

# The Flowering of a Rose

## An Illustration of Progressive Role Development

**Jo-Anne Colwell**

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Jo-Anne works as a psychologist in private practice in Melbourne. She is an advanced psychodrama trainee and employs role theory frequently in her work with clients, finding that it leads to many 'aha' moments. Jo-Anne has recently begun a doctoral degree programme focused on the introduction of psychodrama into high schools to help alleviate bullying.

This case study explores the progressive role development of a young woman who presented with complex continence issues. Rosemary had been dry at an earlier age but was now wetting day and night. She had been in and out of foster care throughout her early life, the last four years being spent with her first stable family. Two years ago Rosemary had been diagnosed with a psychogenic stutter and a moderate intellectual disability.

Three sessions are presented to demonstrate Rosemary's progress towards a 'normal' life. A presentation and discussion of the roles at each stage are included to assist the reader in understanding Rosemary's progressive development.

### **First Presentation**

When Rosemary entered the room with Helen, her foster mum, she presented as a timid little waif who had lost her way in the world. There were bald patches in her short hair and her nails and quicks were severely chewed. She was dressed in an ill-fitting school uniform

with very scuffed black shoes. Rosemary sat in the chair curled in on herself with her head lowered. There was an air of fear about this young woman that permeated the room. She started at outside noises as if they threatened her. Her eye contact was quick and jerky. My initial discussions regarding the reasons for her visit were mainly with her permanent carer, Helen. Helen watched me read the case cover sheet. When I read "severe anxiety and depression due to past history of sexual, physical and emotional abuse" and glanced up, Helen lifted her fingers to her lips and indicated that I should make no comment. This I thought a bit strange but complied and commenced to ask other relevant questions.

Helen herself was a picture of eccentricity. She was dressed casually in a mismatched tracksuit with multiple earrings in both ears. She was of indeterminate age, wiry and slight, but with a feisty air. I noted a feeling of strength and determination about this woman as well as a 'take no crap' attitude. I wondered about the number of battles she had fought along the

way. Once seated in the chair she displayed an air of determined calm. Our conversation was focused, with 'no waffle'. This woman was here for a purpose and was not going to waste her time in polite conversation.

Rosemary, with gentle prompting, did eventually answer some questions about her situation. Each word was stuttered painfully with tremendous effort, yet she persisted in finishing each sentence. She appeared pleased that I never interrupted or supplied the words she struggled with. With the completion of each sentence Rosemary made very quick eye contact and uncurled parts of her body ever so slightly. While answering the questions independently Rosemary expressed herself with increasing confidence and her respect for me appeared to grow. Helen also suggested that Rosemary write the answers and she did so with great pleasure. Although aware that there was far more operating here, I focused this first session on the presenting difficulties, secondary diurnal and nocturnal incontinence. Toward the end, Helen informed me that she had not seen Rosemary so informative before. Thinking this a good sign I committed to work long term with Rosemary. Rosemary smiled coyly and briefly made positive eye contact with me, an action I interpreted as her agreement. The commitment to work long term came from my growing awareness that Rosemary was dissociative in nature. Physical manifestations such as small body movements, shudders, occasional rapid eye blinking, the fetal like position and

Rosemary's lack of awareness of her abusive history had led me to form this hypothesis.

**Discussion of First Presentation**

I had begun to create a safe haven for Rosemary by allowing her to express herself at her own unhurried pace, and by quietly accepting how things were for her without too many prying questions. "When the home is secure, the boundaries are intact and the identities stable, the child has ample opportunity to learn how and where he fits into the scheme of things, and to learn how to fit in without disappearing" (Dayton, 1994:23). Through the acceptance, respect and safety created in the first session, Rosemary openly expressed herself from a number of progressive roles, see Table 1. In her safe haven Rosemary was able to grow and explore, to discover how to be in the world.

I suspected that Rosemary had been abused in childhood. I identified a number of role clusters that supported this hypothesis, including *timid waif*, *fear-ridden child* and *hyper-vigilant listener*. I imagined Rosemary frightened in the corner, listening intently, terrified that every noise was a warning that her perpetrators were approaching. The role of *smelly piddler* appears to support the possibility of sexual abuse. In the mind of a child you are less likely to be sexually abused if you smell of urine.

We have seen part of Rosemary's internal social atom. These fragmenting roles were once significant coping roles. The roles in this cluster had a strong protective relationship with one

Progressive Roles	Coping Roles	Fragmenting Roles
Delighted self-expressing writer. Warm receiver of companionship. Safe home-comer.	Reluctant communicator. Scared support seeker. Hesitant confider. Lost innocent.	Fear ridden child. Smelly piddler. Timid Waif. Angry self-harmer. Hypervigilant listener. Hesitant fearful stutterer.

Table 1: Role Analysis of Rosemary in the First Session

another, functioning together to alert Rosemary to danger and to protect her from harm. Whether they communicated with the inner self or other clusters was as yet unknown. The nuances in Helen's and Rosemary's behavior and language about the daytime incontinence were indicative that the role clusters within Rosemary did not communicate. Rosemary's answers displayed no knowledge of the abuse she had, to me, so clearly suffered. The cover sheet information and the clear instruction to withhold discussion about it also indicated that there was a lack of internal communication. As a clinician I know that when a child is abused by members of their family of origin, internal protective mechanism are set in place by the child, enabling them to feel a sense of safety in an unsafe environment (van der Kolk, McFarlane and Weisaeth, 1996:15). It is possible that the relationships between the roles may have been damaged and internal communication may have been halted. Rosemary's personality disorder may therefore be the result of a lack of communication between divergent roles and not separate developing personalities.

Helen had taken on the role of *protective parent*, fulfilling an unrecognized 'act hunger' in Rosemary. Rosemary appeared to cling to this unfamiliar but much needed role. Rosemary's act hunger is likely to be embedded in the somatic roles of her infant self. Moreno (1964:173) describes this stage as '*the matrix of identity*'. The baby's identity is entwined with that of the mother's. They are as one unit. Moreno goes on to describe the mother as the baby's double. Helen had become Rosemary's double. When Helen relaxed and shifted from *wary information giver* to *pleased information provider*, Rosemary read this as a signal for her to relax. The 'softening' in Helen allowed Rosemary to shift her communication role from *hesitant fearful stutterer* to *hesitant confider*, a coping role. Helen's shift to *supporter of self-*

*expression* enabled the transition for Rosemary to the progressive role of *delighted self-expressing writer*. Thus, Helen's shifts from coping to progressive roles allowed Rosemary to feel safe enough to uncurl herself and contribute to the discussion. In contributing, Rosemary commenced the transition from fragmenting to progressive roles.

Safety and trust were established through the progressive roles that I displayed. Helen doubled this trust with the shift in roles that occurred in her from *wary information giver* to *pleased information provider*. Helen's trust allowed Rosemary to trust me. My role of *calm information collector* and the respect displayed for Rosemary's attempts at communication were also vital contributors in the transition from fragmenting to progressive roles. The calm stability of the *warm caring companion* provided a sense of safety and an element of reassurance for Rosemary. There was no pressure to perform but an acceptance of what was. Rosemary displayed an understanding of this with the emergence of *warm receiver of companionship* and *safe homcomer*. There was a real sense of relief and safety at the end of this first session.

### **Second Presentation**

Twelve months later Rosemary had become violent towards her permanent carer. The pediatrician prescribed Risperdal. This was a turning point for Rosemary. The medication reduced the violent behavior and seemed to help shift the 'fog'. Numerous changes occurred within Rosemary and for the first time I noticed that she was not solely focused on a fear of living.

Rosemary described the changes as something of a miracle. She woke up one day and was no longer angry. Rosemary's previous thinking processes had been very concrete and focused solely on survival, allowing for little abstract thinking and no projection of self. Now she was

thinking about her family and questioning what she was doing at school. Now in year nine, Rosemary described an inner conflict that she experienced regarding school. A part of her felt that she was unable to cope with school. It was all too hard and she was unable to do the work or talk to the teachers. Another part of her maintained that she could do the work because she had been able to in year six, a time of her life that she described as 'normal'. By this stage Helen had been in the role of mother for a number of years. The psychodramatist in me leapt at the chance to put this conversation into action. With great enthusiasm I grabbed my toy box and asked Rosemary to pick a toy that represented the confident year six Rosemary. She looked at me with great doubt and confusion but did as I asked. I then invited her to select a toy that looked to her like the confused unsure Rosemary in year nine.

Two toys were placed on the desk, Pikachu the *confident, normal year-sixer* and Baby Simba, the *scared/unsafe/work too hard year-niner* (Diagram 1). Pikachu and Baby Simba faced one another. With prompting, Rosemary placed her hand on Pikachu and started talking. A brief description of life in year six ensued. There were friends,

homework was easy, good marks were obtained. Young Rosemary spoke with teachers and students and the world seemed familiar and safe. Then it was Baby Simba's turn. Everything had changed and become confusing. Life was very scary and nothing felt safe. Schoolwork was too hard, there was not enough time to think and she was unable to talk to anyone. I suggested gently that *year nine Rosemary* ask *year six Rosemary* for some advice. *Year six Rosemary* provided the following coaching. Schoolwork was not too hard. Rosemary was capable of learning. She had always being a good student who got A grades. She could chat to people. She was with Helen. Life was safe. "You know your school, where everything is, so it will be okay. I am inside you *year nine Rosemary* and will be there when you need me". *Year nine Rosemary* thought about this. When asked how she felt about school, she said she felt confident, capable and courageous. School was a safe place and the work would be fun, interesting and challenging. She would be able to talk to her friends. Rosemary selected a second Pikachu to represent this new role, the *confident capable student*. At the conclusion of the session Rosemary looked far more confident and relaxed than before.

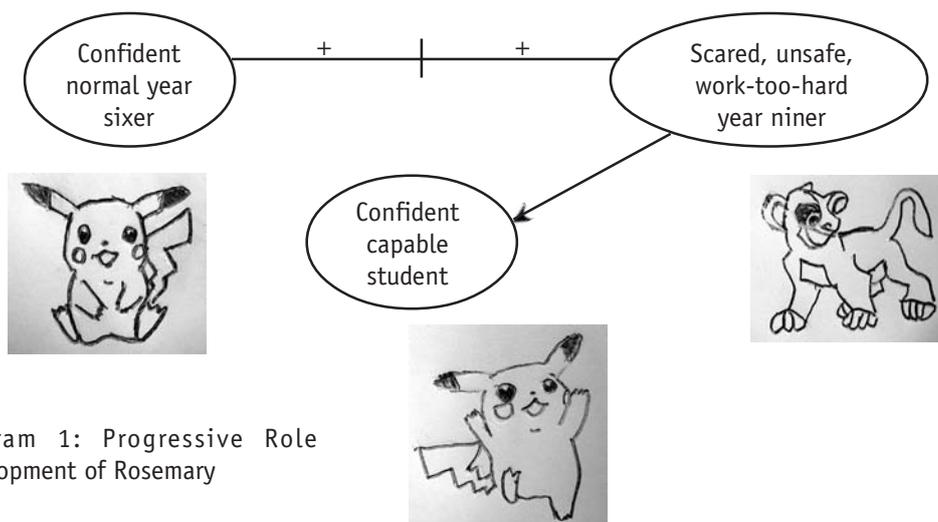


Diagram 1: Progressive Role Development of Rosemary

### **Discussion of Second Presentation**

The new and unfamiliar role, *confident capable student* (Diagram 1) was supported by *year six Rosemary*. An intra-psychic discussion had occurred that allowed communication between roles, and thus the emergence of a role relationship. Here were signs of ... "*the most significant development within any specific culture*" (Moreno, 1964:161). A rose bud was developing. The director within me was delighted about this progress. During the session I contained my excitement, concerned that too much expression of emotion would frighten Rosemary and she would withdraw into a protective shell. I tempered my delight and spontaneity with calm reassurance. I coached Rosemary in her roles and supported her efforts at internal dialogue. I gave voice to her unspoken emotions by doubling her. I mirrored her delight as she recognized the *capable confident student*, and felt reassured myself by the emergence of this new role. My analysis had been on track and my directing adequate for the occasion.

In subsequent sessions Rosemary talked infrequently and quietly about the 'real Rosemary'. The 'real Rosemary' was a well-kept secret. She was confident, capable, safe, communicative, happy at school and self-motivated. I held my breath as I listened to these tentative unfoldings. The 'real Rosemary' was so delicate and fragile, like a rose bud gently unfurling. Frighten her and the bud might wither.

### **Third Presentation**

Today there was talk of Mr. Smith, a teacher at school. Rosemary was struggling with an assignment and had been too scared to ask Mr. Smith for help. This revelation led into a general discussion regarding Rosemary's problems at secondary school. I directed Rosemary to stand and demonstrate how she felt when walking around school. She bent over and took up the

stance of a person carrying a large boulder. When I reflected this back to Rosemary she looked at me blankly. Mirroring and doubling her, I shuffled around the room as though I was carrying a heavy boulder. My back and shoulders hunched over. I complained about the heavy weight I was carrying. Smiling, Rosemary recognized herself. I then directed Rosemary to imagine that she was carrying a big boulder that represented her school problems. Rosemary shuffled about reciting aloud her school problems - inability to talk to teachers, confusion regarding timetables, rooms and conversations, increased expectations of her since she had received an A grade for a piece of work. The boulder appeared to become heavier with each new complaint. I asked Rosemary if she would like to drop the boulder, suggesting that she deposit it, along with all her problems, in the corner of the room. With great relief Rosemary dropped the boulder and circled the room, her posture transformed. She walked upright without shuffling, her head held high.

Rosemary was delighted to have left her problems behind. "*It is good*", she said "*not to be using them as an excuse not to be normal.*" As Rosemary continued to circle she described what it was like at school now. She was able to question the teachers, do the schoolwork, follow conversations and chat with friends. She was aware of the capabilities of the 'real Rosemary', and knew that it was 'okay' to be a normal young woman. Scary as it was for Rosemary, she was coming to realize that she no longer needed to rely on aberrant behaviors to feel safe in the world.

### **Discussion of Third Presentation**

In the foster care system within which she had grown up, the young Rosemary had created a *helpless timid waif* to protect herself from harm. She had withdrawn from the world into her inner self and presented fragmenting roles when

necessary. She had discovered that if she smelt unpleasant she was likely to be left alone, that if she was quiet and compliant she would not be asked questions. Rosemary had created safety for herself by constructing a false sense of reality. The coping roles that had kept her safe as a child had become her familiar companions. Now, however, she was experiencing safety, family security, love and nurturing. *Rosemary with her boulder* was overwhelmed with positive experiences. They posed internal conflicts for her. "If this was the way it was meant to be, what do I do with my birth family and past foster care experiences? How am I meant to be in the world?" How, indeed, does one learn to relate from a place of safety when there has never been one before? How does one stay fully aware of all that is happening? These were the difficult questions that often overwhelmed Rosemary as she undertook the process of healing. They were questions that I was also asking myself. How does one develop progressive roles when the lines of communication within the internal culture are disrupted? How does one re-

establish contact within the inner self after such a long fragmenting process?

At school Rosemary had been developing and testing the role of *the confident capable student*, very slowly and with great subtlety. For example, she had achieved an A grade for a piece of work, had asked her art teacher a question, had attended classes on time and was dry during the day. During her drama Rosemary had been able to expand this new role even further. As well, there was within Rosemary an *intelligent creative genius*. It is possible that this role was the only one in communication with Rosemary's inner self at the beginning of the work.

Rosemary appears to be struggling with the task of understanding her world. It is now very different from what it used to be, and this very difference is the catalyst that is enabling her roles to be in dialogue with one another. The 'real Rosemary' is the metaphor for her inner self (Diagram 2), which is gradually emerging through the developing progressive roles.

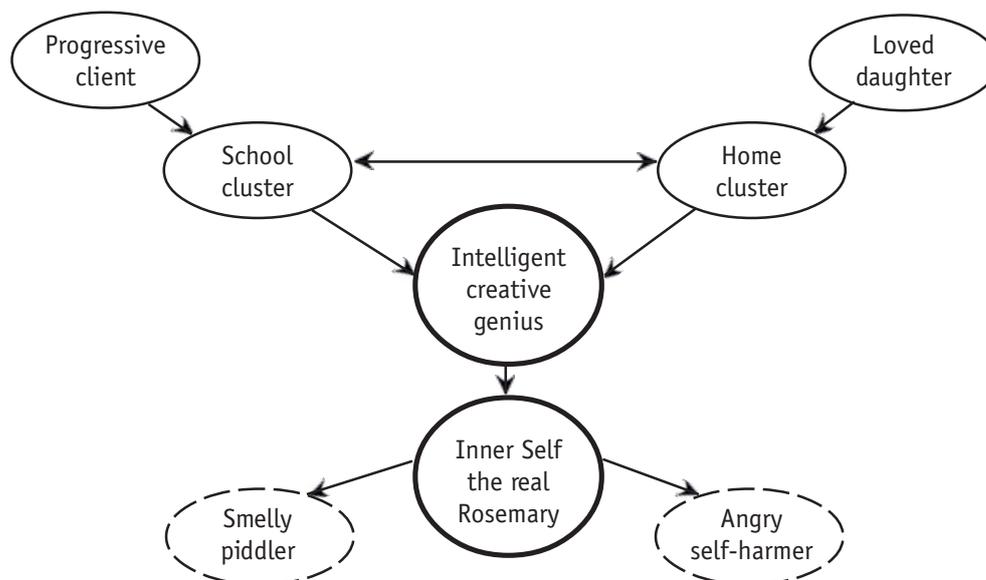


Diagram 2: Representation of the Internal Culture of Rosemary. Solid line circles are developing roles, dotted line circles are diminishing roles.

Communication between roles has also increased. The experience and understanding of safety has been communicated from the home cluster to the school cluster of roles facilitating the development of the progressive *confident capable student*. The rosebud is continuing to unfurl.

Now that protecting her inner self is no longer Rosemary's driving force, she is becoming aware that some of the old roles no longer 'fit' her current identity. Rosemary's task is to continue developing progressive roles that will allow her to be present in the world in a complete, whole, healthy way. As Moreno (1964:157) so aptly stated, "*Roles do not emerge from the self, but the self may emerge from roles*".

#### **Summary of Presented Sessions**

These three presentations provide insights into Rosemary's internal culture. We have glimpsed fragmenting roles that have developed in response to an abusive childhood environment. These roles may once have been coping roles. They allowed Rosemary to protect her inner self from the abusive world around her. Now in a supportive, nurturing environment these roles are a hindrance. Rosemary struggles at times to develop and maintain the growth of progressive roles because her current world is so different from the one in which she grew up. She is very much like the newborn baby who struggles to make sense of what seems like an overwhelmingly confusing world. In that sense Rosemary's journey is similar to our own. She is just starting it at later chronological age.

Throughout this process my role has been to provide support and guidance for Rosemary. In doing so I have taken up a range of roles - *open clinician, naïve inquirer, encourager of difficult feats, warm hearted companion, clear seer, provider of fun, enthusiastic director, empathetic companion and keeper of secrets*. I had formulated a hypothesis

during the first session. Rosemary had survived multiple abusive situations in her childhood and had thus developed clusters of divergent roles with no intra-communication. Rosemary operated at a level of disassociation that prevented her from coming to know the 'real Rosemary'. In my view, Rosemary needed a safe, nurturing environment where she could reconnect with her inner self, reestablish internal communication and develop progressive roles. She would thus be enabled to heal and lead a healthy, normal life. I worked across a number of therapeutic modalities with a range of tools to provide this environment. Cognitive behavior therapy was used to help change the wetting and other ritualistic behaviors. Rational emotive therapy was utilized to alter the irrational thoughts. Psychodynamic techniques were used at times, and psychodramatic methods employed more frequently as Rosemary began to feel safe and no longer focused on survival behaviors. There were times when we relaxed, leaving the therapy room to buy ice cream. These were occasions for coaching to improve Rosemary's posture. Frequently I acted as the mirror or the double. Often I would find myself role reversing in an attempt to understand the anxieties that at times seemed to overwhelm Rosemary. Alongside these techniques was the director providing the fertile ground in which the rose could grow and bloom.

#### **References**

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