. As he imaginatively puts himself into the position of the protagonist and begins to see the world through her eyes, there is an enlargement of the ability to use the senses. In this example the double is most likely sensitised to small movements of the protagonist. The double has picked up something from the movement of the protagonist as they have approached the culvert. And right away the double says "I wonder what is under that culvert over there". The double, at this point, does not understand that there is a threatening person under the culvert. Rather, they are in a living, moving relationship with a protagonist who is expressing happiness, and who also senses that something is wrong and has projected an uneasy feeling toward their double.

The vision of the double also includes what is very close at hand. In the previous example, the double has been alert to an environment that contains delights and hazards. When the double concentrates on the wider world other important aspects of the protagonist's psyche can easily be missed or forgotten. So here again we are confronted with the need for the double to ensure that they maintain a wide range of interests in their life. The double who is genuinely interested in the sociological area and equally interested in the fine workings of the protagonist's mind, is not nearly so likely to intrude their own skews and prejudices into the protagonist's experience. There is a good chance that there will be a genuine exploration of both the larger context of a scene, as well as the small things that are emerging in another person and in the relationship with them. This includes such things as different facets of the views about life, and nuances of the experience of another person who may be standing very near to them in the drama.

The Double Enhances a Protagonist's Warm Up to His Resources

There are occasions when virtually every protagonist is frozen with fear, overcome with a sense of inadequacy or withdrawing from a situation for a variety of reasons. The work of a double is usually very effective in such circumstances. Let us imagine a man who is acting a scene in which he is frightened to go into an office to apply for a job. The name of this man is Tim. He is sweating. He is standing still. His body is tight. His face is pale and drawn. His actions say that he is avoiding something very distasteful. The following interaction takes place.

Protagonist I can't go in there. It's impossible. I just want to get away.

- Double I am going to stand here. I don't think I can go in, but at least I can stand here.
- Protagonist *relaxing a little and then tightening up again before speaking.* . . I can't stand this sort of situation. I hate going into this type of office.
- Double I am going to keep my feet firmly on the ground.
- Protagonist *relaxing again, looking thoughtful and then tensing his body again.* . . There's no point in going in. There will be so many other people wanting this job.
- Double I am going to relax for a moment and then tense up again. And I am still standing here with my feet on the ground.
- Protagonist *relaxing.* . . Yeah. I guess I am still here. I haven't been blown away yet.

Features of this Doubling

There are several significant features of the work of this double and the relationship that starts to develop with the protagonist.

- All of the words of the double are highlighting the physical body of the protagonist. Each time this happens, Tim relaxes.
- In response to the first two statements by the double, the body of the protagonist relaxes but the views about life continue to be expressed with words.
- In response to the double's third statement, the protagonist's verbal statements are quite different from those uttered previously. There is now a clear relationship with the content of the double's expression.
- The protagonist is initially unaware of how he has been affected by the double and then there is a dawning of awareness.
- Throughout the work, the double has accented an element of role that has been neglected by the protagonist. The double has focussed on the action component of role. The protagonist has focussed on his view of life or map of the universe and the emotional element. Some might say the protagonist has focussed on the components of thinking and feeling. Others might refer to the set of values and the set of feelings. Other people may prefer to speak of a person's view of life or a person's value system. These latter two terms accent the interpretations about life that an individual person makes that are designed to guide them in their personal decisions. The term 'map of the universe' highlights the fact that at any moment of time a person develops a connection with the universe based on the interpretation they have made of the relationship between them and everything else. The term thus highlights a person's view of the totality of things and the relationship between them, and has a slightly different accent. The fact that it is a systemic term no doubt helps to make it a meaningful word.

Concluding Remarks

Doubling is an extraordinary thing. It results in an enlarged sense of the value of one's own life and of the value of human relationships. It is a creative endeavour that calls on each one of us to review our personal values, attitudes and actions in relation to the people with whom we work. To act as a double with another person requires all the flexibility that we are able to muster and a willingness to be a genuine explorer. To be a double opens up fresh worlds and brings much satisfaction.

REFERENCES

- Moreno, J.L. (1946, 1964, 1972). *Psychodrama First Volume*. Beacon House, Beacon, New York.
- Moreno, J.L. & Moreno, Z.T. (1959). *Psychodrama Second Volume: Foundations of Psychotherapy*. Beacon House, Beacon, New York.



Max Clayton writes

I was taught to be a double in 1967 and continued to be coached for many years after that. I practised doubling in a big way with patients at Saint Elizabeth's Hospital in Washington D.C., and have continued to practice it in my work in California, Perth, Melbourne and so many other places. It has given me a great deal of satisfaction to be able to tune in to so many people and to see their experience and abilities blossom.

Maria Goes to Hospital

AN ORIGINAL USE OF THE DOUBLE

ANNETTE FISHER

ABSTRACT

This article is focused on the importance of doubling in individual psychotherapy. J.L. Moreno used philosophy, science and knowledge of the theatre to develop the psychodramatic method, including the use of the double as a therapeutic intervention. The author summarises Moreno's stages of development, and presents a description, applications and case study of the use of the double and doubling in clinical practice.

KEY WORDS

core strengths, creativity, director, double, doubling, mirror, Moreno, producer, protagonist, psychodrama, psychodramatist, psychotherapy, role reversal, spontaneity, stages of life

Introduction

This paper aims to offer a deeper appreciation of doubling and its application in the practice of psychodrama and psychotherapy. A review of J.L. Moreno's stages of development and a description of the double and the doubling technique in the psychodramatic method, are included to provide context and historical background. This is followed by a case study that demonstrates the use of the double in individual psychotherapy. The work was undertaken with a client over six months where extensive use of doubling, both in counselling sessions and in live situations, was applied to very good effect. For the purpose of this paper I will refer to the subject, patient and client as the protagonist.

In developing my thinking about doubling, I have been influenced by a range of writers - Zerka Toeman Moreno in *The Quintessential Zerka*, Max Clayton and Philip

Carter in *The Living Spirit of the Psychodramatic Method*, Sandra Turner in 'Facing Jerusalem: Reflecting On Doubling', Katerina Seligman in 'The Psychodramatic Technique of Doubling and its Relationship to Zen Buddhist Practice' and Adeline Star in *Psychodrama: Rehearsal for Living*.

Moreno's Stages of Development

Moreno described the first experience a child has, following their birth, as the matrix of all identity. Following birth the infant does not experience life as separate from the mother or from the universe. At the stage of the double, the child begins to discover that he is not an extension of the mother or a significant carer. It is possible to move independently in space. As this individuation begins, it is important that significant others give the infant a positive, life-affirming experience. The aim of doubling then is to enter into the child's world and promote and affirm their spontaneity and creativity (Zerka Moreno, 1975). Self-acceptance cannot develop without adequate doubling, mirroring is unlikely to be tolerated and role reversal cannot take place.

The next stage of development is the stage of the mirror. At this stage the infant is gaining self-confidence and curiosity, and beginning to explore a wider world. As the infant's awareness of her own actions and experience and that of others develops, caregivers may become fearful and over-protective. They might say "Watch out". With this kind of interaction, a young person's spontaneity for action diminishes. When a protagonist's warm up to action has been interrupted in this way, the use of the mirror technique is instructive. It allows a critical moment to be examined and mirrored, and this promotes an increase of self-awareness. This intervention assists in a move towards a new response to a situation (Clayton & Carter, 2002).

Role reversal is the final stage of development. A person has developed the ability to place themselves in another's shoes. The act of reversing roles increases awareness of the complexity of another person, strengthens independence and identity, and increases empathy and sensitivity in the understanding of others (Zerka Moreno, 1975).

The Art of Doubling

The Double

The double is a theatrical and psychological device that has been present since ancient times. In a psychodramatic enactment the double assists in bringing the protagonist's inner dramas onto the stage. The invisible becomes visible. When producing a drama the director instructs the protagonist to select a double for a number of reasons - to deepen the warm up at the beginning or during a drama, to bring the unconscious into consciousness, to support, to reduce fear, to assist in the expression of the unexpressed, to maximise conflict. Ultimately the purpose is to bring forth the inner world onto the psychodrama stage.

To accurately move into another's shoes, the double must be non-judgmental and

intuitive, with a high level of sensitivity. The relationship is not one of empathy or transference. The trained double enables a two-way communication to develop between the protagonist and the double, and the act of doubling leads to a relationship of mutuality. "The chief purpose of the psychodramatic double is to stimulate, not to pursue the subject, to help and retrain, not to persecute" (Toeman, 1948:52). In Sandra Turner's (2002:16) words, taking up the double position means "It isn't new action that is required, it is a new consciousness of being". A rarer double experience is that of the double trance. This is when the protagonist ceases to be aware of the double and experiences what could be described as the "mystic idea of oneness" (Toeman, 1948:61).

The double stands beside and slightly behind the protagonist, without touching and outside peripheral vision, and gradually feels her way into the same body postures, gestures, movements and facial expressions. Drawing on intuitive knowledge, the double begins to tune into the inner world of the protagonist. A trained auxiliary may also draw on previous knowledge of the protagonist and weave this into her responses. When a protagonist is unable to accept the double, the director may coach, encourage and describe the double's functions to assist understanding. It is important to note that the protagonist is in charge of his own drama, and can dismiss the double at any time (Starr, 1977). As the drama progresses, a strong collaborative relationship develops between the director and the double. This is essential, because it is through the double that the director is able to understand more fully the experience of the protagonist. This knowledge assists in the production of the drama.

The Director as Double

When the protagonist is at the stage of the double, the director uses the doubling technique to increase self-acceptance, self-confidence and expressiveness. A director begins interviewing the protagonist during the first stage of a psychodrama and frequently, if not always, begins to double the protagonist. This assists the protagonist to deepen his warm up to a drama and move towards a consciousness of deeper concerns. Through her experience as the double, the director gains a stronger sense of the protagonist's world and is better able to develop a positive collaborative relationship.

Together the director and the protagonist develop a plan for the drama. The director then begins to move from being subjective in the protagonist's world to a more objective stance as producer of a scene, and the protagonist becomes more independent. Through this process the director assists the protagonist to warm up to spontaneity and creativity. In Max Clayton's words "... my doubling causes him to increase his sense of self-acceptance. As he accepts himself more, his spontaneity increases, he becomes less and less self-conscious" (Clayton & Carter, 2004:53). As the drama progresses, the director/producer continues to tune into the protagonist's world and to double from the side of the stage, moving in and out of a subjective (double) and objective (producer) stance for the length of the drama. During the sharing phase, the director may be required to act as a supportive double as the protagonist listens to the contributions of the audience members.

The Self as Double

With the development of healthy roles and the diminishment of fragmenting roles, an ability to double one's self emerges. Psychodramatists learn to view their own functioning from a more objective perspective. With practice it is possible to self-double, to observe and value thoughts and feelings and to be alongside one's inner experience without being judgemental or evaluative. Katerina Seligman (1998:30) has noted "I have come to view Zen meditation as a process of self-doubling, rather than tuning in to the experience of another person, we are tuning into our own experience".

A Case Study: Maria

The protagonist in our case study is Maria, a young woman who has had a tough life. A neurological condition from birth has resulted in physical disabilities that limit her mobility and independence. Maria has experienced extensive trauma since early childhood. At our first meeting, she and I agreed that I would assist her to address the debilitating fear that she felt regarding pending surgery and hospitalisation.

First Appointment

Maria arrived on time. She was attractive, bright and cheery, and we greeted one another. She had difficulty negotiating the stairs to my consulting room. Maria asked me to introduce her to my dogs and this broke the ice. She talked about the companionship she had with her own dog, her love of music, her singing and guitar-playing, and her connections with musicians and fan clubs that she has joined through the internet. As the conversation proceeded, Maria told me about her severe physical disability and provided a detailed medical history. It became obvious to me that Maria was well versed in these matters. She had a long history of negative experiences with health professionals. During the interview I discovered that Maria had a part time job, lived in public housing with household help, and had her own case worker. She also organised complementary medicine for herself, including physical therapy and massage. She explained that her elderly uncle was the only family member involved with her. He provided transport, endless domestic support and organised many of her appointments. Maria was passionate about her independence, and revealed inner conflicts about the dependency needs that resulted from her disability.

Eventually we arrived at the purpose for Maria's counselling appointment. As she told me that she was preparing to have back surgery involving a spinal fusion to heal her crumbling spine, she began to cry and shake. She said "I want help with these panic attacks". It emerged that a lack of adequate early intervention had led to the severity of Maria's current problem. Rounds of surgery in childhood were followed by long periods of torturous physical therapy. As well, Maria had endured the breakdown of family relationships, poor parenting, physical and sexual abuse and separation from her mother and siblings. A court case regarding recognition of her childhood neglect had not been decided in her favour. Overall, Maria's greatest concerns were focused on the looming surgery and hospitalisation.

Maria's vibrancy demonstrated to me that she was able to be creative and responsive to life. It was clear that a positive and affirming experience was needed because of the impending medical treatment and the past memories that it was activating. Without affirmation, this hospitalisation could well add just another chapter to a long list of traumatic experiences. So I doubled Maria. I assisted her to express her fear of hospitals, authority figures, intrusive surgery and follow up rehabilitation. Through psychodramatic enactments, I doubled her as she addressed the cruel and unsympathetic people from her past. This provided a corrective emotional experience. When doubled, Maria warmed up to confidence, expressiveness and assertion in the face of authority figures, and her usual coping responses of anger and passivity dropped away.

This was a good start. It was evident from the initial interview that, because of her history, Maria was often at the stage of the double in certain aspects of her functioning. She required doubling to assist her to develop enough confidence to be creatively expressive when in the world of a large institution and facing authority figures. Without intensive therapeutic interventions, I predicted that Maria would be traumatised again. There was not enough time before the surgery for her to develop the necessary roles to relate positively to herself and become an assertive communicator. At this point I made the decision to offer to act as her double *in situ* as she prepared for surgery and hospitalisation, even though I knew that this would be a demanding commitment for me.

The Agreement

Maria and I agreed that our work together would focus on the fears and panic attacks that accompanied imminent surgery. After considerable discussion, we decided that I would accompany her to her pre-admission appointments, stay with her at the hospital until she was taken into the operating theatre and be there when she emerged from surgery. We made a hospitalisation management plan to avoid situations that might lead to excessive pain and distress. When Maria was not able to act on her own behalf and with her consent, I would talk to doctors, therapists and social workers about her history. I reassured her that the past would not be repeated. I would intervene if her treatment became harsh, and when staff members were insensitive to her needs.

Maria met with me several times before the surgery and we explored a range of approaches to address fear and panic. In these sessions we were involved in social atom repair, role training and future projections. I frequently doubled Maria. I used mirroring to remind Maria about the positive aspects of her life - her dog, her home, her facebook friends, her uncle, her musical abilities, her musician friends and her work. In this way, she was able to maintain a warm up to the progressive features of her personality, and the fearful fragmenting roles faded into the background. Her self-acceptance and self-confidence increased as her admission date drew closer.

First Hospital Admission

Maria and I attended the pre-admission meeting with a nurse and a pathologist. Acting as double, I was able to prompt Maria to tell the professionals to be gentle with her. As

double, I coached Maria to explain to them how they could assist her to stay calm. On the day of the surgery, Maria arrived at the hospital in tears. She had had difficulty in separating from her dog, and she was anxious and fearful. As I doubled her, she expressed her grief and fear and the staff responded to her with compassion. She was then able to fill out the forms and organise the practical aspects of her admission. As agreed, I briefed the social worker about the necessary and specific care that would be required during Maria's hospitalisation. I was allowed to accompany Maria to the first door of the operating theatre and was phoned as soon as she was back in the ward. I was acting as a supportive double and this part of the process went very well.

After the operation, Maria agreed that all staff members had attended to her with care and sensitivity except the anaesthetist. With encouragement from me as double, she said that he had been grumpy and rude and the injection had caused stiffness and bruising. The doubling validated Maria's experience. Rather than pretending that all was okay, she experienced the freedom of fully expressing her discomfort and anger. Then she relaxed. The next step was physiotherapy. The physiotherapists responded positively when I told them about Maria's past history of draconian therapies. Maria accepted my doubling, both before physiotherapy treatment and from time to time during treatment. She became more confident and was able to give instructions and communicate cheerfully with the therapists and nurses. The positive responses Maria received from staff and friends were important because they reinforced the progressive roles that she was developing. Gradually, Maria was able to communicate freely with the staff and eventually had them 'eating out of her hand'.

Maria requested that her computer be set up beside her bed and she began to connect with her facebook friends. The doubling assisted her to be spontaneous and creative, and as her spontaneity increased she became curious about the surgery scar. She asked me to take a photograph of her scar, which she then posted on her facebook page. This increased her connection with her young friends in the outside world and they responded with interest and concern.

Second Hospital Admission

I did not predict the intensity of the next stage of recovery. The challenges that Maria faced would have tested the most resilient of us. Not only did Maria have to recover, but because she had lost further physical independence she now needed to use a wheelchair most of the time. She was unable to participate in sport, and even playing her guitar was now physically demanding. She was more dependent on others at home, and continued to experience ongoing difficulties in family relationships. Then a double blow. Maria lost her job due to downsizing, and she had to come to grips with the fact that the operation had not been successful. She required further surgery.

Doubling continued to strengthen Maria, and increase her ability to value and call on her own resources. This time, when she and I returned to the hospital, we were received with open arms. I was invited to put on a gown and go into the operating theatre with Maria. This time Maria demonstrated her ability to be assertive with confidence and flare. I took a much more background role. Maria only required intensive

doubling immediately before and after the surgery. As we waited outside the operating theatre I said "I hope I don't have that cranky old anaesthetist again". Maria replied "You're right. He was a horrible old man". As she said this, the anaesthetist appeared. He was a kind, gentle man who reassured her that he would listen to her and provide her with the best possible pain-free treatment. After the surgery, the staff invited me into the recovery room. Maria was distressed. I became a tender, soothing, supportive and expressive double. Maria gained comfort and reassurance when I said "Even though this place is scary, I am safe and these people are not going to hurt me". She replied "Yes, I am safe here".

This time round, Maria had prepared very creatively for her convalescence. She had organised for her dog to be smuggled up to her room for a visit. She determinedly arranged a leave pass from hospital so that she could attend a musical concert given by her favourite singer. However, during this second recovery old fears resurfaced. I continued to double Maria, sometimes communicating by phone, sometimes visiting her at home. Through the doubling, I assisted her to express her pain, her resentment about the length of the rehabilitation period and her grief about the loss of her independent life. Through mirroring, she continued to gain self-awareness regarding the way that she related to others and the value of her many achievements.

Childhood memories of harsh treatment were again triggered when aqua therapy was prescribed. I assisted Maria to confront people from her past who had caused the suffering. Doubling assisted her to express her rage, disappointment and hurt, and her revenge fantasies. She was then able to respond positively to the proposed treatment and befriend the therapists. I attended the first aqua therapy session, and again became a supportive double as Maria addressed her fears and maximised her positive responses. Through this therapy she regained her fitness, so much so that she continued to attend these sessions after discharge from hospital.

Maria continued to experience ongoing difficulties regarding family relationships, employment and health. I continued to stick to our original agreement. I continued doubling. Very gradually, as progressive roles developed, I began to withdraw. I encouraged Maria to use the specialised services that were available. Our telephone conversations became shorter and our contact less frequent.

Recently, Maria reported to me that she has finally given up fighting with government departments. She is negotiating instead, to gain maximum support for her day to day living. She said "I stopped fighting just like you told me". Through her developing self-awareness and self-confidence, she is role reversing with those involved in her care. Maria has undergone further surgery without a face-to-face consultation with me. On the telephone, we discussed the ways in which she would use her strengths and resilience to make her hospitalisation successful. Again I used doubling and mirroring to assist her to experience the fullness of her progressive roles. After many weeks without contact, Maria phoned and said "I hope you don't mind if I phone you occasionally, to give you an update. I like to keep you in the loop!"

Conclusion

Through the use of the doubling technique in the *here and now* situation, Maria was able to develop her abilities to approach surgical treatment without further traumatisation. She was able to maintain a positive attitude during her long hospitalisation and rehabilitation. Along the way, her early traumatic experiences emerged and were addressed. Considerable social atom repair was achieved. As the double, I assisted Maria to feel validated, to maintain her spontaneity and creativity, to relate to herself with unconditional acceptance and compassion, and in this way develop a positive self-image. Her contact with her inner world was strengthened as self-awareness and self-acceptance increased and her social networks grew.

My therapeutic work with Maria was unusual. I had never taken on the double role in quite this way before. My professional peers played an especially important role in this process. In peer supervision sessions, they doubled me. They assisted me to become aware when emotional fusion was taking place, and reminded me of my original agreement with Maria. I was then able to move back into a more objective position. In a parallel process, Maria was then able to maintain her hard won independence despite the complexity of her life.

For the psychodramatist, the capacity to double is a core strength requiring sensitivity and flexibility. It is essential in a therapeutic process because it is through the experience of being doubled, that human beings develop self-acceptance and self-confidence. Each person then moves forward and their unique individuated identity emerges. It is also essential that the psychodrama director be creative and open to learning, direct hundreds of dramas, be a protagonist and have dedication to maintaining a life style that increases spontaneity and a love of life. With time and development, doubling ability becomes an integrated aspect of everyday functioning in one's personal and professional life.

Maria offered me the opportunity to re-reflect on the double technique. As a professional, I have revisited the value of the double and doubling, and have appreciated anew the foundational importance that this ability has when using the psychodramatic method in individual psychotherapy.

Epilogue: A Future Projection

I recently asked a psychodramatist supervisee to identify his requirements of me. Without hesitation he said "To be doubled". I immediately imagined a future scenario.

*Advertisement in the Positions Vacant section of
THE AGE 2020*

Senior therapist wanted for position in large metropolitan hospital. Emotional intelligence essential. A high level of competency and experience in the art of doubling very desirable. The successful applicant will also demonstrate a commitment to seek regular doubling for themselves so that they continue to increase their ability to be sensitive and responsive to staff and patients.

Many thanks to Maria for allowing her story to be told. She said "If I can assist professional people to know how to help people like me, then it is all for the right reason".

Much appreciation to my colleagues at the 2009 ANZPA Conference for participating so freely in my workshop on doubling. Your participation assisted me to clarify and develop my thoughts and ideas.

REFERENCES

- Clayton, M. & Carter, P. (2004). *The Living Spirit of the Psychodramatic Method*. Resource Books, New Zealand.
- Horvatin, T. & Schreiber, E. (eds.) (2006). *The Quintessential Zerka: Writings by Zerka Toeman Moreno on Psychodrama, Sociometry and Group Psychotherapy*. Routledge Taylor & Francis Group, London & New York.
- Moreno, J.L. (1953). *Who Shall Survive?* Beacon House, Beacon, New York.
- Moreno, Z.T. (1975). The Significance of Doubling and Role Reversal for Cosmic Man. *Group Psychotherapy and Psychodrama: A Quarterly Journal* XXVIII:55-59.
- Seligman, K. (1998). The Psychodramatic Technique of Doubling and Its Relationship to Zen Buddhist Practice. *ANZPA Journal* 7.
- Star, A. (1977). *Psychodrama Rehearsal for Living*. Nelson Hall, Chicago.
- Toeman, Z. (1948). The Double Situation in Psychodrama. *Sociatry: Journal of Group and Intergroup Therapy* I(4):436-446.
- Turner, S. (2002). Facing Jerusalem. *ANZPA Journal* 11.



Annette Fisher is a Psychodramatist, and Trainer, Educator and Practitioner (TEP) working with individuals and groups in a private practice. She is the Director of Training of the Psychodrama Training Institute of the Australian Capital Territory (ACT). She is also a visual artist who has regular exhibitions using painting, photography, projections and installations. Annette can be contacted at annettef@pcug.org.au

Please Forget That You Know What 'Role' Means . . .

THE PRAGMATICS OF HUMAN FUNCTIONING

DON REEKIE

ABSTRACT

Don Reekie focuses on the pragmatics of human functioning. He considers what makes sense and how we work. You are invited to recall, review and relearn. Set aside the baggage that the word 'role' is lumbered with in the 21st century. Examine your own everyday experiences. Look at human functioning while applying Jacob Moreno's concepts and methods, centred on theatre, stage, drama, production, storyline, actors and audience. These can guide us to make sense of our ordinary everyday functioning and assist us in producing psychodrama.

KEYWORDS

becoming, being, consciousness, creativity, functioning form, Moreno, play, psychodramatic production, role, spontaneity, stage, theatre, warm up

Let's Look At The Way We Are

I ask you to forget the meaning of 'role', so that you will be open to clearly recalling what you know about the way we are. My starting point is with seeing 'role' as the 'functioning forms' we have.¹ As we begin to consider this together we have to accept that words have common uses that are beyond our control, regardless of how important a particular word is to us.

Twenty five years ago younger adults with 'self actualisation' and 'full potential' in their sights could be put off 'role' because of their desire to be individuated and not

defined by society's expectations. Today 'role' is in common use, meaning a prescribed place and fit of a person in an organisational system. When was the last time we heard people speak of their 'job' or their 'job description' or their 'work'? The word 'role' has filled in and taken over. Indeed speakers frequently appear self-satisfied to use a word so superior to 'job', 'task' or 'purpose'.

Moreno took a word, restricted at the time to theatre and sociology, and expanded its scope and relevance to personality development, relationships and community. Today the word 'role' is restricted to 'prescriptions' and 'expectations' to be 'taken on'. 'Role' is popularised as concerning sets of behaviours to be followed. 'Role' is expected to be 'like second nature' – which clearly means 'role' is not seen as our first or true nature.

Psychodramatic methodologies are about the real me and the real you. Our tradition in the Australia and New Zealand Psychodrama Association (ANZPA) gives emphasis to particularities of role. I believe that in our best practice we consider each person in their uniqueness. We consider the functioning form a particular person has at a particular time, in a particular place and with particular people and objects. Functioning form combines a multitude of influences brought together from within and without this person.

We can create descriptors of a functioning form which have great communicative power. These may picture a person in action and bring their functioning to our awareness with vivacity. However, it is important to know that our first task is not to depict. First we must work to see the person, appreciate them and meet them. When I was young I knew a coal miner, a wise old man, who said "Don, you need to learn to listen with every pore in your body". I realise that I also need to see with every cell in my body. I meet and engage with the functioning form a particular person has. How do I take him or her into me and come to really appreciate who they are? I believe psychodrama has the goods. Moreno's methodologies offer to take us to the deep flows of heart and soul of each person's particularities.

Let us face the facts. We are matter and movement. We move to survive. Gregory Bateson (1972) wrote "We cannot not communicate". We move, and as a consequence of our movement we continuously communicate. Although we deliberately communicate through gesture, sound, verbal language and writing, Moreno recognised movement as our primary communication. Just as, we cannot not communicate, we cannot not be ourselves and we cannot not create ourselves.

Whatever else functioning form or role is, it is a phenomenon, the phenomena that we all are as responsive and purposeful beings in action. "Role is understood holistically as a person's specific way of being himself or herself in any given situation" (McVae & Reekie, 2007).

Theatre and Stage

Theatre imagery can be a medium for what goes on in daily life, and what goes on in daily life informs and becomes an art form in the theatre. My concern here is to set functioning form very firmly into a theatre setting. I believe it is only by placing

functioning form on the stages of both theatre and of ordinary life settings that we discover what role really is. The functioning forms each person assumes in the scenes of their life are who they are. When I think role, I think person, private and public. I think personality and culture. I think values and relationships. I think that the organisation of our human functioning is lit up by my seeing everyday scenes as if they are theatre, each on their own stage.

Let us not limit enactment to what happens in a theatre, nor restrict spontaneity to what takes place on a stage. Let us see life as drama, enactment as the happenings and spontaneity as our ability to be free to be ourselves. We can think of the chunk of space where life happens as stage. The processes of theatre production can provide us with constructs to describe what is happening in the scenes of life. On the other hand theatre aims to imitate, present and focus our attention on the lives we live.

Psychodrama gives opportunity to bring our lives to stage as theatre and laboratory. We can work to experience, to learn and to develop by applying Moreno's canon, universals and instruments. The Canon of Creativity posits the interactions between warm up, spontaneity, creativity and cultural conserve. The word 'canon', I think, indicates that this is the way things always happen with human beings. It cannot possibly be that Moreno had in his mind a council of wise authorities enacting edicts. The Four Universals recognise that we are set in time, space, reality and cosmos. The Five Instruments necessary to psychodrama are stage, patient, director, auxiliary-ego staff and audience. I do not usually follow Moreno's use of patient and staff. These arose naturally from his psychiatric hospital setting at Beacon where he did have patients and staff. These three sets of factors are powerful influences on the scenes of our lives and the living theatre of psychodrama. They guide us in production and in discerning the pragmatics of role. Thinking theatre, stage and drama assists us to reveal the dynamics of people interacting in their functioning forms.

In theatre a role is conceived, a script written, a cast developed and drama enacted in a specific context. Playwright, artistic director, stage manager, set designer, sound and lighting technicians, choreographer, composers, musicians and performers combine so that each role of the play has its place and its integrity. Without integrity the actor will ham or caricature the role he or she plays. In life, integrity is demonstrated when individuals in relationship are recognisably being themselves. They are each a seamless whole of many interweaving elements. The stage on which we act is the actual context, the set is just the way things are, and the choreography and scripting emerge as a reciprocating dance that evolves between all of the co-producers of the drama, who are being themselves just as they are.

As a child of eleven, my father sometimes took me to his work on the River Thames, where he was boson (boatswain) of wharves and lighter roads. Lighters were barges which carried cargo from large ships to the wharf. They were tied to buoys in the river while awaiting the boson to shift them into their proper order. Eventually they would be tugged or sculled to wharf-side for unloading. We would scull out in a dinghy to 'the roads', the queues of lighters parked in river centre. His task was to re-order the lighters to be taken the next day for unloading at the wharf. With a single 27 foot oar, he freed

and moved each fully-laden, giant, steel lighter and re-moored it into position. I stood by him as he guided them, aware that the river's hidden power was our only engine. The oar eased us into a tide flow, and then an eddy, to be checked by a surge, to carry forward on pressures generated from river-bed formations, and then turned us to glide into place. I was unbalanced by lurch or jerk of the lighter as we shifted flow to flow. With practiced eyes and spread feet, sensing familiar pulses and drives within the chunk of water beneath us, my father's whole body was at one with the river to magically bring each lighter to its proper place.

The chunk of space we think of as stage is multi-dimensional. It seethes with the influences of relational currents. An attuned producer senses the stage space, standing beside a protagonist, interviewing for role and responding to each influence within the scene. Every space has the three basic dimensions of height, width and depth. The stage space has a multitude of less obvious dimensions. Experienced producers become attuned to these. They include location in time, the process of time, the consciousness of past and future in the present, the emotional reactivity with past events and relationships, the anticipations of future whether hopeful or fearful, the actual realities of the specific environment, the social dynamics in the current context, and the apprehension of cosmos for the central actor and for those who are auxiliary egos in the drama. The scene is filled with influences and possibilities. The people, the actors, move in their various functioning forms within that chunk of space with its mixture of influences.

In the scenes of life or within a psychodrama the actors are creative geniuses, though their potential may be rudimentary or realised. Each person in any moment will have developed their functioning form to a certain degree of spontaneity. A basic level of spontaneity is seen when they take on a functioning form, a higher level of spontaneity shows in fluent play of functioning forms, and at a third level they may have ability to be creator of their own functioning and therefore of their self and their being. They might then be said to be 'on song' or 'in flow'. "When spontaneity is low, there will be a lack of role flexibility, while increased spontaneity activates a person's innate creativity and generates new, more effective roles" (McVae & Reekie, 2007).

How Do We Learn To Be Ourselves?

We learn to be and become who we are through action and enactment. Development of Morenian spontaneity is the development in us to be free, to select and to perform actions mindfully with immediacy, flexibility, adequacy, creativity, originality and vitality. Here I notice that psychodrama depends on play and playfulness. Life is not only spiced by play, but play is the central machinery by which we learn the functioning forms we have and are. When we are very young it is essential that we engage, interact with and demand of our caregivers. As toddlers we begin to interact with our environment and, in time, with our peers. The pace and quality of learning involved is huge. We imaginatively create and interact with our own special companions, entering realities beyond the observation of adults.

Sara Smilansky (1990), a childhood learning educator, viewed the play of children

between two and seven years of age as sociodramatic. On reflection, we recall that at that age children constantly organise games in which they play at life. Even alone they play at being the grownups. There is no doubting their absolute conviction that they really are doctor, parent, checkout operator or whoever they choose to be. Another aspect of their play is the discussion about the veracity of enactments and accuracy of portrayals. Learning through play is an effective process. It involves copying, purposefully being, gaining playful flow and shifting into creation mode.

Play is not just a childhood success story. With play adults develop freedom, control, and fluency. In an interview, relatively new Red Arrows aerobatic team pilots of the Royal Air Force spoke of their training, and the manoeuvres through which they learned and would perform. They said that they were encouraged to play. They were already highly skilled pilots. In learning to manoeuvre as a team they moved not to risk-taking but to play. They spoke of delight, edge, freedom to be in the immediacy of the moment and of an uncanny sense of the whole team in unison.

In psychodrama, we build on our recognition that play generates warm up to spontaneity. Play involves heightened absorption and delight in the experience. Focus and delight promote freedom and flow, which engenders persistent practice and sharpened precision. Play is crucial to spontaneity development and role development. Role training sessions are marked by play, spontaneity, creativity and delight. This is not to forget that for people of all ages play is very serious stuff. Just watch a child alone with an imaginary friend or listen to a sportsman or sportswoman speak of their aspirations. Let us recognise that practice in play is not just for future gain. Becoming is not separated from being. In play, immediate reality is pleasurable.

Getting To Know ME - And You: The 'Ins' and the 'Outs'

We come to know who we are as we oscillate between subjectivities and objectivities. We observe ourselves and others as life happens, and then as if from outside or on reflection. Here I build on recognition of subjective and objective separation and integration in psychodrama. Our functioning forms rely on our brains to utilise separate flows of consciousness, seamlessly organised in our every moment. Or maybe I should think flows of cognition, since some of the experience I write of is out of consciousness.

Sometimes, it becomes very clear that the Central Nervous System (CNS) organises itself so that we experience ourselves from a meta-position. During my mini-stroke, I was conscious of myself from outside of myself as well as being in myself. I did not see myself from the outside as people do in near death experiences. I had an observing consciousness of myself and of the effort I was putting into battling to control my cognitive and motor functions. There were two distinct streams of consciousness, one interested in the other.

American neuro-scientist Jill Bolte Taylor (2008) claims her severe stroke to be a brilliant research opportunity. She reports the extent of the separation of distinct CNS functions, including her monitoring of awareness. She presents from severe brain disorders and her own raw data. She says the right hemisphere focuses on right here and

right now, with picture and movement awareness. The left, she says, has linear linking with past and anticipates and hypothesises as to the future.

Julian Jaynes (1976) was a psychologist way ahead of his time in the 1960s and still controversial when he died in the 1990s. His views of CNS anticipated neuro-psychological research continue today. Amongst a host of innovative thinking, he envisaged a mind that functions as if there is an 'analog I' and a 'metaphor Me'. He recognised that we have CNS-organised spatial awareness in our minds that matches the spatial realities of our world. He saw that we image in fragments that might be like a slide show, were it not that we narratise. Narratising is our constant practice of stringing our data into stories. We hardly ever produce stories matching exactly as it is in our worlds, but inside it is our reality.

In our inner world we can anticipate what might come to be in our outside world. As 'analog I', we each venture experimentally into possibilities. The process of anticipation readies us for our next actions at incredible speed, yet with ability at times to go in slow motion. 'Metaphor Me' is a bonus. Not only are we able to view our world in our heads, we can also see our self, a 'metaphor Me' in the scene. One moment active agent in the drama, the next we are observing ourselves. Meanwhile, our CNS fine tunes our actions, all largely out of awareness.

Think of these processes as motor coordinated sporting prowess. We hold our breath at a fine golfer's green putt, or at an expert rugby conversion attempt. We have not the time for such pause amidst a netball game where a centre takes a pass midair in centre court, twisting her body to deliver a lightening pass to her goal-attack. 'Analog I' probabilities are being extended forward while 'metaphor Me' is constructed as a future projection, coordinated to have all bodily movements of precise sequence and speed geared to single-minded purpose. The organisation of mind through the coordination of the CNS is a miracle of complexity and holism. Especially this is so in relationships. There, future projection, social atom, creativity and surplus reality are active in the mix. Psychodrama has production methodologies that promote access to these streams of consciousness. Psychodramatic techniques open and vivify awareness. They promote healthy pathways of thinking, feeling and action.

Producing Amplification of the 'Ins' and the 'Outs'

Much insight in art, humour and theatre depends on disjunctions and sequencing that throws experiences into sharp relief. Psychodramatic production techniques produce oscillations of viewpoint from subjectivities to objectivities that sharpen clarity of awareness. Here I consider the elegance and effectiveness of psychodramatic production techniques. See how they are embedded in our natural means of gaining the freedom of our functioning forms through our lifelong development in spontaneity.

Real life has those very elements that psychodrama theatre requires as building blocks as it imitates and emulates life, as it is and as it can be. If life were to go as would be best, then as children we would have a trusted stage on which to learn. The first trusted stage would be the environment that parents create. On that stage we would each have

been welcomed and come to belong, have had our inner truths acknowledged, gained recognition of our selves, been valued for our contributions, and been assisted to discover how to enter into the feelings, values and motivations of others while able to see ourselves through their eyes.

Moreno (1946) envisages a phase of all identity where it is our right to know we belong - but with no guarantee. He sees a double phase where it is our right to have our unique experience validated – but with no guarantee. He sees a mirror phase where vision and recognition of ourselves in relationships is our right - but only if our caregivers are capable of recognition and coming alongside the child. Finally, in the phase of role reversal, it is our right to have mutuality, empathy and encounter with responsive auxiliaries – and again there is no guarantee that each child will know rich social relationships on a trusted stage.

Developmental processes and phases that have the power to promote the growth of spontaneity through childhood are alive and strong in psychodrama's production techniques. Group warm up and the promotion of communal belonging and of auxiliaries, each to each other, produces a setting for healing drama. Doubling involves a group member, recruited from the audience, standing at a protagonist's shoulder behind peripheral vision. He or she becomes an inner voice, tuning in to aspects of experience out of reach or inexpressible. Mirroring has the protagonist witness, from an audience position, a replay of a scene that she has just enacted. Observing herself functioning as a timid mouse may provoke her to intervene on her own behalf. The central actor's script emerges from the role reversing interactions between him or her and the people of their life drama. In Australia and New Zealand, more than in other countries, role reversal continues throughout a psychodrama.² The protagonist enacts each role first. One moment the protagonist is herself, then her father or sister, and then she is herself again. The auxiliary plays each aspect of role as the protagonist has before her. In concretisation the intangible or subliminal is made concrete. Body sensation or movement is enacted while an auxiliary actor is in the place of the protagonist. Experiencing a back ache, the protagonist focuses on this single element of his being. Warming up to the experience, he animates and personalises his body discomfort, giving voice to the meaning he discovers.

The production techniques of psychodrama bring to enactment our brains' processes which are working for us continuously. They amplify facets of separate streams of both conscious and unconscious cognitions and make them accessible. They offer a stage that can be trusted, a stage on which to learn anew the lessons of life which are our birthright.

Who has Naming Rights and Whose View is Real?

When role is enacted on the stage of life or on the psychodrama stage, who decides what the truth is? What are the effects of the act of naming? How is functioning form to be comprehended? I think it important to clarify who has the right to discern a functioning form and construct a descriptor. Does the person themselves have prime

claim to say how it is? We know that a protagonist knows some things and misses a great deal. We know that auxiliaries and audience can see and affirm things the protagonist does not know. Is the observer in a better position to depict another's functioning form? If so, which observer? Is it the one up close and personal, the one impacted full on? Or is it the one more distant whose attachments are less caught up? Is someone more distanced inevitably better placed? What if their social atom experience has a similar or common history? Such a one may have more intense emotional reactivity.

When I work with a client who describes a person who has dominated and oppressed him or her, I aim most of all to appreciate the client's experience. Whatever tag they come out with, what that means for them is my interest. They might say "Tyrannical Bastard". I might think "Cruel Oppressive Tyrant". I work like a double to feel into their experience and gauge the weight of their words. I consider the stage they stood on when abused - the context, the time, the power differentials and the values taken for granted. I think of the stage they stand upon currently as they deal with whatever it is they are challenged by. Functioning forms are sensed and engaged with as scenes are dramatised. The narrative is in the present and in action.

On a psychodrama stage the protagonist gives up naming rights and enters flows of experience in a theatre of truth. They may want to build up strength to stand against, or see need to withdraw and escape oppression. Role structure and social atom history may be contaminating performance and distorting their constructions and depictions of the way things are. Then, there is need of development. The director-producer notices when there is role taking rather than role playing. Health in functioning forms is worked for through interaction, and not by the director's analysis or wise judgment. Catharsis of integration and social atom repair move outward from within, balanced by movement inwards from the functioning forms in relationship interactions. The essential holism of movement and being is what touches soul, heart and mind.

Each person has their own viewpoint from their starting place. Each person has a private naming place within their cognitive filing systems. Psychodramatic staging has the capacity to loosen conserved positions and strengthen purposes. Production allows the dynamics to come alive and test realities. The protagonist is held in relationship where they know they belong. They are befriended as self and as their antagonists in role reversal. In all of this we are not diviners or arbiters of truth, but lovers of the protagonist. The more we appreciate them and delight in them, the more they will search themselves and trust themselves to realise themselves. It is on the stage we can know what role means. If we love our words and our depictions more than we love the protagonist, then both we and they are lost.

Good theatre produces good therapeutic conditions. Constructing therapeutic outcomes produces poor theatre and inadequate therapy. I believe that is because the director's heart and mind have moved away from the protagonist. If the life of the protagonist is produced with robust heart then the living script flows, and his or her healing imperative leads the therapy. Whenever you enter a helping relationship you have first to find a yes in you to the person or group. If you really cannot find a yes, then you are not a person who can help them. This fits for me with the Oscar Wilde character

in the play *The Judas Kiss* (Hare, 1998), who said “You can only know someone if you first love them”. It also aligns with Socrates’ reply to a mother who was beseeching him to be teacher for her son. “Woman I cannot teach your son, he doesn’t love me”.

Role attribution in accord with psychodramatic production must be lovingly respectful. Theatre is a place of encounter. Role has full meaning at the place where we meet and engage with a desire to appreciate and delight in this particular person, here and now.

END NOTES

1. The main passages from Moreno which relate to functioning form, role, spontaneity and allied factors throughout the paper are from: *Who Shall Survive* (1934). The pages cited are from the 1978 3rd edition - Preludes... ppixiii–cviii, Canon of Creativity pp39-48, Role pp75–77, Learning pp542-547. Also in the 1993 Student edition - Canon of Creativity ppII-20, Role pp47–59, Learning pp20I-207. *Psychodrama First Volume* (1946). The pages cited are from the 1977 print of the 4th edition - Introduction (Instruments) ppa-e, Role ppII-VI, God-act pp8-9, Spontaneity pp47-93, Role Definitions pp153-161. *Psychodrama, Second Volume* (1959). The pages cited are from the second print 1975 - The Unconscious pp45-88, Megalomania Normalis pp139-140. *Psychodrama Third Volume* (1969). The pages cited are from the 1975 second print - Universals ppII-29.
2. Within ANZPA, auxiliary egos are coached to spontaneity in role. However, when a character other than the one in conversation is to respond, the protagonist moves into that role as a consequence of the continuing role reversal. The auxiliary actors can thus find themselves playing several different roles in a drama, rather than sustaining a single role as is regarded essential in many countries. Remarkably, every actor enters into each role faithfully. All the participants’ spontaneity is heightened and none are locked into a role. With adequate sharing in the integrative phase, ‘de-roling’ is redundant.

REFERENCES

- Bateson, G. (1972, 1979). *Steps to Ecology of Mind* (Paladin edition). Chandler Publishing Company, London.
- Bolte Taylor, J. (2008). Address at Technology, Entertainment, Design Conference. Recording available at <http://www.microclesia.com/?p=320>
- Hare, D. (1998). *The Judas Kiss* (play first performed at Broadhurst Theatre, New York City). Grove Press, New York.
- Jaynes, J. (1976). *The Origin of Consciousness in the Breakdown of the Bicameral Mind*. Houghton Mifflin, Boston, MA.
- McVae, C. & Reekie, D. (2007). Freedom to Act in New Ways: The Application of Moreno’s Spontaneity Theory and Role Theory to Psychological Coaching. *The Australian Psychologist*, December.

- Moreno, J.L. (1934, 1978). *Who Shall Survive?* (3rd edition). ASGPP, McLean, Virginia. (Originally published by Beacon House, Beacon, New York.)
- Moreno, J.L. (1946, 1977). *Psychodrama First Volume* (4th edition). ASGPP, McLean, Virginia. (Originally published by Beacon House, Beacon, New York.)
- Moreno, J.L. (1993). *Who Shall Survive?* (Student edition). ASGPP, McLean, Virginia.
- Moreno, J.L. & Moreno, Z.T. (1959, 1975). *Psychodrama Second Volume: Foundations of Psychotherapy*. ASGPP, McLean, Virginia. (Originally published by Beacon House, Beacon, New York.)
- Moreno, J.L. & Moreno, Z.T. (1969, 1975). *Psychodrama Third Volume: Action Therapy & Principles of Practice*. ASGPP, McLean, Virginia. (Originally published by Beacon House, Beacon, New York.)
- Smilansky, S. (1990). Sociodramatic Play: It's Relevance to Behaviour and Achievement in School. In Klugman, E. & Smilansky, S. (eds.) *Children's Play and Learning*. New York Teachers College, New York.



Don Reekie, Trainer Educator and Practitioner (TEP), is currently a member of the training staff of the Christchurch Institute for Training in Psychodrama (CITP) and The Moreno Collegium, Queensland. He knows that the psychodramatic method works. He has seen the evidence through producing a dance and drama rediscovery of an island nation's chant, dance and history for its Pacific Island community, in producing community-created mystery plays, in promoting renewal in maternity practice with professionals and mothers, in weekly Creative Living sessions and in working with men for more than a decade to stop violence and harness anger.

The Imago Affair

JACOB MORENO'S *INTERPERSONAL THERAPY* AND HARVILLE HENDRIX'S
RELATIONSHIP THERAPY

WALTER LOGEMAN

ABSTRACT

Jacob Moreno's Psychodrama Interpersonal Therapy and Harville Hendrix's Imago Relationship Therapy, while different, have much in common. The meaning and origin of encounter and dialogue, and the contrast between locus and focus, are discussed with reference to ways they can be fostered. The question of professional identity and identification with a modality is raised. Some general conclusions are reached regarding the boundaries between psychodrama and other modalities.

KEY WORDS

dialogue, empathy, encounter, imago, mirroring, modalities, professional identity, psychodrama, psychotherapy, role reversal, validation

Introduction

A colleague once told me that she was married to Transactional Analysis and was having an affair with psychodrama. Psychodrama has formed the basis of my psychotherapy practice for many years. More recently I have immersed myself in Imago Relationship Therapy (IRT). Did I have an affair? Was there some sort of betrayal? This article documents what I have learned about psychodrama and Imago and my experience of relating to two modalities.

At the beginning of my work as a therapist, I practised couples counselling without a coherent theory or methodology. Sadly, the rich theory and practice of couples work developed by Moreno did not catch my attention until recently. In the 1990s however,

someone gave me a video showing Harville Hendrix (1999, 2005, 2005a) demonstrating the Imago couple therapy he had developed. I was impressed by two things, firstly the simple dialogue process that led quickly to deep work on childhood wounds that are influencing a relationship. Secondly, I was attracted to the elegant unravelling of the relationship knot of projections. Thus began my interest. I began to use Imago style dialogues in couple work. I completed an Imago training day, and eventually the full course. In 2006 I qualified as an Imago Relationship Therapist. I was now confronted with the question of my identity as a therapist. An Imago trainer said to me “Now you can put ‘Imago Relationship Therapist’ on your card”. No, I thought. I am trained in Imago but *I am* a Psychodramatist.

The Imago training helped in my practice and I made significant changes to the couple sessions. After only a few sessions, many couples were able to dialogue at home with little coaching from me. They readily used the structure, their work became intentional and collaborative and they reported shifts in their relationship. Some continued to bring to the sessions the difficulties that they experienced in their dialogues at home.

How is it that steeped in the rich, holistic tradition of psychodrama I was attracted to another approach? One answer is that, in the broad scope of psychodrama training and experience the application of the method to couple work had not fully reached my consciousness. How to use the method in practice to reach encounter was still a mystery. Imago was able to illuminate that for me. Another is that stepping into a structured dialogue has the same dramatic impact as stepping onto a psychodrama stage, but with an added advantage. The couple can use the framework at home without a director. They can step from the struggles of life into a place where they face one another in a familiar crucible, in the privacy of their own home. Like psychodrama, Imago cannot be learnt through the written word. It is also an experiential method, and I came to appreciate it through practice. My partner Kate and I attended a workshop together as part of my training. We use the dialogues in our marriage and find them useful.

Both psychodrama and Imago have global intentions that I respect. There is a phrase in Imago circles, “We will change the world, one relationship at a time”. Psychodrama has a broad sweep of possibility. It is more a worldview than a modality. This large vision is summed up in the opening lines of Moreno’s major work, *Who Shall Survive*. “A truly therapeutic procedure cannot have less an objective than the whole of humanity”¹ (Moreno, 1953:1).

This article began as a comparison of two methods. But something changed as I reflected on the two familiar spheres of endeavour. I began to see psychodrama anew. I saw what was there under my nose all the time. Moreno had already proclaimed many of the principles inherent in Imago. Couple therapy is central to his work. Richard Fowler (1994) revealed this in his excellent article ‘Dr. J.L. Moreno - Marriage Therapist’. Theo Compernelle (1981) had produced a paper² acknowledging Moreno’s early work in developing conjoint therapy. I found myself not comparing, but seeing each mode of work through the eyes of the other modality. Each perspective enriches the other. I am integrating what I found challenging, powerful and effective in Imago

and I realise that it enables me to enhance psychodramatic principles and practice. I often use psychodramatic concepts such as warm up, and techniques such as doubling and concretising, to extend the dialogues.

Am I now an eclectic therapist? Am I integrating two methods? In a world full of beliefs, modalities, gurus, traditions and philosophies, is it useful to identify with one approach? Or is it a trap? Reflections about professional identity continue. I revisit these in the conclusion.

Imago: Dialogue and the Relational Paradigm

I will outline briefly what I see as the essence of Imago Relationship Therapy. The intentional dialogue is central³. One partner requests a dialogue, and proposes a topic and time. The partners express themselves in the dialogue. They take turns as sender and receiver. The sender speaks from the heart, without blame, and the receiver suspends judgment. There are three stages in the process. The first is word-for-word mirroring followed by a summary, then a validation step, and finally an empathy step.

In addition to a dialogue process, Imago brings a philosophy and theory of relationship dynamics to the work. The therapeutic relationship is viewed as the core of healing in psychotherapy. In Imago, this same principle operates powerfully in a life partnership. A couple's problematic relationship dynamics are viewed as unconscious attempts to heal old pain and repair inevitable deficits. Their work through Imago dialogues is central in healing these childhood wounds. Imago thus assists the natural healing inherent in the committed, sacred, loving relationship⁴. Hendrix describes how this unconscious dynamic works.

This image of "the person who can make me whole again" I call the Imago. Though we consciously seek only the positive traits, the negative traits of our caretakers are more indelibly imprinted in our Imago picture, because those are the traits which caused the wounds we now seek to heal. Our unconscious need is to have our feelings of aliveness and wholeness restored by someone who reminds us of our caretakers. In other words, we look for someone with the same deficits of care and attention that hurt us in the first place.

Hendrix, 1999:5

Imago therapists view the relationship as the focus of the therapy. This perspective is of more value to them than technique. Imago theory identifies this as a shift to a relationship paradigm. "Rather than there being two individuals having a relationship, the relationship has individuals" (Mason, 2005: 139). "The emphasis of the new paradigm, then, is on the understanding of discrete objects within the context of relationship. Without abandoning any understanding of the self that we gained from more atomistic investigations, we now view the relationship as the central unit of analysis" (ibid:142).

The Locus of Therapy and the Focus of Therapy

Both Imago and psychodrama work with the psyche to bring a person to new consciousness and new ways of being. In this, they have a similar *focus*. Psychodrama is more varied in its *locus*⁵. Group, individual, family and couple are all possible as points of entry into the dramas of the unconscious, whereas Imago specialises in dyadic work. Its locus of therapy is the relationship.

It is interesting to note that Moreno did see a place for the conjoint work, outside of group or individual therapy. In fact he was a pioneer of this idea, seeing it as especially important when there was a co-unconscious. "Forms of treatment are necessary which are able to reach the interpersonal syndromes as deeply, if not more so, than it would a single person. Interpersonal therapy represents a special category; it might well be classified apart from individual and group psychotherapy" (Moreno, 1975:45).

Dialogue and Psychodrama

Looking through the psychodrama lens, I notice much of the dialogue work I do with couples is assisted by my psychodrama experience. I coach specific skills that a couple needs to create a dialogue. But the word skill does not quite capture the essence of the work. The psychodramatic concept of role assists, and so do many psychodrama techniques.

What are the roles a person enacts during a dialogue? That is a useful question! Many of the role dynamics that are difficult in the relationship may also be present in a dialogue. For example, one partner in a couple may despair that nothing will make any difference or be afraid of losing identity. They may comply with the dialogue form, but remain in a conflicted state as they go through the motions in a fragmented, aggressive or coping way. I engage with each of the partners. I coach them to be with one another in a new way, and this often involves doubling, original social atom explorations and role reversal. Here is an example.

Relationship Psychotherapy Example with Annie and Frank

Frank and Annie have heard about Imago from a friend in another part of the country. They have read some self-help books about the process and have come to see me because they have not succeeded in doing this on their own.

In an early dialogue with Annie as sender and Frank as receiver.

Annie *in a critical, pained voice . . .* We are so different. I think you waste the opportunity we have in our dialogues by talking about our plans for the renovations.

Frank *raises his eyebrows, sighs, bored and in a sarcastic tone . . .* You think we are different, and that I waste the opportunity of these dialogues.

Annie *annoyed . . .* See, you don't really listen. You are too critical.

I invite the couple to move to an observer position as I mirror back to them what I saw, emphasising accusatory aspects.

Frank to Frank You are not listening. You are fighting.

Through some role reversals with himself and discussion between the three of us, Frank encourages himself to be an 'absorbed reader'. This is a role he knows well, someone who forgets everything except the unfolding moment. Annie, in turn, makes a connection with herself as her own best friend. She strengthens her commitment to hang in there with herself in a caring and encouraging way. The dialogue continues.

Annie *after a pause, a reflective breath . . .* I am scared you judge my feelings as wrong. I think you wouldn't do this if you could be more in touch with your feelings.

Frank *leaning forward, smiles slightly . . .* Let me see if I have got the plot. If you saw me get in touch with my feelings more you would feel safer to have yours.

Relational Thinking

Imago has sharpened my perception of the interlocking dynamics in a committed, sacred, loving relationship. When the focus is on the client's relationship, individual psychotherapy is better done with the partner present. I go a step further. If the person is in a committed, sacred, loving relationship, healing of the damaged psyche is more effective if the work is done in couple therapy. The natural healing potential of the relationship dynamics can foster that process, whereas individual psychotherapy can frustrate it. I see the relationship as an entity, with its own life, identity and co-unconscious. Where possible, I will always engage both partners.

Relationship Psychotherapy with Mary and John

A new client, Mary, phones me to make an appointment. What follows is an abbreviated summary.

Mary I would like to make a time to see you. I have been depressed and medication is not helping much. I am losing my self-esteem. My husband thinks I should change my job, but I know that is not going to help. I like my job, but I do get stressed. He just puts more pressure on me. Then I feel distant from him and that makes things worse.

Walter Would you be willing to do couple therapy?

Mary I would like that but he won't come. I have asked him. I told him my biggest problem is his blasting me with his opinions all the time.

Walter The relationship is difficult, and this is central to what you are bringing to the therapy. . .

Mary Yes

Walter I think it would be a good idea if I work with you both. How about I give John a call?

John is willing to do relationship therapy. I imagine my invitation is more appealing than the invitations made by his wife. When I speak to each of them on the phone, I am thinking of the relationship as the client. I have the sense of being a director on a psychodrama stage with the wife and husband already present. She has brought the relationship to therapy. The relationship has provoked her to do so.

My knowledge that they are married gives me the legitimacy to treat John and Mary as one entity. Somewhere along the line, they have created a covenant⁶ at the heart of their union. I would not have taken this path had the 'other' been a friend, family member or co-worker. As with psychodrama, Imago sees the loving, primary relationship entity as qualitatively different from other relationships. The underlying idea that there is a co-created entity with its own life is well put by Moreno.

A co-conscious or a co-unconscious state can not be the property of one individual only. It is always a common property and cannot be reproduced but by a combined effort. If a re-enactment of such co-conscious or co-unconscious state is desired or necessary, that re-enactment has to take place with the help of all partners. . . . However great a genius of perception one partner of the ensemble might have, he or she can not produce that episode alone because they have in common their co-conscious and co-unconscious states which are the matrix from which they drew their inspiration and knowledge.

Moreno, 1977:VII

Moreno calls the conjoint work interpersonal therapy, and for some cases he sees it as essential. He may involve more people than the couple, so he does not embrace the relational paradigm in the way that Imago does. However, Moreno is clear that there are potent dynamics that require conjoint work. Using auxiliaries in re-enactment when the partner is not present is not always enough. The following example, from individual therapy with a couple, illustrates how the other party is needed for the full dynamics to be explored. Let us go to a moment in the third session in the relationship therapy with Mary and John.

Mary and John: Session 3

The couple has learned to take turns, and take time to make sense of one another before responding. John listened carefully to Mary who has spoken in depth, and without blame or criticism of John. She has related current feelings to experiences in childhood. As a young girl, she feared rejection by her father if she brought home a poor report from school.

John has made a good summary. I invite him, as the listener, to step into Mary's shoes and let her know what sense he is making of what she has expressed.

John I can see how when you were a girl you would be afraid of your father. He

had a strong will and you were under a lot of pressure to succeed.
 Mary *nods*
 John And you hid your fear and felt lonely.
 Mary Yes ... *tears begin to flow* ...
 John I imagine you are pleased that I don't expect you to achieve at work, and
 that I can see you are stressed.
 Mary No!

Mary goes on to explain, with some distress, that she feels both scared and lonely in the relationship. This, she makes clear, is not because she is expected to achieve, but because John has all sorts of plans he thinks will do her good. They sound reasonable, but she does not want to do them.

John is able to contain his distress so that he can continue to listen to Mary and successfully step into her shoes.

John You feel under pressure in our relationship. You go inside and say nothing,
 but you feel alone.
 Mary Yes.

It is clear from this example that John, though capable, is no 'genius of perception' to quote from Moreno in the passage above. He would not have been able to produce an accurate enactment or presentation of this relationship without Mary correcting his perceptions of her.

Relationship as Protagonist

What then when a psychodrama group is tackling relationship questions? On occasions we work conjointly with couples. I like to think of it as working with the group's 'protagonist relationship'. A video of Moreno (1964) working with a couple in a psychodramatic way, accessible via the internet on YouTube, makes instructive viewing.

Psychodrama Group Example

In a recent group we explored working with relationships. The group did not contain couples as such, but some of the participants knew one another in depth. We focussed on a relationship being an entity with its own life. A relationship was found to be the protagonist for the group in the following way.

A group theme had emerged during the warm up - being yourself in a relationship, without losing yourself or damaging the relationship.

Director Invite another person to explore the relationship dynamics that exist
 between you. If they accept the invitation, then yours is potentially a
 protagonist relationship for this group.

Several invitations were made and declined, each attempt revealing more about the depth of the group theme. Two invitations were accepted. A sociogram revealed which of these relationships was of most interest to the group, and a drama involving dialogue and psychodramatic enactment followed.

Encounter

Psychodrama and Imago have common roots in that they embrace the idea of encounter and the I–Thou relationship. The experience of Imago dialogue in my own marriage and with my clients, has led to a deeper interest in the story of encounter and dialogue as presented by Martin Buber (2004) and J.L. Moreno. There is no doubt that the origins of encounter and I–Thou can be found in religious traditions. Both Buber and Moreno were influenced by Hasidic Judaism. As a young man, Moreno articulated and invited people to an encounter. It appears that he published his ideas earlier than Martin Buber⁷. I have explored other branches of the dialogue tradition, notably David Bohm (1996), Marshal Rosenberg's *Non-Violent Communication: A Language of Life* (2003), and Jim Rough's 'Dynamic Facilitation' as described in an excellent manual by Rosa Zubizarreta (2006). These forms have all contributed to my practice in couple psychotherapy and I wish to acknowledge them here.

At their heart, both Moreno's and Hendrix's work go beyond technique and are an invitation to a profound experience. The aim of a dialogue is not a specific outcome, nor is it reliant on one method. Here is the section of Moreno's well known poem that encapsulates the idea of encounter.

*A meeting of two: eye to eye, face to face.
And when you are near I will tear your eyes out
and place them instead of mine,
and you will tear my eyes out
and will place them instead of yours,
then I will look at you with your eyes
and you will look at me with mine.⁸*

Moreno 1977:1

Harville Hendrix introduced the validation step into the Imago structure with an eye to facilitating just such an experience. It is often taught as understanding or making sense. The lead-in line usually goes like this "You make sense. And one thing that makes sense is..." The listener is invited to cross a bridge into the world of the other, and to see what they see, and feel what they feel in that world. Note the similarity to Moreno in Hendrix's idea.

Buber clarified for me that a "Thou" relationship with others required honoring their

“otherness” as an “I” distinct from me and any concepts I might have of them. This required a willingness to look at the world of another through his or her eyes.

Hendrix, 2005a:27

Psychodramatic practice can facilitate the validation. While enacting the role of the other in a psychodrama, judgment is suspended. Validation is different to role reversal though, because it includes a *response* from the other. Psychodramatically, validation is facilitated through role reversal, and there is another step too.

“I will look at you with your eyes. . . .”

Mary and John: Session 4

Mary has just listened to her husband and makes an adequate summary.

Mary You are irritated when I am so busy with work and when I spend the weekend socialising with family and friends. You want more time for us to be together, just the two of us. Last weekend with my parents you felt particularly constrained.

She continues to the validation step.

Mary You make sense. What makes sense is that you want me to give up what is important for me and to do what you want.

John Ah no. Not at all. That is not it.

Walter Mary, I imagine you fear you will lose your freedom. Save that for your turn. Step into his world. Become engrossed in it. Imagine his experience. What it is like to be John in various situations?

With some guidance, Mary uses cushions to create a scene with her parents and herself. She steps into that scene as John.

Mary *as John, takes some time, and addresses ‘Mary’* . . . I lose the connection I have with you. I can’t find you in the busy week and family flurry. I yearn for our intimacy.

Mary *back in her own chair and as herself to John* . . . You are lonely even in our times together. You want to be close, connected, and you are stuck. You don’t know how to break through the social clutter.

John Yes. Yes, that is it exactly.

Mary *as they look at one another* . . . That makes sense. I miss our connection too. I imagine you feel sad.

Mary and John have created a moment of encounter.

End of the Affair?

I recall a period in my life of professional promiscuity. It lasted about a year. I went to TA, Gestalt, NLP and other training workshops. My supervisor suggested that one would be right for me and I would know it. He was right. I made conscious decisions to complete psychodrama training at my first workshop in Hanmer Springs in 1980. I fully embraced the psychodrama method. It appealed. I was in love. I certainly have a relationship with psychodrama in the broadest sense. As a practice, a theory, and as a movement in the world it is the one I am most connected to. But am I married to it?

Imago construes marital affairs as exits from the relationship. Partners co-create ways of avoiding the painful wounds that intimacy reveals. If the underlying dynamics of the affair can be worked through, it will deeply enrich the marriage. Both partners will change. If I am married to psychodrama I have not had an affair at all! I have not exited from my relationship. In writing this article, I have experienced a dialogue between the psychodramatist and the Imago Therapist within me. Psychodrama is enriched with my knowledge of the power of the relationship, the *Imago Match*, and the thoughtful, practical steps to create dialogue. Imago sessions are easier to conduct within the frame of my psychodramatic knowledge of warm up, role training, doubling and other forms of enactment.

Conclusion

My new perspective does not see the two modes, Psychodrama Interpersonal Therapy and Imago Relationship Therapy as symmetrical. I tend to integrate Imago learning into psychodrama rather than the other way around. This is not to diminish Imago. It is a fully fledged theory of psychodynamics, and includes perspectives on human development and on the structures of personality.

The reason for my sense of asymmetry may be due to my having fallen in love so long ago, and having the psychodrama method with me most of my life. I see a picture. The curtains open on a stage. Anything is possible. On the stage the two modalities and their founders come alive. We can explore the details of their practice, their histories and futures together on the stage. Right now I would like to explore how we can develop relationship therapy beyond what we know today. I think we can use the psychodrama process to expand and to enrich the method, to explore possibilities and to consciously learn and evolve.

END NOTES

1. I have made a small change to the original to make it gender inclusive.
2. Theo Compernelle (1981) wrote *J.L. Moreno: An Unrecognised Pioneer of Family Therapy* and the abstract is worth noting. "J.L. Moreno's fundamental and pioneering contributions to the development of

group therapy, encounter, transactional analysis, and especially Psychodrama are well known. However, most family therapists seem unacquainted with the fact that from his earliest writings in 1923 J.L. Moreno developed an interactional view of psychotherapy that in 1973 already resulted in formulations of a true systems orientation and very concrete ideas about marital therapy, family therapy, and network therapy. He probably is the first (1937!) therapist that actually involved a husband's lover in conjoint marital therapy. His general theoretical formulations about the pathology of interpersonal relations as well as his practical suggestions for the therapy of the interpersonal relations seem to be insufficiently known to workers and researchers in the field of family therapy" (p 331).

3. See an engaging description online by Dawn J. Liphthrott, 2009.
4. I say committed, sacred, loving relationship because the term marriage is inaccurate and I can find no other suitable word. Relationship therapy applies to de facto marriages and to people who refuse marriage, so as to exclude the state and/or the church from their union. Gay people are often excluded by the state and the church from being able to marry. Later in this essay, I may use the term relationship. I trust the full meaning is evident from the context.
5. Locus of therapy is a term used by Moreno to refer to what has also been called the unit of analysis (Luquet, 2005:2). Here is a passage from *Psychodrama Third Volume*. "The change in locus of therapy ... means literally a revolution in what was always considered appropriate medical practice. Husband and wife, mother and child, are treated as a combine, often facing one another and not separate (because separate from one another they may not have any tangible mental ailment)" (Moreno & Moreno, 1975:316).
6. Helen LaKelly Hunt (2005) has written a useful essay discussing the distinction between a contract and a covenant. Marriage includes a covenant. She highlights the difference in this way "covenants are not broken; they are violated . . . The indissolubility of two people in a covenantal relationship suggests a permanence of connection that endures through struggle. It suggests that no matter how either person in the covenant behaves, their undying bond is 'for better or worse, till death do us part'" (p48).
7. Zerka Moreno (2007:6) published an item 'Moreno's Influence on Martin Buber' in the *Psychodrama Network News*. She highlighted the importance of Psychodrama as a means of creating encounter. The opening paragraph follows. "Dr. Robert Waldl from Vienna, who presented at both the New York and Miami conferences, has discovered that J.L. Moreno influenced Martin Buber in his ideas of The Encounter. Moreno started his publications from 1914 onwards under the title series *Einladung zu einer Begegnung*, or *Invitations to an Encounter*, predating Buber's *Ich und Du*, or *I and Thou* by nine years. Dr. Waldl is planning to publish his PhD thesis in German and we hope for an English translation in the not too distant future. The significance of this discovery cannot be overestimated considering Buber's influence on philosophy, theology and psychology. While it is true that Buber broadened the idea of The Encounter, he did not create instruments for it to occur. Moreno literally invited such meetings and furthermore, produced the various instruments we now use to facilitate the human encounter, sociometry, group psychotherapy, psychodrama, sociodrama".
8. Translated from *Einladung zu einer Begegnung* by J.L. Moreno.

REFERENCES

- Bohm, D. (1996). *On Dialogue*. Routledge, New York.
- Buber, M. (2004). *I and Thou*. Continuum, London & New York. (Original Copyright 1923.)
- Compernelle, T. (1981). J.L. Moreno: An Unrecognised Pioneer of Family Therapy. *Family Process* 20(3).
- Fowler, R. (1994). Dr. J.L. Moreno - Marriage Therapist. *ANZPA Journal* 3.
- Hendrix, H. (1999, 2006). An Introduction to Imago. Imago Relationships International. Accessed at <http://www.GettingTheLoveYouWant.com>
- Hendrix, H. (ed.) (2005). *Imago Relationship Therapy: Perspectives on Theory*. Jossey-Bass, San Francisco.
- Hendrix, H. (2005a). The Evolution of Imago Relationship Therapy: A Personal and Professional Journey. In Hendrix, H. (ed.) *Imago Relationship Therapy: Perspectives on Theory*. Jossey-Bass, San Francisco.
- Hunt, H.L. (2005). Conscious Marriage as a Covenant. In Hendrix, H. (ed.) *Imago Relationship Therapy: Perspectives on Theory*. Jossey-Bass, San Francisco.
- Kollman, M. (1998). The Path to Wholeness: Imago Relationship Therapy as a Means to Help Couples Heal and Grow. Accessed at <http://www.davidtaratuta.com/imago.php>
- Lipthrott, D.J. (2009). Intentional Dialogue. Accessed at <http://www.relationshipjourney.com/dialoguetipsdawn.html>
- Luquet, W. (2005). A Theory of Relationally. In Hendrix, H. (ed.) *Imago Relationship Therapy: Perspectives on Theory*. Jossey-Bass, San Francisco.
- Mason, R.C. (2005). Imago, Relationships, and Empathy. In Hendrix, H. (ed.) *Imago Relationship Therapy: Perspectives on Theory*. Jossey-Bass, San Francisco.
- Moreno, J.L. (1953). *Who Shall Survive? Foundations of Sociometry, Group Psychotherapy and Sociodrama*. Beacon House, Beacon, New York.
- Moreno, J.L. (1964). Psychodrama of a Marriage. Filmed in Paris during the First International Congress of Psychodrama. Online video clip, YouTube, 2009. Accessed at <http://www.youtube.com/watch?v=zvgnOVfLn4k>
- Moreno, J.L. (1977). *Psychodrama First Volume* (4th edition). Beacon House, Beacon, New York.
- Moreno, J.L. & Moreno, Z.T. (1959/1975). *Psychodrama Second Volume: Foundations of Psychotherapy* (Second Printing). Beacon House, Beacon, New York.
- Moreno, Z. (2007). Moreno's Influence on Martin Buber. *Psychodrama Network News Winter*. American Society of Group Psychotherapy and Psychodrama. Accessed at <http://www.asgpp.org/docs/PNNWinter07.pdf>
- Rosenberg, M.B. (2003). *Non-Violent Communication: A Language of Life* (2nd edition). Puddledancer Press, Encinitas, California.
- Rough, J. (2006). Dynamic Facilitation. In Zubizarreta, R. *Dynamic Facilitation Manual*. Accessed at <http://www.co-intelligence.org/DFManual.html>
- Zubizarreta, R. (2006). *Dynamic Facilitation Manual*. Accessed at <http://www.co-intelligence.org/DFManual.html>



Walter Logeman is a Psychodrama Trainer Educator and Practitioner in Training (TEPIT), and Psychotherapist living and working in Christchurch. He is interested in walking, art, the Internet, ideas and most of all anything to do with the psyche. In 2009 Walter joined the Christchurch Institute for Training in Psychodrama (CITP) teaching staff, and is conducting workshops in psychodrama and supervision practice. Walter can be reached at walter@psybernet.co.nz

Psychotherapist in Search of a Psychodrama Stage

PROJECTION SPACES AS ACTION STAGES

NEIL HUCKER

ABSTRACT

This paper elaborates six mental projection spaces of the mind (Hucker, 2006) that can be viewed as psychodramatic action stages, upon which the content of the imagination can be projected, differentially concretised and modifications of the psychodrama method applied. The application of these projection spaces will be illustrated via the description of an individual psychotherapy session. In this session, the mental projection spaces are worked with *as if* the therapy was being enacted psychodramatically on a psychodrama stage.

KEY WORDS

action stage, imagination, individual psychotherapy, projection, projection space, psychodrama

*All the world's a stage,
And all the men and women merely players;
They have their exits and their entrances,
And one man in his time plays many parts,
His acts being seven ages. . .*

William Shakespeare
As You Like It Act 2, Scene 7

Introduction

J.L. Moreno (1977) pioneered the use of group therapy as an extension of individual psychotherapy. As well, he included a person's actions as an important component of the therapy process. The inclusion of action led to the development of dramatic interactive role playing on a stage, the psychodrama. In a psychodrama session, group members acting as auxiliary egos act out the roles of significant others in simulated and created scenes.

In my psychotherapeutic work as a psychiatrist, I predominantly work with people in individual psychotherapy. This individual psychotherapeutic work contrasts with my psychodrama training. This mainly took place in groups, where I learnt how to direct psychodramatic group therapy. My experience of the valuable outcomes created by applying the psychodramatic method in training groups and therapy groups has continually warmed me up to explore the applications of its principles in individual psychotherapy.

In a group psychodrama, auxiliaries can create with the protagonist such an involved interaction that the 'as-if' surplus reality merges with objective reality (Moreno & Moreno, 1975:10). For example, an auxiliary who is role playing a mother is related to by the protagonist as if she is the real mother in the here and now moment. As there are no group members in individual therapy settings to enact a person's projections, the therapist can play auxiliary roles. A closer approximation of a group psychodrama can then be produced. In individual sessions, even without the benefit of auxiliaries, I am always amazed by how realistic and involved the interaction seems to be between a protagonist and an imagined other person in an empty chair. Even without role reversal, a very involved meaningful encounter can be experienced with a projected, non-concretised imaginary other person.

My psychotherapy experience over the years eventually led me, in one epiphanous spontaneous moment, to view the process of a psychodrama session as progressing through a number of mental projection spaces - the private projection space of the mind, the shared communication space, the receiver's private communication space, the empty space, the concretised space and the role reversal space (Hucker, 2006). This new paradigm led me to think that if a person can engage with the imagery of a remembered scene out in the empty space of the psychodrama stage, before any enacted role reversal happens, then any space that a scene can be imagined in can be viewed as a psychodrama stage.

To test the hypothesis that the psychodrama method could be applied in any of these mental projection spaces, I applied it in the subjective, private imagination of the mind. The results of this work (Hucker, 2006) indicated that the psychodrama method could be adapted and utilised even in this most non-concrete of mental projection spaces. An 'imaginary psychodrama' could be produced. Three criteria were used to assess whether the application on this 'other' stage was psychodramatic - a high level of involvement in the interactive experience, the warm up to a spontaneity state and the creation of progressive role development.

I have undertaken further work to explore how the psychodrama method can be applied in the other mental projection spaces. I will describe the six spaces and discuss

how, if seen as psychodrama stages, modifications of the psychodramatic method can be applied. I will then describe and discuss a particular individual psychotherapy session wherein these six mental projection spaces were utilised.

The Projection Spaces

As discussed above, there are six identifiable mental projection spaces that a protagonist progresses through during a group psychodrama session. For the purposes of this paper, I am using the term projection to denote the process whereby a person's experience is transformed and put into a representational form (Hucker, 2006). For example, when a memory of a past scene emerges as a visual image in the imagination it can then be put into another representational form such as verbal language. The six mental projection spaces are as follows.

1. The Private Projection Space of the Mind

This space is entered into when a person is asked to bring to mind a remembered scene, to experience it, but not to describe its contents out aloud. The director will usually say "Bring to mind a scene where this theme occurred". Commonly, this remembered imagery is held within the boundaries of the head and the physical body but depending on the warm up, the space may extend out into the area surrounding the body. This imagined scene could be thought of as the first concretised representation of the protagonist's experience.

2. The Shared Communication Space

This space is used when the imagery of a remembered scene is converted into verbal and nonverbal language and communicated through role behaviour to the listening receiver. Within this space, the experience of the describer is transferred and then begins to be internalised, transformed and responded to by the receiver. This experience can occur in both the individual and the group psychodrama setting.

In this space, the language and role behaviour become the second concretisation of the remembered scene. The transmission of one person's experience over the telephone to another is a purer example of verbal language concretisation in this space.

3. The Receiver's Private Imagination Space

As a person describes to another their remembered experience and imagery, the receiver creates a mirror image in their own private imagination space. When a group member describes a remembered scene to other group members, who then interact to seek clarity, this space is emerging and being entered into. Within their own private imagination space, the receiver will also be reacting to the image they are creating. The more the describer projects the remembered imagery into language, and the receiver and describer mirror and double one another through language and role behaviour, the greater the potential for congruence in the two images and experiences.

4. The Empty Space

This space is defined as any area outside the physical body unoccupied by a physical object. The psychodrama stage upon which anything can be imagined is an example of this empty space. Here the director asks the protagonist to look out into the stage space and imagine the remembered scene. With an adequate warm up, the protagonist will begin to perceive this empty space as filled with the projected mental imagery. The physical eye and the mind's eye will dance together to produce in this physically empty space the surplus reality magic that can be produced and experienced on the psychodrama stage. Everything that is projected as a remembered scene is itself a surplus reality that the director and the protagonist imagine on the stage. The person's verbal description and the visual imagery projected and perceived out on the stage, are the concretisations of experience in this space.

5. The Concretised Space

In psychodrama group therapy, the term concretisation usually refers to the use of concrete representational objects with which a protagonist interacts. This space has been entered once objects or group members are used to concretise or personify the imagined scene out on the psychodrama stage, and the protagonist has warmed up to experiencing and interacting with them. In this space, the protagonist experiences the auxiliary or an object as the imagined other and relates to them before any role taking or role reversal occurs. The auxiliary or object become the screen upon which the remembered images are projected, and this continues the warm up to surplus reality. The protagonist's warm up is thus deepened through sensing and physically engaging with this concrete person or physical object.

6. The Role Reversal Space

It is in this space that role reversal, one of Moreno's central predictions for personal and social health, finds its fullest expression. "The protagonist must learn to take the role of all those with whom he is meaningfully related, to experience those persons in his social atom, their relationship to him and to one another" (Moreno & Moreno, 1975:238).

Interaction and role reversal with every relevant thing and person in a produced scene is central to the intense involvement in a psychodrama. This creates for the protagonist the experienced reality in the surplus reality. Moreno's psychodrama method was developed to produce and work with these two realities. "But there is a theatre in which reality or being is proven through illusion, one which restores the original unity between the two meta-zones through a process of humorous self reflection; in the therapeutic theatre reality and illusion are one" (Moreno, 1977:27). The use of auxiliaries maximises this interactive engagement so that the protagonist experiences the replaying of a remembered scene in a new, fresh and spontaneous way.

As stated in the 'Technique of Self Presentation' (Moreno, 1977:184), the protagonist can take up the roles of himself and the imagined others in the remembered scene he describes. In a group psychodrama an auxiliary can occupy the empty space where the protagonist has placed and/or played out the imagined other. A series of role reversing

interactions warms up the protagonist and auxiliaries to a specific role relationship experience. As the relevant systemic sociometric interactions emerge, the Canon of Creativity (Moreno, 1978:46) unfolds. There is a shift into a surplus reality encounter that enables social atom repair and creative role development.

In this role reversal projection space, the protagonist projects an image of another into the empty space of the psychodrama stage. The director then assists the protagonist to embody and take on the role of the projected image. Initially the protagonist experiences themselves in the shoes of the other, and then gradually comes to experience the role of the imagined other and 'being the other' in their shoes. The protagonist's internal remembered experience is thus projected, concretised and replayed in maximised surplus reality. It is this role reversal that ensures that all the projections are fully embodied, personalised and experienced (Moreno, 1978:85).

These six mental projection spaces, to a variable degree, are all progressed through, re-used and creatively combined in any full psychodramatic production.

Group Psychodrama Principles

There are some general principles in the production of a group psychodrama session that would need to be approximated in an individual psychotherapy session to say it was being dealt with psychodramatically. During a psychodrama session the director as producer, systems analyst and clinician aims to create for the group a sequence of warm up, enactment, integration and sharing (Blatner, 1973; Clayton, 1991; Hollander, 1978; Moreno, 1977). To highlight some of these principles, a brief description of a generic group psychodrama session is presented. It is taken from a remembered social relationship scene.

A protagonist emerges from the warm up phase, ideally with a concern that is representative of the central theme of the group. The director - producer then undertakes a more detailed interview with the protagonist to increase the warm up to an agreed upon focus and purpose for the psychodramatic work. The protagonist is then invited to imagine a beginning scene relevant to the concern, and to project it out onto the empty space of the psychodrama stage.

The director, with the aid of auxiliary group members and the full range of psychodramatic techniques, warms the protagonist up to engage with the imagined people in the scene on the stage. A maximised replaying of remembered scenes is produced. The protagonist warms up to a spontaneity state where a new, adequate response is created to deal with the conserved, problematic role relationship encapsulated in the original concern (Moreno, 1978:42). During the enactment phase a catharsis of abreaction and integration is achieved, as well as a testing of the new role response. In the final phase, all of the group members are invited to share their personal experiences of the session with the protagonist. The particular work and stage of the group process will influence the content of following sessions.

In individual psychotherapy sessions, I apply these psychodramatic principles using

the six projection spaces. To illustrate, I will present a modified version of a recent session. The description has been modified to respect confidentiality, and the protagonist renamed as Sue.

Application of the Projection Spaces in an Individual Psychotherapy Session

This particular session was one of a series that I conducted with Sue, a middle aged woman whom I was seeing in brief individual therapy. Her concerns focused on her ability to be free to decide her own future.

The Private Projection Space of the Mind

At the start of the session, Sue tells me that she has recently purchased a new property in the country. Her decision to do this is very important to her, but she puzzles over why this is the case. After some discussion, we agree to psychotherapeutically explore her reasoning. I suggest that, for a few minutes, she picture the property in her mind in silence. Her eyes defocus and she appears absorbed in her thoughts. I then suggest that she imagines walking over the property, and experiencing what she is thinking and feeling as she explores it. Again her eyes defocus and she appears internally absorbed. After some minutes I ask her to describe what is happening.

The Shared Communication Space

Sue describes her recent visit to the property with ease, its many loved features, the clean up that she envisages, and her satisfaction with the positive tele she experienced while interviewing a prospective landscape gardener. As a naïve inquirer, I ask many questions. Sue warms up to providing a very detailed description of her property, those things that she likes and dislikes, and those that she wants to change. I mirror back her words, feelings and plans, and I maximise the joy and excitement that she is experiencing.

The Receiver's Private Imagination Space

As the session proceeds I am observing Sue in the here and now as she describes the scene, as well as seeing with my mind's eye an expanding video picture of her property and her walk around it. At a particular point, she is actively talking to me and maintaining intense eye contact. Her passionate delight in her property is palpable. I am enjoying the tour myself and I am wondering where she will go next. I spontaneously make a doubling comment. "It seems important to you that you are able to freely enjoy this place". Immediately she experiences a profound catharsis and cries. She is surprised and says repeatedly "Where is this coming from?" I respond "I am not sure". As her weeping subsides, I notice that she is staring at the floor in front of her and to my left side. I inquire "What are you looking at Sue?"

The Empty Space

Sue looks at the floor in front of her and says that she is seeing a flowerbed at the new

property. She describes all the beautiful flowers that she can see and smell. She starts to weep softly in a longing kind of way, as though she is regaining something important that has been lost. I imagine the flowerbed there in front of her and ask "What does it bring to mind?" She suddenly sits up and begins to describe a beautiful garden out in the country, where she used to play when she was very little. She explains how happy she was playing in that garden on her own, while her parents worked nearby on their farm.

At this point Sue appears to be experiencing the remembered scene within her internal private space and the empty space, as if she is there. Because she is fully warmed up to experiencing her memory and sharing it, I decide that it is not necessary to concretise and enact the scene. Sue weeps again, remembering how her parents had sent her away at the age of five to a church home for five weeks because bush fires were threatening their property. She cannot remember the church home, but she does remember the lack of contact with her parents whilst there. Things were different when she returned home, and she did not feel close to her parents again. Some years later she and her family left the area.

The Role Reversal Space

I ask Sue to describe her parents, what they were like, how they responded to her, and what she imagined their experience was of the fire and sending her away. As she warms up to imagining their experience, she starts to speak more warmly about them. She sees that, like them, she probably would have taken similar action in the same circumstances. However, she also expresses her anger at them for not staying in contact with her. She lists other actions they might have taken, had they considered her feelings more adequately.

Eventually she becomes calm. I say "I wonder if the importance of your new property and garden is about you reclaiming your lost garden and lost happiness?" She laughs and agrees, and then silently contemplates the space where she had envisaged her new garden. I silently wait until she re-engages with me. I then suggest she bring herself back into the here and now room. I comment on the importance of coming out of the imaginary reality of the empty psychodrama space, and letting the projected scenes be taken back into self, into the internal private space.

As we sit facing one another I share with her a story from my childhood - how I played cowboys and Indians in the backyard. I realise that the size differential of little-me in the backyard was probably not that different to grownup-me, playing around on a property I had bought as an adult.

It is time to finish the session. Sue, now fully back in the real here and now, expresses her amazement at what has taken place, at what she has experienced. She leaves the session, expressing her impatience to return to her new property.

Discussion

The discussion will focus on the following three areas - the projection spaces, concretisation and action versus non-action spontaneity.

The Projection Spaces

Each of the projection spaces highlighted in the illustrative session can be used to produce a complete piece of psychotherapeutic work. These spaces can be seen as different action stages within which the whole curve of the psychodramatic process can be simulated. They are used as part of the warm up sequence in a fully enacted group psychodrama session. Each moment in a psychodramatic sequence is a warm up to the next moment.

Throughout a psychodrama session the director continually makes intervention choices based on the negotiated contract with the protagonist, and the particular warm up that emerges in any moment. In the session described above, the protagonist warmed up quickly to the remembered scene. She saw the garden in front of her. An almost immediate catharsis of abreaction occurred, indicating the significance of the new garden for her. At this time she did not know the connection between the scene, her feelings and our purpose, and nor did I.

I decided not to move from warm up to enactment, which would have taken the production out onto the action stage. Instead I chose to continue in the shared communication space and the empty space. My reasoning was focused on time constraints and the fact that no prior agreement had been reached regarding the use of role play action. Nevertheless, I continued to facilitate the warm up *as if* I was directing a classical psychodrama.

The protagonist then spontaneously visualised the next remembered scene. She described her experience as it emerged. This situation is similar to the use of the aside, the self-mirror position and multiple self-doubling in a group psychodrama. The protagonist steps aside from a direct interaction and progresses with verbal sharing.

I was able to bring my psychodrama experience to bear on the work because I was viewing all the projection spaces in this session as mental and physical action stages.

Concretisation

Through my view of these mental projection spaces as psychodramatic action stages, I have been motivated to expand the use of the term concretisation. In general, concretisation means the production of an experience in a form that can be engaged with physically by the self and others. An auxiliary interacting with a protagonist from the role of a remembered other is a standard form of concretisation. Rather than thinking of it as this kind of transformation of an experience or role into a physical form, I see it increasingly as the conversion of experience into something more definite in all the projection spaces. When a personal experience, such as a memory, becomes represented in any form that can be sensed, it can be said to be concretised.

For example, in the individual psychotherapy session the protagonist remained in the spaces where she was remembering, re-experiencing, describing and expressing herself. It was with these definite experienced forms that she and I engaged and interacted. I use the term engagement as well as interaction to make a distinction between a psychodramatically imagined scene and a psychodramatically enacted scene. The six

projection spaces can be worked with in a much fuller psychodramatic way when the concept of concretisation is thought of in this way.

Action Versus Non-Action Spontaneity

Finally, I would like to comment on how action insight relates to these other spaces. Moreno stated that the production of “action insight” through “acting from within, or acting out” is a necessary phase in a psychodrama (Moreno, 1977:x). I use action insight as my benchmark for the optimum spontaneity and role development created within a group psychodrama. However created though, a thoughtful insight is a major component of a spontaneous creative moment. In the illustrative session, there was a rapid progression from the first scene to the catharsis related to the remembered childhood scenes. Here, the protagonist was struck by the probable (one can never really know exactly) origins of her feelings of sadness and her act hunger for a return to the secure joy of the bush and garden.

In the session, the protagonist was able to mentally travel between the here and now in the therapy room where she was imagining herself at the new property, and a non-enacted state of surplus reality where she experienced her joyful and painful childhood memories. The importance of the early separation became apparent to her, and through experiencing her sadness, anger and joy she was able to thoughtfully reverse roles with her parents. This led to genuine social atom repair. The action centred on entering into the experience of the remembered and wished for roles, as if it was actually being enacted. The cognitive insight was achieved by discovering a meaningful connection between the past and the present, through intense experience in the here and now.

I brought many years of clinical doubling and mirroring experience, plus my own personal experiences, to create a spontaneous, integrative intervention. The protagonist had answered her original question quite adequately by the end of the session. She will need to practise the progressive role development and integration achieved in the session, out in action in the world. The role test indicates how adequately the desired role development is being achieved. Is the person doing things differently, both mentally and physically, in their day to day life? Has their role repertoire changed and progressed?

Concluding Remarks

The work described in this paper is part of an ongoing creative journey of mine. It is particularly related to practising individual psychotherapy. More generally though, a major inspiration for the work is to bring greater spontaneity to the ways that the psychodrama method can be applied and adapted in the many places in which we live and experience ourselves.

REFERENCES

- Blatner, H.A. (1973). *Acting-In*. Springer Publishing Company, New York.
- Clayton, G. M. (1991). *Directing Psychodrama: A Training Companion*. ICA Press, Melbourne.
- Hollander, C. E. (1978). *The Process for Psychodrama Training: The Hollander Psychodrama Curve*. Monograph. Snow Lion Press, Denver, Colorado.
- Hucker, N.E. (2006). *Psychodrama through the Mind's Eye*. ANZPA Psychodrama Certification Thesis.
- Moreno, J.L. (1934, 1953, 1978). *Who Shall Survive?* Beacon House, Beacon, New York.
- Moreno, J.L. (1977). *Psychodrama First Volume* (4th edition). Beacon House, Beacon, New York.
- Moreno, J.L. & Moreno, Z.T. (1975). *Psychodrama Third Volume: Action Therapy & Principles of Practice*. Beacon House, Beacon, New York.
- Shakespeare, W. (1980). As You Like It in Wilson, J.D. (ed.) *The Complete Works Of William Shakespeare* (pp139-142). Cambridge University Press and Octopus Books, London.



Neil Hucker (MBBS, FRANZCP) is a Consultant Psychiatrist and Psychodramatist working in private practice in Melbourne. He can be contacted at eddy1@labyrinth.net.au

A Vital and Relevant Life

A MORENIAN APPROACH IN PALLIATIVE CARE

VIVIENNE PENDER

ABSTRACT

Moreno's philosophy is considered within the context of palliative care, specifically a Swedish model which illuminates a way of being when a family member is dying. Several examples drawn from hospice experience are described within a framework encompassing Moreno's role theory and the continua of the Swedish model, affinity-isolation, power-powerlessness and continuity-disruption.

KEY WORDS

continua, affinity-isolation, power-powerlessness, continuity-disruption, hospice, Moreno, palliative care, role theory, spontaneity

Introduction

I work with people who are dying. I meet with them and their families as they confront what is truly relevant in their lives. Using four narratives as illustration, I will relate how I combine a Morenian approach with a continua framework accessed from Swedish research. In the process I will discuss related factors, including hospice palliative care, assessment methods and my work as a counsellor and educator.

Existential Crisis

Existential crisis refers to a state of panic or a feeling of intense psychological discomfort concerning questions of existence. When we are facing existential crisis, how do we remember that there is far more to us than the experience of terror, aloneness, helplessness, powerlessness, confusion, doubt, despair or ambivalence that often confronts us? How, as

health professionals, do we keep remembering that there is far more to the lives of the people we are meeting than what we see and experience in the difficulties of crisis, often described in potent metaphors such as:

I'm standing on the edge of an abyss, facing non existence. . . .

It feels like my whole life is in one of those food processors and I can't work out the different ingredients.

For families approaching the death of one of their members, there are the moment by moment crucial decisions of care and companionship, the myriad of tasks needing to be done. The experience of intense pain, discomfort, loneliness, isolation and powerlessness often accompany the letting go of all that is valued in life, the disruption of meaning in life and the contemplating of what on earth does life mean now?

Moreno's Philosophy and the Swedish Study

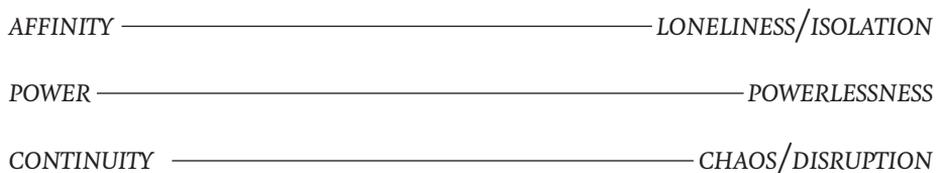
Jacob Moreno's theoretical and experimental work, experiential psychodrama and role theory, the integrative power of the enabling relationship and systems of relationships, together with an innate belief in the resourcefulness and creativity of human beings, shed some light on these questions. When Jacob Moreno created psychodrama as a method of spontaneity, he defined spontaneity from its source, the Latin 'sponta'. This means free will. He further defined spontaneity as "a new response to an old situation, and an adequate response to a new situation" (1953:42), and anxiety as an absence of spontaneity. Mike Consedine (2004) drew a continuum of spontaneity as he diagrammed the dynamic role system - the fragmenting roles showing an absence of spontaneity and an increase of spontaneity in coping roles, through to the fuller expression of spontaneity and life force in the progressive roles.

The social and cultural atom is described as the thinking, feeling and behaviour, the role, of one person responding to another, the counter-role, in a moment in time. It depicts both significant relationships and the nature of the relationship (Moreno 1946). A description which captures the essence of the roles in role relationships, using adjective and noun or a phrase, is known as the cultural atom (Clayton, 1982; Clayton, 1993). For example, the role and counter-role of a couple confronting the woman's dying might be described as *honest confronter of dread* and *frightened and faithful companion*. These role names capture something of the couple's love and companionship, and their fear of separation. It is vital to remember that they are not generic descriptions. They arise in the moment of meeting in the specific situation. Nothing is static. Meaning changes from one moment to another in what can be a highly charged situation of living in the midst of dying. Emotions may travel from despair to hope, rage to acceptance and frank expression, hopelessness to laughter and joy, within brief periods of time.

Role theory, a systems approach, accentuates the dynamic processes of human beings in any context. We respond to people and events from the roles we have developed in

life, and these are constantly changing, developing, expanding as a repertoire of roles and counter-roles. The philosophy and theoretical foundations of Moreno's psychodrama is in accord with a framework established in 2006 by Swedish researchers Susanne Syren, Britt-Inger Saveman and Eva Benzein. Finding that family relational studies were rare in oncology palliative care, they set out to illuminate a family's way of being in the midst of living and dying. Their purpose was to focus on the relational life world of families and to emphasise circular causality, meaning that a change in one part of the family system will inevitably bring about a change in other parts. The researchers interviewed five families who were coping with the dying process of a family member. Circular questioning was focused on being, doing and becoming. The data was organised along three continua and the analysis revealed "dialectic and dynamic processes in constant motion within and between the continua" (Syren et al, 2006:26).

**DIAGRAM 1: THE CONTINUA
BEING IN THE MIDST OF LIVING AND DYING**



Hospice Palliative Care

Hospices are founded on a belief in providing quality in life, as people prepare for death. The ethos is to neither prolong life nor hasten death. Dignity, respect, compassion are the values that sustain hospice work, together with a commitment to a holistic and systemic way of working. Staff and volunteers are disciplined and integrated in their approach. Enjoyment of life and competent care are accentuated. Lightness, order and beauty pervade the environment of the hospice. The multidisciplinary teams attend to physical, psychological, emotional and spiritual needs during the crises of dying and death.

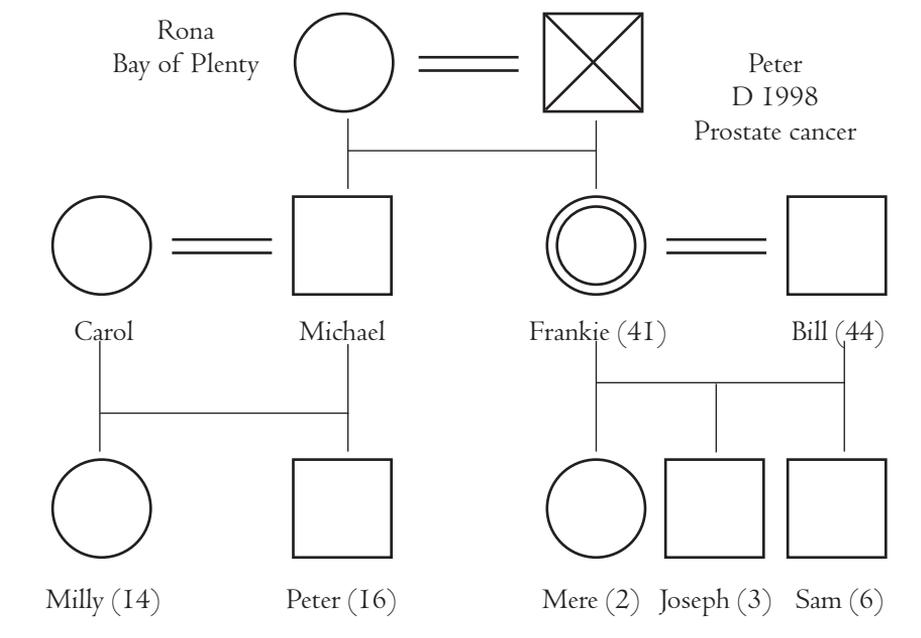
The philosophy of hospice palliative care accentuates the patient's free will and the need for palliative care team members to be tuned into the responses of each patient and family. Role tests arise continually. Which interventions may be the most adequate response and how might the team remain fresh and open? "It is the adequate appropriate response that matters. The response to a new situation requires a sense of timing, an imagination for appropriateness, an originality and a mobility and flexibility of the self" (Moreno, 1946:91).

Genograms and Ecomaps

Two assessment tools are used frequently in palliative care, the genogram and the

ecomap. Murray Bowen (Barker, 1998:98) is credited with pioneering the genogram, used since the 1970s by social workers, therapists, nurses and medical staff as an assessment tool to create an immediate picture of a family. It facilitates rapid recording of significant dates and events, and the nature of relationships over two or three generations. The genogram is indispensable in ensuring that valuable information is widely disseminated. Thus staff members are enabled to 'know' patients and develop empathic relationships from shared information at multidisciplinary meetings and staff changeovers. The hospice multidisciplinary team uses genograms to map the significant people in the terminally ill person's life, their emotional closeness and distance and their geographical location. Language, cultural values and beliefs are recorded and actions taken to honour these in relationship with the person who is dying, their family/whanau and friends. An example of a genogram is provided below.

DIAGRAM 2: FRANKIE'S GENOGRAM

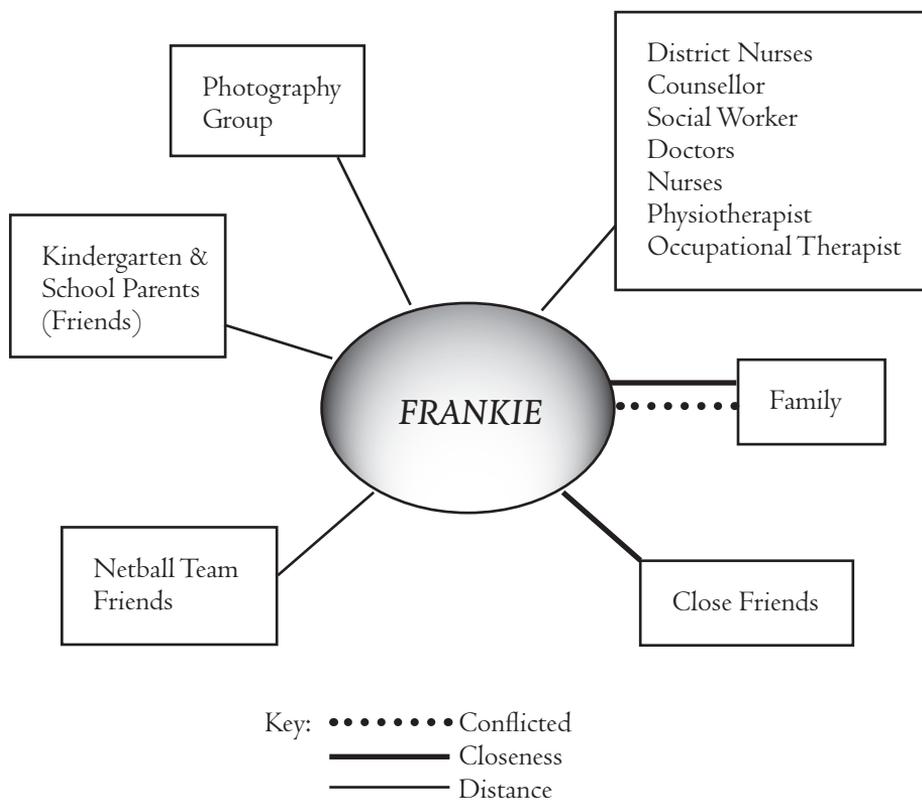


Key: ○ Female ⊗ Identified Patient ⊠ Died
 □ Male = Partners in Relationship

*Frankie loves music, has ipod. Wants visitors monitored by Bill. She is exhausted.
 Michael travelling this week to stay with Bill and Rona at Bill's and Frankie's home.*

Ecomaps, devised by social worker Ann Hartman in 1978, are visual maps that record in the here and now the significant people in a person's life. They are similar to the psychodramatic sociogram, except that sociograms use action. An ecomap can starkly illustrate how disrupted ordinary life becomes from the time of diagnosis. There are significant social and cultural atom shifts, with many health professionals suddenly becoming involved. Strangers begin to enter the family space providing welcome services but also disturbing the previous continuity of everyday living. The challenge for the professional is to make sure that the best resources are available with the least amount of intrusion, so that the person who is terminally ill stays in charge of their life and the day to day order and continuity they value. Below is an example of an ecomap.

DIAGRAM 3: FRANKIE'S ECOMAP



Counselling and Educating: My Roles in Palliative Care

In my work as a counsellor in a multidisciplinary palliative care team, I meet with individuals and families who are deep into the crisis of living with the diagnosis of

terminal illness. I also meet with family members in bereavement. In another role, as an educator of health professionals, my purpose is to enable reflective practice. I use the continua and Moreno's concepts and techniques in this work. Interactive teaching assists integrative learning. Together, we may set out an ecomap in action. This is the moment of reality when participants begin to relate from their thinking, feeling and behaviour. It is through entering the action that participants gain a different experience. They develop systemic thinking, consider the dying person in relationship to the many dimensions of their lives and learn to reverse roles. A high degree of spontaneity and intelligent critical thinking emerges during and after these enactments. In the sharing, people often comment that they think and feel in a more expansive way about themselves and the families with whom they work.

Narratives, Continua and Role Descriptions

So how do I use the framework of role theory alongside the continua, to encourage enabling solutions for the families I meet in the hospice? The following narratives will be used to describe and illustrate. They are drawn from a compilation of patient experiences, and the names used are creations. The psychodramatic analysis of fragmenting, coping and progressive roles as a means of diagramming dynamic change in a role system (Clayton, 1993) relates well in the context of the continua.

The First Narrative: Tiata

Soon after I arrive to work at the hospice, I am intrigued to see a series of drawings of a waka (Maori canoe) in the staff base. I ask "Who is the artist?" I am told that the artist is a patient, Tiata, who has recently arrived. Seeking solitude, he has been living on the streets and in the bush. He has a diagnosis of terminal cancer and now, needing hospital care, a community agency has assisted him to enter the hospice. Tiata hides beneath a duvet most of the time. The multidisciplinary team respect his space, his need to have great privacy. Staff members have heard from the community agency that he does not want contact with family. He had, from time to time, come into their agency for a meal and was sometimes seen drawing. A nurse places paper and coloured pencils near Tiata's bed, where they stay untouched for several days. He is given medication and gentle, competent nursing care to relieve his intense pain and discomfort. This is his position on the affinity – isolation continuum at this stage.

AFFINITY ————— X ————— ISOLATION

One day a nurse notices that Tiata has done several drawings. She draws closer, and he shows her a series of waka with the same repeating name written on them. It is the name of his turangawaewae, the place of his birth, his place of standing. Does he want to go there? He shakes his head. He gives her the drawings. She places them in the staff base.

The team become connected to Tiata in a different way. He has potently shown what is relevant for him at this moment. His position on the continua is shifting.

AFFINITY _____ **X** _____ *ISOLATION*

POWER _____ **X** _____ *POWERLESSNESS*

Over the next week, Tiata continues to draw the waka and write the name of his turangawaewae. He begins to talk haltingly with his nurse. He talks of an older brother that he used to be close to. He has not seen him for years. Did he want his brother contacted? “No”. Tiata continues to move on the continua.

AFFINITY _____ **X** _____ *ISOLATION*

POWER _____ **X** _____ *POWERLESSNESS*

A week later Tiata says yes, he does want to see his brother. His brother is traced. He arrives by plane several hours later. They draw close and talk and talk.

AFFINITY _____ **X** _____ *ISOLATION*
POWER _____ _____ *POWERLESSNESS*
CONTINUITY _____ _____ *CHAOS/DISRUPTION*

Tiata travels with his brother to their turangawaewae. A hospice nearby is contacted to continue medical care. A few weeks later, Tiata dies at his birthplace with his whanau present.

I thought a lot about how that nurse had doubled Tiata. She brought in the art materials. His space, his silence were respected. She approached quietly and did not move in too close. She respected his cues and responded. Her ability to mirror and role reverse enabled him to spontaneously express what he wanted. No one tried to make decisions for him. He decided on his companions and the timing of events. The staff acted as enablers. At the same time medical staff ensured that he was well informed about medication and what medical treatment was possible.

On the first continuum, Tiata moved at his own pace from isolation to affinity. He accepted assistance when he needed medical attention. He yearned for turangawaewae and when he was ready he moved towards whanau. Tiata was without financial and material resources. He was powerless to take care of his physical health. The continuum of power and powerlessness documented his movement over time. When he agreed to

hospice care he had some power in the decisions he made about medication, contact with other people, space and movement. He eventually developed the power to decide where he wanted to be when he died.

Tiata's illness took away the continuity of day to day living and surviving. He was thrust into a very different place and had to confront much pain and discomfort. The continuum of continuity and disruption recorded how he acted to create continuity, reconnecting with turangawaewae and whanau just before he died.

TABLE 1: DYNAMIC CHANGE IN TIATA'S ROLE SYSTEM

<i>Absence of Spontaneity</i>		<i>Full Spontaneity</i>
Fragmenting Roles	Coping Roles	Progressive Roles
isolated sufferer	anxious yearner	expressive artist
hider under duvet		decision maker
withdrawn recluse		turangawaewae dweller
disconnected whanau member		connected whanau member
<i>Isolation</i>		<i>Affinity</i>
<i>Powerlessness</i>		<i>Power</i>
<i>Disruption and Chaos</i>		<i>Continuity</i>

The Second Narrative: John

John is an angry man who rants and swears about an organisation he has had dealings with at different times in his life. There is no letup. He goes on and on, a tirade of abuse, repeating himself without cease. "They are Bastards!" He wants the world to know. People listen at first and then slowly withdraw, worn down and wearied. He is more isolated than ever.

His outbursts render him powerless. There is nothing he wants done to rectify the

situation. John is asked if he would like to record his life. He says yes with alacrity. I arrange for a volunteer biographer to meet him. He tells her the same furious story. However, he also begins to talk about other aspects of his life. An interesting, complicated, difficult and adventurous life emerges through the biography. He has wandered the world without family and friends for many years. He wants his biography given to family if they can be found. And they are found.

Before his death, John connects with several members of his family. He has acted for himself in a powerful way and reconnected with the continuity of his life, with what he values, what he despises, and what meaning his life has for him.

TABLE 2: DYNAMIC CHANGE IN JOHN'S ROLE SYSTEM

<i>Absence of Spontaneity</i>		<i>Full Spontaneity</i>
Fragmenting Roles	Coping Roles	Progressive Roles
raging rejecter	aggressive critic	reviewer of life
angry haranguer	misunderstood withdrawer	revelling storyteller
		expressive philosopher
		emerging reconecter
<i>Isolation</i>		<i>Affinity</i>
<i>Powerlessness</i>		<i>Power</i>
<i>Disruption and Chaos</i>		<i>Continuity</i>

“Sharing thoughts and feelings generates inner strength and the courage to be even more open. Reciprocity in families also created experiences of comfort, which was related to their will to be available for each other and to protect each other from individual suffering” (Syren et al., 2006:29). John’s story led me to think about how, in meeting with patients’ families, openness to anything and everything is a good warm up.

I provide safety so that experience and truth can be expressed and vented without harm to another. Individual meetings prepare people to act spontaneously in expressing their experience in family meetings. When there is truthful expression together with goodwill by one or two people, the family system often shifts to an increase in affinity, power and continuity. I would describe this role as the *interested, open, curious approacher* where a cluster of roles, *naïve enquirer, open learner and social investigator*, interplay.

The Third Narrative: Frankie, Bill and Rona

A young person, Frankie, is dying. The family gathers. The family is fragmented. The husband Bill, and mother Rona, will not stay in the same room together. Frankie asks if I will meet with them and sort something out. She has no energy left to talk to anyone. She just wants the pain to stop, and the tension in the room to lift. Bill and Rona both indicate that they would prefer to meet with me alone. The lines seem to be drawn. I suggest we meet individually first and then perhaps meet together later.

Bill tells me that Frankie's illness has been quick and ruthless. She has weeks to live. He cares for their small children while moving between home and hospice each day. He wants their time together to be as uninterrupted as possible, but this is proving impossible because his mother-in-law is always there. He talks quickly. The words tumble forth. Bill is exhausted and angry. He adds that before Frankie's illness, he and Rona had got along together well. She has been helping by looking after the children, and he thought she liked him. However, lately she has begun picking on him, criticising the food that he buys, finding fault with the way he dresses the children, any little thing. He says that he has had "a gutsful". He speaks explosively and then his body droops in exhaustion. He cannot imagine that meeting together with Rona will make any difference. She will probably just have another "go" at him.

When I meet with Rona, she cries and tells me that she does not know how she will survive without her only daughter. Bill has been giving her the cold shoulder and the tension is unbearable. She feels unloved, anxious and deeply troubled by her daughter's pain. Her husband, Frankie's father, died ten years ago and she remembers that time with grief. Her sleep is broken. She is so weary. She loves being with the children but tires quickly.

Bill and Rona are both experiencing themselves at the fragmenting end of all three continua.

ISOLATION

POWERLESSNESS

DISRUPTION/CHAOS

In the individual sessions, I describe to Bill and Rona the ground rules that would apply for a meeting, such as listening without interruption, no criticising, no blaming, so that each would have an opportunity to express themselves regarding their current experience.

Tentatively, they agree to a meeting. When we meet up the following week, Bill and Rona agree to stick to the ground rules. Each expresses their deep love for Frankie and the children, the grief and anguish they experience, and both refer to the burden of keeping going with daily life and tasks.

Bill thanks Rona for her help. He appreciates the way in which she cares for the children and the respite it provides. I am surprised. I had thought that Bill's intense anger might prevent him from experiencing anything else. In turn, Rona tells Bill "how stoked" she was when he married Frankie. He is a great son-in-law. Then she cries with shuddering tears. He grabs handfuls of tissues and pushes them into her hand. He wipes tears from his own eyes.

We sit quietly together for some time. Then I ask "What would help both of you? What could you ask of each other that would help you through this time?" Rona speaks first "Bill, please could I have some time alone with Frankie, just by myself? And I want you to have plenty of time with her too. I'll look after the kids whenever you want. I love being with them". Bill replies "Yes, that's easy to do. And yes, I need a lot of time with Frankie myself. And I need you to stop criticising me. I'm knackered. I'm doing my best". Rona withdraws and cries. Eventually she says "I'm sorry. I didn't mean to criticise. I thought it might be helpful if I told you the food the children like. I'll try and think in future before I open my mouth". Bill puts his arm around Rona. Gruffly he says "Thank you". He looks exhausted but relieved.

Bill and Rona are no longer isolated in their separate corners of misery. Small criticisms have ceased and acts of kindness have taken over. They each have alone time with Frankie while the other plays with the children in the hospice lounge. Sometimes a hospice volunteer cares for the children. The family spend a lot of time together with Frankie. Frankie tells me that things are easier now that the tension has gone.

Isolation and loneliness are the bitter fruits of dying. Social and cultural atom repair is achieved and isolation reduced when the people involved are prepared to listen to one another. Power is restored when people attempt to understand one another in their pain, and in their willingness to keep going moment by moment in what is an intense and difficult time for many. The disruption brought on by the shock and anguish of loss and grief is reduced when two or more people weave the necessary threads of continuity in their goodwill towards, and shared love of, the dying person.

The Fourth Narrative: The Bereaved Partners' Group

"Receiving a diagnosis of cancer is described as being pushed out of a helicopter into a jungle war without any training, any familiarity with the terrain or any sense of how to survive" (Lerner, 1994 cited in Syren et al., 2006:26). I co-lead a group for partners of people who have died in the hospice service. Eight tends to be the average number attending per group and there are predominantly more women than men. Our intention is to establish a respectful place where grieving partners meet others with common experiences.

The group participants respect a multiplicity of experiences and meanings. After the roller coaster existence of living in a permanent existential crisis, there is now time for

reflection and integration. No one wants to be 'fixed' or 'changed'. There is a wish to meet others who have endured similar experiences of terminal illness and the death of a beloved partner. The mirroring and role reversal that takes place in the group provide invaluable integrative experiences.

The group members describe the indescribable, that time from diagnosis to death. They talk about the intensity, the hard work of care-giving, the depth of love and discipline that they discover in themselves. They discuss the exhaustion, the sleeplessness, the everyday conflicts, the joy, the surprise laughter, the eruption of intense anger and the bitter loneliness that emerges at times.

It's like living in another world parallel to the everyday world, with people living normal lives not realising what I am experiencing . . . intense loneliness and anguish.

If only they (friends and work colleagues) would realise how precious life is and stop the banal, the petty bickering, worrying about the small things . . . and yes I used to, too. Now I realise how precious life is. It means a lot more. It's deeper. I can't be bothered with superficial talk.

I wouldn't wish this experience on my worst enemy (if I had one) and yet I wouldn't trade the strength I've found, my ability to live my life every day in a new way. I appreciate it far more deeply.

A paradox!

We find that similar themes emerge, time and time again. These themes and experiences substantiate the findings of Syren et al. (2006). Movement on the continua in the direction of affinity, power and continuity seem to prepare families for enduring the changed and challenging life situation, and give them a kind of repose. Existential and emotional suffering emerges when movement is in the opposite direction. Individuals then embody experiences of depression and anxiety.

Power to express what is previously inexpressible, and the meaning of the continuing relationship with the lost partner, is established as the group deepens in trust. The deeply endured absence is expressed fully. Photos, music, letters, writing and drawings are shared. Tears and sorrow, anger and laughter often coexist in small enactments. When a relationship is not within the cultural conserve, the significant person is often invisible. A partner may die during the formation of a new relationship before the new meanings are woven into the continuity of a full life. Grief is thus voiced by disenfranchised ex-partners, or new partners not yet acknowledged.

We explore the changed roles and the missing roles when a partner dies. The reality of powerlessness, not knowing how to be and what to do in new circumstances, is

expressed. Reconnection with the past and the present occurs and tentative future plans emerge. The consistent movement from loneliness to affinity continues as new friendships are forged in the commonality of the experience of group participants.

TABLE 3: ROLES EXPRESSED IN THE BEREAVED PATRNSERS' GROUP

<i>Absence of Spontaneity</i>		<i>Full Spontaneity</i>		
Fragmenting Roles	Coping Roles			Progressive Roles
	best can do under stress			
distraught despairer	quiet withdrawer	angry venter	agreeable pleaser	expressive griever
bitter rejecter	ruminating brooder	fierce criticiser	passive obeyer	acknowledger of strength
disconsolate isolate	wisecracking distracter	sarcastic critic		laughing comic
invisible griever				warm relater
exhausted sufferer				enjoyer of friendship
				loving narrator
				courageous continuer of life
<i>Isolation</i>				<i>Affinity</i>
<i>Powerlessness</i>				<i>Power</i>
<i>Disruption and Chaos</i>				<i>Continuity</i>

Conclusion

Health professionals working in palliative care teams benefit from reflective practice and a systemic approach. When they listen to multiple meanings and consider the many dimensions of family narratives, they will assist families to experience belonging and connection, power of choice and continuity through life and death. Meanwhile, Moreno's techniques of doubling, mirroring and role reversal assist everyone in a system. The use of genograms and ecomaps is a culturally acceptable warm up to enactment, which then further expands the experience of self and the understanding of others within family systems. The three continua, affinity-isolation, power-powerlessness and continuity-disruption illuminate the dynamic movement within families in the midst of living and dying. Together with role analysis, this is a useful framework to think about, and bring about, enabling solutions.

Epilogue

There is a universal story related by David Kuhl (2006) in his book, *What Dying People Want*.

An elder approaches death and draws extended family around.

"I have a small stick for each of you. Take it and break it".

Each person in this large extended family takes a stick and some, with great difficulty, break their sticks. Finally each stick is broken.

"This is how it is when a soul is alone and without anyone. They can be easily broken".

The elder then gives each person another stick.

"This is how I would like you to live after I pass. Tie your sticks together in bundles of twos and threes".

The elder waits quietly as the extended family and friends tie the sticks together. There are many bundles, some of two sticks, some of three sticks.

The elder instructs "Now break these bundles in half".

No one can break the sticks where there are two or more in the bundle. The elder smiles.

"We are strong when we stand with another soul".

I acknowledge and thank all of the families, staff and volunteers with whom I work, and Virginia Lee, social worker, who co-led the groups for bereaved partners with me.

References

- Barker, P. (1986). *Basic Family Therapy*. Collins, UK.
- Clayton, G.M. (1993). *Living Pictures of the Self*. ICA Press, Caulfield, Victoria.
- Clayton, L. (1982). The Use of the Cultural Atom to Record Personality Change in Individual Psychotherapy. *Journal of Group Psychotherapy, Psychodrama and Sociometry* 35:111-117.
- Consedine, M. (2004). Workshop Notes, ANZPA Conference, Christchurch, New Zealand.
- Kuhl, D. (2003). *What Dying People Want: Practical Wisdom for the End of Life*. Doubleday Publications, Canada.
- MacLeod, S. (2007). *Psychiatry of Palliative Medicine*. Sage Publications, UK.
- Moreno, J.L. (1946, 1964, 1972). *Psychodrama First Volume*. Beacon House, Beacon, New York.
- Moreno, J.L. (1953). *Who Shall Survive?* Beacon House, Beacon, New York.
- Oliviere, D., Hargreaves, R. & Monroe, B. (1998). *Good Practices in Palliative Care: A Psychosocial Perspective*. Ashgate, UK.
- Pender, V. (1998). Mary: A Social and Cultural Atom. Unpublished Paper.
- Pender, V. (2005). *Vignettes: Brief Enactments of Psychodrama*. Psychodrama Certification Thesis, Australia and New Zealand Psychodrama Association (ANZPA Inc).
- Syren, S.M., Saveman, B. & Benzein, E.G. (2006). Being a Family in the Midst of Living and Dying. *Journal of Palliative Care* 22(1):26-32.



Vivienne Pender, Psychodramatist, is a Counsellor at Mary Potter Hospice. She is deeply appreciative of the families and staff with whom she works. Vivienne is also a Psychotherapist and Supervisor in private practice, and a Supervisor with the Wellington Psychodrama Training Institute (WPTI). She can be contacted at viv.pender@paradise.net.nz

Self at Zero

BRINGING SPONTANEITY TO THE TREATMENT OF BORDERLINE PERSONALITY DISORDER

KATE COOKE

ABSTRACT

Borderline Personality Disorder (BPD) is a debilitating disorder of the self, the treatment of which to date has been largely confined to cognitive skills acquisition and verbal psychotherapies. This article describes the use of non-verbal kinaesthetic therapies, such as circus arts and action methods, in a specialist treatment centre. The effect of this new approach on clients at the centre is described with reference to the development of the false self, the self at zero, and the key element of spontaneity that provides the impetus for growth.

KEY WORDS

borderline personality disorder, dissociation, false self, kinaesthetic therapy, psychodrama, self at zero, spontaneity, acro-balance, base, circus, flyer, plank

Introduction

In 2006, I was lucky enough to land a job with Spectrum, a specialist public mental health facility set up to treat people with Borderline Personality Disorder (BPD). In the past, general psychiatry has approached this client group in a manner that has created conflict and therefore obstructed the development of the therapeutic relationship. It is only latterly that psychiatric professionals are better understanding people with BPD diagnoses. Spectrum was founded to treat complex and severe cases, and to assist area mental health services to recognise the specialist treatment needed by this particular client group.

Spectrum has an eclectic approach to treatment, but at its core lies a strong humanist, skills-based philosophy aimed at stabilisation and reduction of self-harm. People who work in this facility are attracted to these values, and the reputation it has for effective work in the assessment and treatment of BPD clients. The manager of treatment services requested that I devise a programme based mainly on physical, non-verbal and creatively-oriented therapies, to balance out the cognitive and psychodynamic approaches. The opportunity was there to use my psychodrama training, coupled with my eight years of circus training, in a therapeutic community setting. What better job could there be? With two colleagues, one of whom was an artist and the other a creative art therapist, I spent 18 months developing the Kinaesthetic Group, or K Group, doing the things I loved in gainfully paid employment!

In this article I will describe the role that spontaneity can play in the treatment of people diagnosed with BPD. Firstly, I will address the definition of BPD as it is formally defined, and then go on to outline Winnicott's theory concerning the aetiology of this disorder, linking it with its significant symptoms. These are an absence of a sense of self, a disordered or false self, dissociation, experience of emptiness and fear of abandonment. Spontaneity, so necessary in the development of the self, is defined and discussed. Finally, I share some illustrations and observations from the work of the Kinaesthetic Group in creating a play space in which BPD clients discover a sense of self and expand their role repertoire using circus skills and psychodrama action methods.

BPD Explained

The *DSM IVTR* (APA, 2000) outlines nine criteria for BPD. A new approach that helps focus clinical attention on particular areas of dysfunction rather than multiple traits and symptoms, groups the nine criteria as follows.

1. Disturbed Relationships
unstable intense relating styles
abandonment fears
emptiness
2. Unstable Affect (Emotions)
affect lability (rapid changes in affect)
anger
3. Impulsivity
impulsive behaviours
suicidal or self mutilating behaviour
identity disturbance
lapses in sense of reality

People with this disorder have conflicted needs in relationships, expressed often as “I

want you but I fear closeness” or “I hate you. Don’t leave me”. They do not tolerate feelings well, theirs or another’s, often opting to dissociate. They can be impulsive, self-destructive, experience discontinuity in relationships and use addictions for escape. They have little sense of self, and are afraid of being alone as it produces a dreadful sense of emptiness and loneliness. Sometimes they edge into psychotic symptoms.

In the 1950s and 1960s, British psychiatrist Donald Woods Winnicott elaborated a theory that not only described the growth of the self, but also explained the development of the disordered self, or false self. It is useful for building a better understanding of the development of BPD.

Winnicott (1960, cited in Mearns, 1993) identified what he named a false self in people diagnosed with BPD, explaining its genesis in early life when psyche and soma become split. He writes that normal development occurs when the good enough mother (or caregiver) reads the child’s natural somatic expressions and needs, and responds to them. This creates the illusion for the child that she can make the mother respond to her. This is called normal omnipotence with the child’s body response named as the gesture. “Periodically, the infant’s gesture gives expression to a *spontaneous impulse* (my italics); the source of the gesture is the True Self, the gesture indicates the existence of a potential true self” (ibid:145). When the mother’s affect is regularly congruent with the gesture, the child’s emotion and imagination become integrated into the development of the self. The self develops then from the empathic attunement of the significant other, what psychodramatists refer to as doubling. This experience leads to a growing coherence and flow within the child. She learns to trust her impulses, which are spontaneous impulses, and her confidence grows. She develops a self.

A needy or chaotic mother or caregiver, who is unable to immerse herself in her child’s experiences, instead draws the child’s attention to her. He is required to deal with the reality of the mother’s concerns. He is not given the space, a play-space, to know his own subjective world and spontaneous responses. Rather than lose the desired bond with the mother, the child reacts to this impinging environment as if that environment was alien, which it is. In this way the ‘me’ is not developed. Instead, a false self is developed from the child’s inherent need to be cared for. The false self searches for and learns to provide the responses that the mother seems to want, and in the process discovers that his body and emotional reality is less important than the mother’s. He learns to comply with the demand to be happy, for example, negating his own reality and therefore maintaining a bond with the mother, and builds a false self. Winnicott suggests this child polarises into a private and a public self, which divides his experience. The two selves are breached by a seemingly unbridgeable gap, an experience which is desolate and profoundly lonely.

The adult who grows from this child becomes personality disordered and if borderline, lacks a sense of self. She feels empty, fears abandonment, is threatened by newness and change, dissociates herself from painful feelings, and experiences profound rage which is often turned in on self. She seeks relationships but then finds them too confusing, especially when required to share the internal world of the other person. The false self is not adequate to the task of intimate relationships. Progressive roles may be

minimal or absent, thus leaving the coping and fragmenting roles to possibly destroy the potential within a relationship.

The Concept of Spontaneity Defined and Elaborated

The concept of spontaneity derives from Jacob Moreno, the creator of psychodrama theory. It comes from the Latin 'sponte' meaning 'of free will'. Moreno (1946:81) states "Spontaneity is ... the ability of a subject to meet each new situation with adequacy. It (spontaneity) is not only the process within the person, but also the flow of feeling in the direction of the spontaneity state of another person". In considering the relationship of the self to spontaneity, Moreno (1947:8) theorises "When spontaneity is at zero, the self is at zero. As spontaneity declines the self shrinks. When spontaneity grows, the self expands ... The self is like a river, its (sic) springs from spontaneity but it has subsidiaries which carry supply to it".

Thus, when a person is warmed up to spontaneity, not only is she freed up to access a greater range of roles within herself, but she affects the levels of spontaneity of others. Moreno (1946:81-82) also maintains that warm up to feeling is preceded by a series of physical actions, or expressions. "Clenching teeth and fists, piercing eyes, frowning, energetic movements, shrill voice, hitting, scuffling of feet, holding head high, accelerated breathing, and others, tend to release emotional states such as anger. . ."

Russell Meares (2001) argues that the value of spontaneity lies in its contribution to a growing aliveness in an individual who was previously 'dead'. Mike Consedine (2004:39) maintains that spontaneity is more than a new response to an old situation, or an adequate response to a new situation. He states "For me, spontaneity is the urge to live – the spark inside which prompts us to move forward unconflicted and non-anxious. The prompt which urges us beyond the known!" Many clients with a BPD diagnosis do not want to live because they feel 'dead' inside. They do not feel that 'urge to live'.

According to the *Psychodrama Training and Standards Manual* (ANZPA, 1989:67-68), spontaneity is characterised by creativity, originality, adequacy, vitality, and the flexibility to move from imaginative ideation to reality-based thinking, and back again. Philip Carter (1994:39-40) compares Moreno's description of spontaneity as a "readiness to respond as *required*" to the Buddhist concept of "*empty mind*; the ability to experience the world brand new in each moment". He revises the conserved definition of spontaneity and suggests that "spontaneity is a readiness for a free and vital response to an emerging moment". These 'emerging moments' arise in the K Group, challenging our clients moment by moment.

Utilising Spontaneity in the Kinaesthetic Treatment Programme

So how does all this theorising help me work effectively with BPD clients in the Kinaesthetic Treatment Programme? For a start, how does the spontaneity factor serve

the disordered self? From a purely physical standpoint, my clients in the K Group are triggered into using the psyche and the soma, their body and their emotions, together. An empathic other or two, in the form of the group leaders, are there to guide and support them. They come into contact with their fears – fears of abandonment, failure, loss of the empathic other’s esteem, and fears about their own competence. They step up, sometimes literally, to find the self they have had to abandon in order to survive into adulthood. In so doing, they find that spark of life, that vitality, that imaginative world that moves into the real, into spontaneous action.

Secondly, if physical states precede feeling states and the group warms up in a variety of physical ways, would the group members also warm up to feeling states? With the knowledge that this client group generally flee from feelings like a herd of gazelles flee from big cats, my guess would be that the K Group’s accent on physical action would create huge conflicts for the group members. As they warm up to feelings, they will also warm up to defending themselves against those feelings. However, the possibility for spontaneity development within individuals in a group session could mean that they meet new situations in the group adequately. This would require them to embody roles that meet the requirements of any situation. It could provide for the possibility of individuals within the group relating to the flow of feeling that Moreno mentions above.

Thus a warm up to spontaneity is central to all activities in the K Group. Play assists by calling up the vitality, creativity and imaginative qualities inherent in all human beings. As discussed earlier, people with severe personality disorders do not like change because it threatens their defences. The Kinaesthetic Group offers new situations which challenge them to cut through those defences and step out of their comfort zones. In stepping out of their comfort zones they see that they can survive new situations, and as a bonus, experience a sense of achievement and increased self-esteem.

Spontaneity through Circus: Illustrations from the K Group

As already described, my role at Spectrum was to expand the Dialectical and Cognitive Behaviour Therapy Programmes to include treatments that were non-verbally expressive, and that had an element of improvisation. This approach would increase residents’ spontaneity and affirm strengths that did not depend on language, with the aims of repairing the disordered self, expanding the real self and building self-esteem. Thus the Kinaesthetic or K Group programme was based on sound, movement, art, creative art therapy, improvisation, circus skills and psychodrama.

Early in the life of the K Group, I initiated a focus on simple circus tricks. J was tense and pale, spoke quickly and almost inaudibly, and labelled herself “un-athletic, no good at sports”. She often embodied the fragmenting roles of *mean punishing name-caller* and *desperate panicker*, and the coping roles of *chaos controller* and *speedy robocop*. She was preparing herself for the physical challenges offered by the Kinaesthetic Group as a counter to these roles, spurred on by her embryonic *creative genius*.

I invited J to be a flyer in a simple three-way pyramid. After receiving considerable

modelling of the correct way to approach the activity and reassurance that spotters would be on all sides to catch her if she fell, she stood on the backs of two other clients who were kneeling on all fours with backs straight. She stood for a while, gained her balance and then raised her arms in the air in a gesture of triumph while the group members clapped her enthusiastically. She then proceeded to be a flyer on top of two bases. She stretched out her arms to make a plank which rested on one base who was kneeling on all fours on the floor, and stretched out her legs to make another plank with her feet resting on the shoulders of another base who was standing behind her.

J clearly gained a considerable sense of achievement from this activity. She looked astonished, then smiled broadly and said "I didn't think I could ever do that". The next day, others observed that J seemed to be "slower and softer" within herself and in her interactions. She herself reported to me that she was "still feeling wonderful" and remained noticeably more relaxed, with good volume and elucidation in her voice and good colour in her face. She had 'come into her body' through a pathway of her own making, and discovered that the experience was not as catastrophic as she had imagined it might be.

T, a young woman who was very athletic and clearly capable of the circus activities that she had witnessed in the groups so far, had hitherto rejected all invitations to participate in the circus skills group. After receiving some gentle encouragement, T put herself forward to do a bluebird. This is a simple acro-balance that involves a base lifting the balancer off the ground. It requires trusting in the base, in this case a staff member, relinquishing control of where the body is in space and balancing the body on someone else's body, a highly intimate interaction.

T warmed up physically in the way that Moreno so vividly described. She hissed in her breath, grimaced, let out little yowls of distress, reached out to take the base's hands then drew back. She shook her hands and looked around, laughed nervously, hopped from foot to foot, moved forwards and backwards. Finally she made a decision and moved forward, took the base's hands and allowed herself to be lifted up into the air. She stayed there for a moment, enjoying her achievement.

As with J, it was noticeable later that night that T had slowed down considerably, was less aggressive and able to go to bed earlier. The experience of spontaneity had moved her from her usual pattern of fearful avoidance of sleep to feeling safe and trusting in her environment. The fragmenting roles of *fearful night victim*, *angry senseless annihilator* and the coping roles of *speedy cleaner*, *obsessive checker of locks* and *watchful vigilante* seemed to have fallen away. That night she was an embryonic *trusting acceptor*, *spontaneous actor* and *calm self-assurer*.

When W participated in a kinaesthetic group session, she experienced a flashback to an abortion she had had years ago. Because she now holds strong religious beliefs against the practice of abortion, it played on her mind. W experienced self-harming thoughts and dissociated, and soon other group members were also being triggered into their own downward spirals of thinking. The aim of Spectrum is to reduce self-harm and to stabilise the client's functioning. And yet here we were in the Kinaesthetic Group with a client who had felt so threatened that she had dissociated, needed individual time to

ground herself and then harmed herself that night. How could we make sense of this?

Trish Reynolds (1996) views dissociation in its genesis in childhood as a creative and spontaneous response, that in adulthood has become worn-out and hackneyed. The development of new and spontaneous ways of responding is thus central to the rehabilitative work, whether that means developing new roles or strengthening and increasing the accessibility of previously unavailable roles. Hilde Knottenbelt (2001:52), focussing on the generation of a somatic perspective in the psychodramatic enactment, states “If we think about this (spontaneity) in terms of the body we might conceive of it as the ability to free ourselves from the domination of fixed habits, i.e. conserved ways of moving and using our bodies. If we don’t ‘get this’ on the level of the body, we are missing an important element in enlivening/invigorating the conserved parts of ourselves and developing awareness of the unconscious patternings that influence our way of being in the world”.

W acknowledged that she was motivated to participate in the kinaesthetic activities because that was her area of greatest challenge. She had become dominated by a body memory which increased her anxiety to such a degree that she dissociated, rather than face the pain and conflict which the memory resurrected in her. I think W does ‘get it’ on the level of the body. She unconsciously knows that she has conserved psychosomatic responses, those pathological somatic ‘memories’ that spontaneity challenges, but she wants to respond in the moment. So far, however, when she puts herself in the frame the conserved patterning returns, along with a degree of dissociation. W may need to continue to experience these memories until the ‘fixed habits’ of dissociation and self-harming thoughts are brought into full awareness.

Y demonstrated that she was developing new progressive roles when she volunteered to base me in an acro-balance. As base, she leant against the wall, thighs at right angles to the wall in a crouch position. I was required to stand on her thighs, holding her arms. Nervously, she looked away. I directed her to look at me as I stepped up onto her thighs and held our balance. She did so and became calm. She did not dissociate because, by looking at the trusted person she was able to stay in the present moment. Y’s ability to strengthen and increase the accessibility of previously unavailable roles was alive and well.

Making Sense of All This

Why does this kinaesthetic work, work? And how does it work? The women I have described in this article are at Spectrum because they know that they dissociate, and they know that they self-harm as maladaptive coping mechanisms. They want to change, but have no idea how to do so. People say to them “Spectrum is the place to be. They know how to treat BPD”. They are willing to put themselves into a situation in which they may learn something new, despite their beliefs that they will never break free of their struggles. They go to skills sessions and learn cognitive ways to break the cycle of thinking that leads to self-harm, and with support some of them do that. They discover, however, it is not a miracle cure.

In the Kinaesthetic Group the women fear intimate contact because they are reminded of previous experiences that led to early dissociation and self-harming behaviour. They are conflicted. They want to trust but often cannot. The K Group provides a concrete situation where physical activities are required and where the empathic attunement and doubling, absent or partial long ago in the genesis of the self, is at last available in full measure. A person is required to simply put a foot on someone else's thigh or back and jump up. And the women do 'jump up', because they are motivated. They know this is why they are at Spectrum and they want to do this for themselves and for their loved ones who have gone through so much with them. They generate spontaneity on the back of this purposeful context. In the act of jumping up, they overcome the conflict that has plagued them since they were neglected or abused. Where body memories overwhelm and interfere with the generation of spontaneity, they act to free themselves from the domination of the fixed habits of dissociation and self-harm. This jumping or stepping up begins an embrace of the true self and the false self starts to fall away. The women do find that spark of life, that imaginative vitality that moves into real spontaneous action. In Moreno's terms, they move from a shrunken self at zero towards an expanded spontaneous self.

In Conclusion

The self develops within the context of empathic attunement, or doubling, which allows the child to play, to follow her curiosity, her desire for action. This exploration leads to a growing inner coherence and flow. He learns to trust his impulses, which are spontaneous impulses, and his confidence grows. He develops a self.

The kinaesthetic programme at Spectrum attempts to provide a similar context, with an eye to a similar result. The provision of non-verbal therapy such as circus, aids the development of spontaneity and the increasing connection to the soma, or body. I hope that I have demonstrated how the spontaneity factor assists people diagnosed with BPD to develop their real selves. I hope that I have shown how they can develop an expanded self from a self at zero. I hope that I have illustrated how they have benefited from the programme in some small way. To be a part of this process and to see the pleasure and softness in a client who has come into herself through this kinaesthetic process, is a good reason for coming to work each day.

The claims made in this article regarding treatment outcomes are tentative. Research is called for to provide empirical validation.

REFERENCES

- American Psychiatric Association (APA) (2000). *DSM IV TR*. Washington DC, USA.
- Australian and New Zealand Psychodrama Association (ANZAP) (1989). *Psychodrama Training and Standards Manual*. ANZPA Inc., Victoria, Australia.
- Carter, P. (1994). Towards a Definition for Spontaneity. *ANZPA Journal* 3.
- Consedine, M. (2004). Transference, Social Atom, and Spontaneity. *ANZPA Journal* 4.
- Knottenbelt, H. (2001). Generating a Somatic Perspective in the Psychodramatic Enactment. *ANZPA Journal* 10.
- Kravitz, R. & Watson, C. (2000). *Borderline Personality Disorder: Foundations of Treatment*. Seaview Press, South Australia.
- Meares, R. (1993). *The Metaphor of Play*. Jason Aronson Inc., USA.
- Meares, R. (2001). What Happens Next? A Developmental Model of Therapeutic Spontaneity. *Psychoanalytic Dialogues* 11(5):755-769.
- Moreno, J.L. (1946). *Psychodrama First Volume*. Beacon House, Beacon, New York.
- Moreno, J.L. (1947). *Theatre of Spontaneity*. Beacon House, Beacon, New York.
- Reynolds, T. (1996). Dissociative Identity Disorder and the Psychodramatist. *ANZPA Journal* 5.
- Trett, R. (2009). *Self-Harm Management*. Training Resources, Spectrum State-Wide Centre for Personality Disorders, Victoria, Australia.
- Winnicott, D.W. (1965). Ego Distinction in Terms of True and False Self. In *The Maturation Processes and the Facilitating Environment: Studies in the Theory of Emotional Development*. (Originally published as a paper in 1960.) International Universities Press, New York.

Kate Cooke is a Psychodramatist and Psychiatric Nurse working with clients diagnosed with severe and complex Borderline Personality Disorder. She has developed a keen interest in the relationship of physiology, neurochemistry and psychology to psychiatric conditions. She brings her 'circus chick' experience to her professional work.

Looking Through the Lenses

THE FOUR ASPECTS OF PSYCHODRAMA

PHILIPPA VAN KUILENBURG

ABSTRACT

Techniques and theory used by the psychodramatist, sociodramatist, role trainer and sociometrist are the same. All aim to provide an experience that facilitates an effective learning or therapeutic outcome for clients. Where they differ is in their focus. This paper explores the different lens used by psychodramatists, sociodramatists, role trainers and sociometrists in their work in one to one process, the therapeutic relationship, group development, education and business.

KEY WORDS

psychodrama, psychodramatic lens, role training, sociodrama, sociometry,

Introduction

As I was developing my practice, I struggled with understanding the differences between the various Moreno approaches. I adopted a 'lens approach' to focus and develop my thinking, my analysis of a situation and my choices regarding the type of instrument to use. The lens I choose influences my approach, and the directions I provide. I feel enriched knowing that I am not limited in the way that I work. All approaches are valid, and are chosen according to the contract, the group and the protagonist. I am only limited by my imagination, understanding and role development to date.

As I warm up to being a creative writer, I think about group warm up and the language I use to produce a drama. During a drama, I may produce several scenes. I may start with social atom repair using sociometry and then move to work sociodramatically or to use role training. My choices are influenced by the protagonist, the issues present in the group and what I think will be an effective therapeutic or educational intervention.

Thinking then about some scenes that I can use to illustrate and discuss these different approaches, I have chosen a case study and some vignettes from a group of mothers I work with in a psycho-educational setting. I plan to view these through the different lenses and introduce the thinking from each perspective. I could equally use examples from the work place or an educational setting. In the later integrative phase of this article, I will discuss my thinking about the four lenses of psychodrama.

The mothers with whom I work wish to develop stronger relationships with themselves during difficult moments with their children. Their vision is to be loving, understanding and patient parents who never get angry or stressed. This mythical goal creates enormous pressure for them because in reality they experience themselves as controlling and yelling, as *screaming banshees*. Sometimes, frustrated and exasperated by tiredness, conflicted agendas, ongoing worries and unrealistic expectations of themselves and their children, they hit their offspring. They fall into coping roles, acting out the familiar and known as their own parents often did.

Wendy and the Group: A Case Study

The mothers' group is largely made up of Maori and Pacific Island women. Details have been changed to preserve their anonymity. Wendy was raised by her grandparents. Recent events have resulted in strained relationships between herself and her family. Wendy is a quiet observer and active contributor in the group. She has shared a great deal about herself and her family circumstances.

Wendy does not currently parent her daughter and son, who live with two other families. She has a gentle and loving relationship with her younger son, but her relationship with her daughter, Linda, is difficult. Linda, now a teenager, was parented by elders in the family in her formative years. This is the traditional custom in some Maori and Pacific Island families. Linda has re-entered her birth parents' family as a troubled youth and sexual abuse victim. Wendy, already in coping mode in a dysfunctional marital relationship, has turned to her uncle for help. She has asked him to look after Linda and granted him legal custody. However, he too is unable to manage Linda's rebellious behaviour and passes responsibility for her on to extended family members. These caregivers manage Linda's behaviour by allowing her to do as she wishes.

Wendy chose to participate in the mothers' group as part of a journey to regain legal custody of her two children. She wants to be a *loving supportive mother, wise guide and gentle but firm boundary setter*. Wendy and Linda recently spent a weekend together after some time apart, and it did not go well. Wendy meets the challenge of Linda's unacceptable behaviour by becoming a *strict disciplinarian and rigid boundary setter*. She has expressed concern about another planned weekend with Linda. She does not want to recreate the antagonistic relationship of the previous weekend.

A Psychodramatist's Lens

Thinking as a psychodramatist I warm up to investigating Wendy's family system, the roles that she has developed, and the social atom repair that will be required. The

following vignette illustrates how I worked with this client psychodramatically, focusing on exploration and social atom repair.

I begin by warming Wendy up to the scene and her family. I invite her to place herself in her family home and to choose a room in which to meet with family members. When she chooses the lounge I take particular care setting the scene, attending closely to Wendy's warm up. I think about what Wendy has expressed in the group, her relationship with those who raised her and her current relationship with her uncle and extended family.

I encourage Wendy to examine the walls and take note of the pictures that are placed there. She describes pictures of her paternal grandparents and great aunt who raised her after her grandmother died. I direct Wendy to take up the roles of each person and interview her in each role. These people provided her with unconditional love, and passed on to Wendy their values and knowledge of her heritage. When Wendy takes up the role of Grandmother, she looks lovingly towards Wendy and expresses regret that she is not there to help her now. She is sad that her son, Wendy's uncle, has held on to his perceived hurts and wrongs after all these years. Wendy takes up the role of Grandfather and we discover that he is also loving and supportive of Wendy.

Through role reversal, we discover Grandmother's and Great Aunt's regrets. These are focused on a time in Wendy's youth when she was accused of wrongdoing by her uncle. Although they did not believe the accusations, at the time they went along with Wendy's uncle. I maintain Wendy's warm up through rapid role reversal. Using surplus reality, I encourage her to fully express herself and the distress that she feels about the injustice. Next, Wendy takes up the roles of her siblings. We meet a brother and a sister and both express support. They position themselves close to her on the stage. They have witnessed family events that they consider have been misrepresented, and express a willingness to attend court hearings to testify on Wendy's behalf.

Now Wendy enacts the role of her uncle. During the interview he presents himself as highly conserved, a *strict disciplinarian* and *religious, authoritarian controller*. He holds the view that Wendy is a spoilt brat and a gambling addict. He refuses to accept his nephew-in-law's confession that it was him and not Wendy who had behaved irresponsibly. His rigid beliefs appear to be influenced by experiences of injustice instigated by his parents. Furthermore, based on information provided by Linda's current caregivers, he believes that Wendy is a poor mother who has mistreated her daughter. While caring for Linda he has asked the church to pray for her and believes that the prayers will heal Linda. He refuses to address the issue of sexual abuse and has sent his great-niece to stay with others in the extended family, as he is also unable to manage her acting out behaviour. Wendy expresses painful feelings to him regarding his active engagement in what she believes are his attempts to poison the relationship between herself and her daughter. In role reversal, Wendy as her uncle refuses to engage and walks away, tight-lipped and angry.

At this point, I think about the unresolved conflict and the unexpressed hurt that lies between Wendy's uncle and his parents, and see this as a possible future scene.

A Role Trainer's Lens

As I warm myself up to thinking as a role trainer, I analyse Wendy's role system. Which

roles are adequate or progressive, how would I name her coping roles and where is the moment of conflict that causes fragmentation? I consider what is required to assist her to strengthen progressive roles and thus increase spontaneity. The following vignette, produced during a different session, follows on from the previous drama.

Based on my analysis that social atom repair was crucial to the development of Wendy's progressive role system, I began with a role training focus and then moved into social atom repair. I had, as always in a non-therapeutic environment such as the workplace, renegotiated the contract with the protagonist. The protagonist and the group must agree and be prepared for the level of exposure that social atom work requires. We had agreed that Wendy's role training session would focus on her maintaining her desired role of *loving and nurturing guide* while with her daughter Linda, rather than warming herself up to her usual coping role *Attila the Hun*.

As we set the scene together, I am motivated to assist Wendy to warm up to herself and her daughter. She creates a motel room where she intends to stay with Linda, and warms up to her purpose for being there. I notice that her body appears to be tense and restricted. I encourage her to walk around the room and give expression to her experience. As she walks, Wendy begins to free herself up. In a parallel process, I notice that my body is also relaxing in response to her increasing ease. She expresses her fears that she will attempt to control Linda yet again, and her desire to be supportive.

I ask "Who is here?" Wendy chooses auxiliaries to take up the roles of her son and daughter. She positions them with her son standing between herself and Linda. I coach her to notice what she has done. Wendy rearranges the auxiliaries, this time placing herself between her daughter and son. As I direct, I am observing Wendy's warm up, and I produce role reversals at warm up peaks. I am watching for the moment of internal conflict, when Wendy is unable to maintain herself as the *loving and nurturing guide* and *Attila the Hun* emerges.

At this point, I interview Wendy about her experience. I invite other participants to act as mirrors to provide Wendy with an opportunity to observe herself in the interaction. I invite group members to name Wendy's progressive functioning, and the coping and conflicted elements. My intention is to increase Wendy's awareness of her experience and the group member's awareness of their functioning. I note that the auxiliaries are not sophisticated in the use of this method and require a little coaching in the process.

Wendy now takes up Linda's role. Following the role training format, I invite the audience members to model alternative roles. I encourage them, as mothers, to experiment, to be outrageous and to play with different ways of relating to Linda. I am prepared to invite the protagonist to observe, if I consider that the intensity of her experience as Linda threatens to overwhelm her. The group members take up the challenge, some more than once, as they warm up and their spontaneity increases. Wendy expresses her enjoyment of the modelling and, based on what she has observed, experiments with new ways of behaving with Linda. Wendy practises, becoming soft and gentle with her daughter. When Linda expresses the desire to go to the bar for a drink, Wendy is able to say no and acknowledge Linda's frustration when the boundary is held firm. The relationship begins to develop as one of mutual respect.

A Sociodramatist's Lens

As a sociodramatist, I think about Wendy's family and the world in which she lives as a social system. I think about how it relates to the work of this group. I think about some of the family systems that other group members have presented, and their warm up to their own functioning. Between them, these women hold much wisdom about the needs children have for integration into a family. I know that most mothers want to be warm and friendly towards their children, rather than turn into *Attila the Hun* or a *screaming banshee*.

I invite the group members to think about situations where new members are joining a family. I say "What is required to assist a new member to integrate into the family?" The issues are named and we begin to create a scenario of a universal family. As director, I remind myself that the questions are always framed with the collective in mind. For instance "What happens to children when they are abruptly moved from one family to another and their need for security is disrupted?" Or "How do you help children manage the grief that they experience when they lose a parent or loved one?" Or "What happens to children when they feel displaced through attention being given to a perceived interloper?"

I invite participants to take up and give voice to the various roles in this social system. The stage is populated with a newborn baby, older siblings who feel they have been replaced by younger siblings, a favourite child, and younger siblings and their relationships with an older child who is raised in another family. There are fathers who have to contend with increased responsibilities, wives whose attention must be shared many ways, and mothers who are struggling to manage the demands of increased domestic work. Parents, who have given away eldest children to grandparents to be raised as is often the Maori and Pacific custom, are also represented along with the eldest children themselves. Via role reversal, the participants in this sociodrama have opportunities to experience many of the roles and through this gain a range of different perspectives and insights.

From the discussion that follows, it is apparent that group members have experienced heightened awareness of the larger social system, and wider perspectives of the issues involved. A sociodramatist seeks this result.

A Sociometrist's Lens

Sociometry is an instrument for measuring the relationships between individuals and in groups. I now employ this method to promote the work of this group. I invite the participants to explore their original social atom. Using Anne Hale's (1998) three concentric rings process, they map out the relationships using physical proximity as a measure, and identify the positive, negative (conflicted) and neutral relationships. In another session, I use the same process to assist the group members to explore current family systems. These activities assist Wendy to take the next step in her development.

I invite Wendy to set out her mapped family system on the stage as a sociogram. She does this, and then begins to explore the quality of the relationships in the system. Through role reversal, Wendy gains many insights regarding the complex set of relationships amongst her birth parents and their parents, stepparents, aunts and uncles, siblings and grandparents. Their stories emerge and come into conscious understanding. Wendy explores her current family system in the same way. She becomes conscious of

the repetitive patterns of estrangement, unresolved resentments, conflict and grief that have been repeated through many generations. The sharing phase reveals that other group members have been reflecting on their own circumstances, and have experienced many useful insights into previously unacknowledged difficulties.

The Four Lenses in Summary

This table summarises the differences and similarities of the four lenses.

Lens	Roles	Issues	Thoughts and Feelings	Situations and Scenes	Modality
<i>Psychodrama</i>	private personal	personal problems social atom repair of inner child	deep emotions both conscious and unconscious	real situations past, present, future self-revelatory	therapeutic can be group or individual
<i>Role Training</i>	roles thoughts feelings and actions	private current behaviours	deep emotions both conscious and unconscious progressive, coping and conflicted emotions	interactive past, present and future	educational and therapeutic useful in organisations and with individuals
<i>Sociodrama</i>	collective social roles	collective hypothetical	deep emotions	less self-revelatory	educational directs attention to human growth useful in organisations and groups
<i>Sociometry</i>	private made public	collective private	light to deep emotional experience	revelatory	educative useful in organisations for groups and individuals

Adapted from Sternberg & Garcia, 1989:6-7

Four Lenses But One Integrative Approach

Regardless of which lens I use to explore the issues that are presented, I know that there are five instruments to be used. These are the stage, the subject (protagonist), the director, the auxiliaries and the audience (Moreno, 1953). I also think about the three

principal stages of a psychodrama, the warm up, the enactment and the sharing and a possible fourth stage of analysis (Dayton, 1994). I may use the full range of techniques, such as concretisation, maximisation, sculpture, soliloquy, aside, doubling, mirroring, empty chair, time regression, future projections, coaching and surplus reality, in various stages. These techniques are shared by all lenses.

With all four lenses, I make good use of the audience members and know that they will assist me in the production of the drama. Auxiliaries too work for the producer - director by holding a role required by the protagonist, enacting a protagonist's perception of the person being portrayed, exploring an interaction, role reversing, understanding the inner world of the protagonist, and by providing contact with real people rather than imagined people (Dayton, 1994).

Whichever lens I am looking through, I believe that the group interaction is as valuable as the drama because group members act as mirrors and doubles for one another. In this way, it is as much a therapeutic context as the stage. Group members learn through the relationships in which they are involved. "The group becomes a hall of mirrors reflecting, amplifying, and distorting the members' images of themselves" (Barnes, Ernst & Hyde, 1999:110). At the end of an enactment, my job is to facilitate the sharing. Audience members express their feelings and reflections to the protagonist. They share what they have learned regarding their own personal story. In this way, the protagonist is supported to reintegrate into the group.

Whether role playing, role taking or in role reversal, the individual is learning to develop new thinking and feeling, and is experimenting with the responses of others (Moreno, 1953). Using all four lenses, I think about the level of spontaneity present and the individual's capacity to develop new thinking, feeling and acting. My role is to produce a satisfactory experience for the protagonist and the group.

Conclusion

In my development as a director, producer and role trainer, I seek to develop clarity regarding the way that I work. I am thoughtful about what will create an environment that is artistically satisfying and helpful for all concerned. I am sometimes limited by my history and imagination. But as I continue to experiment with what is possible, I am inspired to grow and expand my flexibility and a repertoire of progressive roles. I am hopeful that as my inspiration and vision develops, so will the inspiration and vision of the people with whom I work.

REFERENCES

- Barnes, B., Ernst, S. & Hyde, K. (1999). *An Introduction to Groupwork: A Group Analytic Perspective*. Palgrave, Hampshire.
- Clayton, G. M. (1992). *Enhancing Life and Relationships: A Role Training Manual*. ICA Press, Caulfield, Melbourne.
- Dayton, T. (1994). *The Drama Within: Psychodrama and Experiential Therapy*. Health Communications, Florida.
- Hale, A.E. (1998). *Conducting Clinical Sociometric Explorations: A Manual for Psychodramatists and Sociodramatists*. Anne. E. Hale and Royal Publishing Company, Virginia.
- Moreno, J.L. (1953). *Who Shall Survive? Foundations of Sociometry, Group Psychotherapy and Sociodrama* (Student edition). Royal Publishing Company, Virginia.
- Sternburg, P. & Garcia, A. (1989). *Sociodrama: Who's in Your Shoes?* Praeger Publishers, New York.



Philippa van Kuilenburg is a Role Trainer and self-employed Coach, Counsellor and Group Therapist. Her work includes mentoring modern apprentices, delivering training programmes within industry, facilitating groups for parents and personal growth and providing one to one counselling. She is also a mixed media artist, wife, mother and grandmother amongst other things. Her passion is to create a container that assists others to find their creativity. Email: trainingenergy@xtra.co.nz

Book Reviews



Sociodrama and Collective Trauma

By Peter Felix Kellermann
Jessica Kingsley Publishers, London
2007

Reviewed by Jenny Hutt

In this wide-ranging exploration Peter Felix Kellermann draws a comprehensive map of current sociodrama practice and its use in collective healing.

Originally raised in Sweden by European Jewish parents, Kellermann has lived in Israel for 30 years, where he works as a clinical psychologist in a treatment centre for Holocaust survivors and their children. The book draws on his work with a large number and variety of trauma survivors and

introduces the work of selected sociodramatists and other professionals around the globe. *Sociodrama and Collective Trauma* builds on his previous publications *Focus on Psychodrama* (1992) and *Psychodrama with Trauma Survivors* (2000), and incorporates revised and extended versions of previous articles on interpersonal conflict management (1996) and sociodrama (1998).

Passionate but Measured

Kellermann's writing is imbued with a concern to alleviate human suffering on a collective scale and a strong motivation to prevent more of man's inhumanity to man. While this deep commitment informs his work, his presentation is dispassionate, orderly, descriptive and measured. His first chapters introduce sociodrama, collective trauma and society. These are followed with thorough explorations of crisis sociodrama, political sociodrama, diversity sociodrama, conflict transformation in sociodrama, post war healing and reconciliation. These chapters introduce the roots of sociodrama, and provide examples of sociodramatic practice, guidelines for conducting sociodramatic interventions and links to the work of practitioners involved in a range of related work such as conflict transformation.

Balanced

Although he is a committed practitioner, Kellermann's makes a balanced assessment of sociodrama. He acknowledges Moreno's development of sociodrama as a deep action method for dealing with intergroup relations and collective ideologies, and reminds us

of his grand vision to improve intercultural relations around the world. He observes that sociodrama can be surprisingly emotional, touching upon themes about which people feel very strongly. However, he also critically re-evaluates some of Moreno's original claims for sociodrama in an unsentimental manner. For example, he describes as "naive and utopian" Moreno's vision that lasting peace between people and nations will be achieved if the capacity to reverse roles is only cultivated (p136).

He reformulates Moreno's "exaggerated" goals for sociodrama such as human survival and world peace into a more humble form, such as "one of many activities that may help for conflict resolution". Sociodrama, Kellermann contends, "has a unique potential to help large groups of people work through their collective trauma so when the time is ripe they may approach the struggles of human coexistence with more awareness. At such times sociodrama may have a unique potential for bringing large groups of hostile people together and opening up new channels of communications between them. Sociodrama may be seen as filling different functions in the various stages of the development and resolution of conflict. Crisis, politics and diversity sociodrama deals with pre-conflict issues and are preventative in nature. Conflict sociodrama deals with the actual conflict after it has begun and during its course. The fifth kind deals with the various concerns during the termination of conflict" (p65). Thus he acknowledges sociodrama's limits. It is primarily a psychosocial intervention which can only briefly explore political and historical realities.

Large Scale and Difficult

Kellermann's definition of sociodrama is large scale. He works with a minimum of 20-40 participants and sometimes with very large groups of 1000 at some international congresses. This calls for a team approach to leadership. In addition to the necessary knowledge and skills, he advises that sociodramatists need to have a lot of courage, stature and experience to do the job effectively.

He observes that after half a century, sociodrama is still relatively unknown as a method. It is only now that sociodramatists are coming into their stride. One explanation he gives for this slow development is that sociodrama is difficult to undertake. He mentions a number of particular challenges, such as the leader being personally tested in diversity sociodrama and the risk to participants of retraumatisation or revictimisation in crisis sociodrama. In response to both the scale and complexity of sociodramatic work, Kellermann highlights the need for sociodramatists to work in interdisciplinary teams with other professionals.

The book is written in an objective style. In the chapter on collective trauma I found this style rather exhaustive and relentless. Despite such an objective approach, little attention is given to evidence about the impacts of sociodrama. This probably highlights the fact that the field has not yet been the subject of thorough research.

While the book takes an overview position it does offer vivid examples from time to time, which really bring it to life. An example is the story of a Bulgarian man who had spent six years in prison for destroying a statue of Stalin. He re-enacts his 'crime' in a political sociodrama and receives a standing ovation from the audience.

Readers

Sociodrama and Collective Trauma does not claim to train the reader in sociodrama. It is broadly descriptive and probably most relevant to a wide range of practitioners trained in the psychodrama method. As a sociodramatist, I found that the book increased my awareness of practice worldwide, helped me put my own work into context and built an integrated and unified picture of sociodrama in disparate fields.

I felt appreciative of the big view taken by Kellermann and I found the work he described inspirational.

Jenny Hutt is a Learning and Organisational Development Consultant living in Melbourne. She is a Sociodramatist, TEP in training and staff member at the Australian College of Psychodrama.



From One-To-One Psychodrama to Large Group Socio-Psychodrama: More Writings from the Arena of Brazilian Psychodrama

Edited, translated and published by Zoltàn (Zoli) Figsch
2008

Reviewed by Judith McDonald

This, the second book of Brazilian psychodrama writings edited and translated by Zoltàn (Zoli) Figsch, is made up of a collection of 16 articles by leading Brazilian psychodramatists, some of whose work has thus far only been available in Portuguese. The book has two distinct parts, the first focusing on the theory and practice of what the Brazilians call one-to-one psychodrama psychotherapy, and the second on large group

socio-psychodrama. Figsch provides an introduction to both.

Valéria Brito leads off part one with a chapter on the theory and practice of one to one psychodrama psychotherapy, posing some thoughtful questions along the way. She wonders whether one to one psychodrama is a deviation from, or an adaptation of the socionomic project and questions how, considering the limitations imposed by a group configuration reduced to the minimum, the psychodramatic dramatisation can be made viable in the individual situation. The following chapters present a range of useful practices, from starters that can be used to assist a client's warm up to dramatisation, to

the use of toys and figures in concretisation.

A number of the contributors offer thoughtful contemplation about their work. For example, Rosilda Antonio presents us with her reflections on the significant shift she has made from a predominantly medical model to one incorporating the one to one psychodramatic method. In Chapter 5, Leila Maria Vieira Kim argues provocatively that the best therapeutic use of tele and transference may be made when the therapist is prepared to analyse the impact of these on his or her private self.

In other chapters, Zoltàn Figusch relates bereavement to psychodrama theory. Using a clinical example, he presents 'the melting clock' as a psychodramatic technique to be used in a one to one setting. Moysés Aguiar discusses how, from a theoretical and practical point of view, spontaneous theatre and the five instruments of group psychodrama relate to psychodramatic psychotherapy. And José Fonseca builds on his extensive contributions to psychodrama theory with techniques for use in relationship psychotherapy, his term for one to one psychodrama.

In the second part of this volume, the focus is on the application of psychodrama in large groups. If this book does one thing well, it is to demonstrate how Brazilian psychodrama is developing its own unique approach. Figusch draws a useful comparison. Here in the West we tend to engage with psychodrama in an ongoing individual or group process, with sociodrama seen as a more separate practice. In Brazil, the term psychodrama is more broadly encompassing, and includes not only ongoing psychotherapeutic psychodrama, but also such applications as spontaneous theatre, living newspaper, sociodrama, playback theatre and street dramas, many involving large numbers.

Anna Maria Knobel places sociodrama into an historical context and includes Moreno's original experiences with this modality. Including theoretical and technical aspects, she presents us with the contemporary Brazilian model, as well as the Brazilian forms of playback and spontaneous theatre, video-psychodrama and tele-psychodrama. The Brazilian movement has taken Moreno's original vision to heart. Rather than waiting passively for the audience to come, argues Regina Monteiro, it is the social responsibility of psychodramatists to go out into the community and actively seek people's participation in spontaneous theatre in public places and thus facilitate social benefits for all.

To illustrate how this is done in Brazil, the second part provides descriptions of large public psychodramas. For example, Cida Davoli narrates a public psychodrama that she produced in the municipal park in one of Brazil's state capital cities, Belo Horizonte. I was moved by her accounts of the experiences of some of the people who found themselves unexpectedly a part of the drama. She emphasises five stages of the warm up process that prepare and maintain spontaneity and creativity in the audience - adaptation to the environment, grouping, preparation for the actor role, preparation for the author role and preparation for the audience role.

Also fascinating were Marisa Greeb's accounts of large public events. In 'The Psychodrama of São Paulo City' in 2001, seven hundred psychodramatists conducted simultaneous street psychodramas in 158 locations involving about 10,000 participants,

and in an even larger event, 'Escenas de los Pueblos' (Scenes of the People), socio-psychodramas were conducted simultaneously in ten Latin-American countries! Psychodramatist Luiz Contro gives an interesting soliloquy of his experiences before, during and after directing one such large group. Arnaldo Liberman raises the question of confidentiality. He outlines the sociodramatic technique of re-plotting, a technique designed to protect the privacy of participants in public dramas whilst still facilitating the interconnection and catharsis of the participants. Elisabeth Maria Sene Costa and Terezinha Tomé Baptista advocate for the return of the living newspaper as a legitimate psychodramatic modality. The authors emphasise its cathartic effect on individuals, and its current and future potential for social and group analysis.

So why, I asked myself, the emphasis on reaching such large numbers? In a chapter titled 'Spontaneous Theatre: A Political Act', Regina Monteiro shed some light. Mass psychodrama began as a passionate response to the political situation in Brazil. In 1984, after twenty years of military dictatorship under which people had been persecuted, tortured and had died of famine, free elections were finally underway again. There was a strong call for participation. Using what she knew best, psychodrama, Regina initiated the 'Psychodrama of Free Elections' in São Paulo with 600 people present. It was the beginning of the return of the people's voice, and a medium by which they were able to begin to heal their repressed past.

Commenting on the São Paulo City event, Marisa Greeb describes it as "a disruptive and liberating act, as it broke away from conservative ways of dealing with the city. It was a revolutionary act, because of a desire of the citizens for more direct and effective actions had been sown simultaneously . . . It was a happy act, because it generated joy and desire to live and it increased the creative potential . . . It was a therapeutic act, because it aimed to overcome the resented forces of being a victim and to revive active and creative potential. And it was also an act releasing new currents of energy into the social environment, and thus starting a new movement of group politics" (p239). She explains further ". . . we finally live in a democratic regime; however, we still haven't conquered a democracy in which every citizen can have the means to become responsible for the collective production and creation of their nation's aims and objectives" (p244).

Thus, for Brazilian psychodramatists, large group dramas are politically driven acts where they strive to involve large numbers of citizens. They aim to be collectively responsible for, and reflective about their country and how it is run. This is a goal worthy of the inspiration of Jacob Levi Moreno, and perhaps one that we here in Australia and Aotearoa-New Zealand can ponder upon.

I found this a fascinating, though dense book, which could be (and probably needs to be!) read many times, to take in all that it offers. Each article is a full piece of work in itself. I did find the change in focus from the realm of one to one psychodrama to that of socio-psychodrama a little abrupt, and thought that this book could easily be made into two volumes. It is a book to dip into over and over, and I suggest it would be a most useful resource to have in any psychodrama library.

Film Review



Lars and the Real Girl

Directed by Craig Gillespie

Reviewed by Neil Hucker

When I first saw this film title and read a brief review I was cautious. I thought maybe this was just a new soft porn take on men and blow up dolls! I put off even considering seeing it, until a friend recommended it. To my great surprise, it turned out to be a thoroughly enjoyable film without any of the recent postmodernist darkness and pessimism that frequently accompanies films.

It also happened to be one of the most psychodramatic films I have seen.

I will not go into great detail about the plot because that would spoil the poignant surprises that await the viewer. Moreno explored the possibilities of undertaking psychodrama out in the community, in the factory and in the home. He developed the psychodramatic theatre space with auxiliary actors to make the therapeutic work larger than real life.

This film in total can be seen as taking the format of a psychodrama session but the theatre and stage is the community. Lars (Ryan Gosling), the protagonist, is assisted to work through his profound relationship difficulties under the guidance of a psychologically-minded family doctor, who is the director. With the family and the townspeople providing beautifully adapted auxiliary ego support, Lars is allowed to follow his own creative and spontaneous warm up.

From an extremely underdeveloped social role repertoire at the beginning of the film, Lars' social roles and spontaneity emerge and progress. All players in his drama develop their own empathy, tolerance and understanding as Lars moves from coping by withdrawal to moving towards others and allowing them to engage with him.

In reality, I think there would be more community antagonism and derision of Lars' particular social roles than the film reveals. Nevertheless, this film does highlight the value of a community behaving like an ideal psychodrama group with love, safety and respect for social healing and social atom repair. The apparent healing of a delusional psychotic disorder in Lars may draw some clinical criticism but the symptomatic resolution is well within the boundaries of what is reported in psychiatric clinical practice.

Overall I found the film enjoyable and very instructive, and recommend it to be seen. It is a lovely portrayal of a psychodrama being produced naturally out in the community. The film reminds me of J.L. Moreno's dictum in *Who Shall Survive?* (1934), that psychodrama can have no greater goal than to be therapy for the whole community.

ANZPA Conference 2010
Sydney, Australia

meeting at the edge

Thursday 21st to Monday 25th January 2010
Sancta Sophia College
Sydney University



Pre Conference Workshops: Wed 20th & Thurs 21st January

- *Psychodrama and Inner Aggression:
Meeting at the Edge of Conflict - Yaacov Naor, Israel*
- *Someone Untied Your Camel:
Living with Order and Disorder in Social Networks - Chris Hosking, Australia*

Post Conference Workshops: Tues 26th & Wed 27th January

- *Culture in Action - Jenny Hutt, Australia*
- *The Art of Psychodrama Production:
Delightful Artistry, Dynamic Method - Don Reekie, New Zealand*

For details & updates: <http://anzpa.org/conference>

Guidelines for ANZPA Journal Contributors

The Purpose of the Journal

The Australian and New Zealand Psychodrama Association (ANZPA) exists to establish and promote the reputation of the psychodrama method, to set and maintain standards, and to facilitate professional association between its members. The journal aims to assist in the fulfilment of these purposes by the dissemination of high quality written articles focused on Moreno's theory and methods, and their application by practitioners in Australia and Aotearoa-New Zealand.

Contributors

Contributions to the journal are welcomed by the editor on the understanding that

- the contributor is either a member or associate member of ANZPA, or a trainee in an ANZPA accredited training institute
- the article is not currently submitted or published elsewhere, nor will be in the future
- the article is not currently being written, supervised or examined as part of ANZPA's accreditation processes
- the copyright for all material published is assigned exclusively to ANZPA, including the right to reproduce the article in all forms and media. ANZPA will not refuse any reasonable request by a contributor to reproduce an article

As a mark of appreciation, each contributor to the journal receives two copies of the issue in which their article is published.

Journal Articles

Articles might focus on one or more of the following areas

- An exploration of underlying philosophies, principles and theoretical considerations
- An application of the method to a particular field of endeavour, social system or population
- An examination of what psychodrama has to offer, and can learn from, other approaches to the fields of human relationships and human potential

The audience for an article is the journal readership, and thus the ability to role reverse with the readers is essential. Papers typically include case examples or research from the writer's professional experience and practice. They may include tables, diagrams and

other illustrative tools to enhance understanding. The length of an article is not pre-defined, and is negotiated between the contributor and the editor. However, articles typically range between 2,000 and 4,000 words. The ANZPA Journal uses the American Psychological Association (APA) reference system, with some slight variations. To assist the layout process, contributors are asked to use simple, uncluttered formatting free of headers, footers, borders, tabs, footnotes and complicated style types. Endnotes may be added if desired.

As is usual in journal publishing, articles are preceded by an abstract and keywords section. This assists in the citing and dissemination of ANZPA Journal articles via databases. As well, contributors are asked to provide a short, two-sentence biographical that establishes their professional identity, work and current focus. A photograph is optional. Contributors may include their email address.

The Writing, Editing and Publishing Process

A contributor who agrees to publish a paper enters into a dialogue with the editor, focused on the contributor's plans for the article. These conversations, usually conducted by email, will invariably include an undertaking to send a complete first draft to the editor by the end of April. Articles are typically sent by email attachment.

Once the first draft is received the editor assigns a member of the editorial team to work with the contributor. The editorial guide provides guidance, support and coaching for the structuring, shaping and editing of the article in preparation for publication. The purpose is to maintain high quality contributions for the benefit of the journal's readership and reputation. Guidelines are provided to both parties to support a productive collaboration. This editorial relationship is viewed as an important part of the writing process, and often results in increased role development, learning and enjoyment for both contributor and editorial guide. An added outcome of such editorial relationships is the building up of the sociometry of ANZPA.

In line with the concept of an adequate warm up, the editorial process is expected to take no longer than two months. Contributors are asked to send their finished articles to the editor by the deadline date, 31 July.

Contact Details

The current editor of the ANZPA Journal is Bona Anna.

She can be reached via email at anzpaeditor@gmail.com

Work: +61 2 98501819

Mobile: +61 0 451046928

Address: Centre for Research on Social Inclusion

C5C384

Macquarie University

New South Wales 2109

Australia

ANZPA JOURNAL # 19

DEADLINE FOR CONTRIBUTIONS

JULY 31 2010

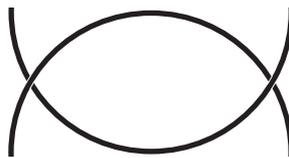
Psychodrama

Sociodrama

Sociometry

Role Training

Group Work



**Australian and New Zealand
Psychodrama Association Inc.**