

Sociometry and Psychodrama with Teenagers

Improving the quality of their lives

by Jerri Bassi

Jerri Bassi lives and works in Dunedin, and is the Director of the Adolescent Counselling Service which is a community trust project.

This article will focus on my application of J. L. Moreno's principles in a community setting in Dunedin, New Zealand.

Dunedin is a city of 112,000 people with a turbulent downward spirally economy that takes with it many health services. It is my intention to continue to provide young people and their families access to techniques that may assist in their personal development.

I have been invited to present the work of our counselling agency, **The Mirror Project**, to a group of young people attending a life skills program run by the Salvation Army. They requested that I demonstrate my way of working with young people. They knew very little of my work but they knew there were enormous unmet needs in their client group.

I chose the agency name "Mirror Project" as it reflects precisely the quality I want to bring to the work with young people. Psychodramatically the mirror may provide a range of responses to enable the protagonist to improve their functioning. For me, the spiritual quality of the mirror is imperturbable, consistent and non-judgemental.



*Adolescence is a time
of re-planting from the pot
to the earth*

Together these qualities, both compassionate and challenging, provide young people with what I believe they lack most in their lives.

Reading Jacob Moreno's writing about his vision for self realisation, I am inspired to use my learning in this method to assist young people to link their experiences so they might improve the quality of their lives.

The group I expected to work with was to comprise 15 people under 20 years of age who were attending a community based training centre which provided a range of courses, such as computer training and "life skills" training. The training centre staff had been approached by students who wanted to talk about their personal experiences. From these discussions it was clear to staff members that these people were at risk from the effects of the misuse of alcohol, other drugs and related behaviour.

I was relaxed and open in myself as I arrived, I knew there would be the unexpected. I was proved right. The presentation took an unexpected turn as I arrived early and met the other staff in the staff room having their morning tea. As each staff member came in, I continued to introduce myself, maintaining an inclusive and confident manner. One staff member was joking around about having to buy his lunch early before the "hungry teenagers ravage the local lunch shop". I took the opportunity to create more fun out of sour humour and commented on the wisdom of the aged versus the hunger of youth. He became attentive to my presence.

The conversation deepened as people realised what I was talking about – some of the issues that we addressed at the Mirror Project. The things I discussed were: inter-generational effects of alcohol, incest, violence, suicide, murder, and how people respond to such issues; that to blame this generation of youth is to maintain the endless cycle of shaming future generations. The tutors became a group of intent listeners. We continued with our tea.

One of the tutors realised he has a student in his group he would refer to us. He had not known how to deal

with her problems, or who to refer her to. He was worried, sad and caring.

I then focused and talked with the tutor, Jean, whose group I was to facilitate. We discussed other group leaders who had previously come to provide alcohol and drug education for the group. One group leader had focused on the different types of drugs and the known clinical effects. He had delivered the information in a formal school-room style where everyone sat in rows. Jean explained the group felt the way the information was delivered was too formal. She had warmed up to the roles of Hopeful Ponderer and Enthusiastic Explainer as she told me of the group's past experience and explained something of the group dynamics. This discussion warmed me up to the role of the Creative Planner and Flexible Clinician as I gained more information about the group.

My intention was to build on the information the group had already received and create opportunities for them to express something of their experiences in action, whilst alongside their adolescent peers who would provide them with the most effective mirroring.

In the group room

As the young people came into the room I focused on their arrival making sure everyone got a seat and were visible to each other. There were a lot more people than the 15 that I had envisaged – 25 plus two tutors. One staff member decided to bring his group along, after our meeting in the staff room.

My response to this was to take a deep breath and become more expansive. I felt invaded and noticed how everyone was willing to accommodate each other in a friendly

familial way. My personal conflict with this "invasion" reflects my coping in a progressive way whilst in a situation where group rules are changed without warning. The fact that they knew each other and allowed their boundaries to be crossed in this learning environment was likely to have been an extension of what occurs in their homes. My own ability to accept another group or family was challenged yet again !!!

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I noticed the range of responses and how people were with each other. Some playfully jostled and generally took their time to settle down. They were mostly poorly dressed with a strong sense of being able to maintain some fashion consciousness. Tight black jeans were predominant, also tee shirts that displayed a variety of vivid messages from death to flowers. A generally laid-back attitude was apparent. They stretched their legs attempting to fill the centre of the forming circle.

I introduced myself as a counsellor (who enjoys work) in a director-directed warm up. I invited people to participate by encouraging

each person individually. My intention was to contact and value individual group members from the start so as to enable an inclusive group culture, even the quiet ones.

As they picked up the conversation and started naming drugs and substances, I used the blackboard and wrote up their information – starting with hallucinogens, lighter fuel and other solvents used as inhalants. Alcohol was identified much later on the list, as were cigarettes. These are "normalised drugs". There was growing excitement as the group warmed up. I talked of the need for confidentiality when people brought forward their own experiences. I felt it wise to focus on the area of safety as their self disclosures contributed to the heightened anxiety. There were lively responses as group members focused on the need to respect each other.

The next idea I introduced was that there are social influences upon us to participate in the use of intoxicants. The media advertising self-image in relation to alcohol, our parent/peer attitudes and the New Zealand legal drinking age of twenty, versus the young person's social initiation into the pubs (that some adolescents now move towards before puberty). People responded thoughtfully bringing forward experiences like group drinking sessions on the beach and how they generally don't say "No" whilst in the group.

As these social forces were being identified by the group members a creative sociometric scale was forming in my mind. It occurred to me that a greater display and exploration of the variety of influences would assist the group members to develop a deeper awareness of their own experiences.

They were also becoming more comfortable with action. It was at this point that the group was moving naturally from a normal tutored group into a period of action.

I saw that it was possible to continue my warm up to include the whole group in an activity that would demonstrate something of each individual's experience with alcohol and drugs. Through the process of concretisation, the nature and extent of these differences would become more apparent. I was aware that sociometry must start simply with the naive group. I suggested a common scene where everyone was 10 years old. I think that this is a time when young people are still directly influenced by their families and they are likely to have clear memories that relate to significant others.

It was my intention for participants to share a glimpse of their own social atom without any one person having to set out or expose themselves individually in action.

I named one end of the scale "High Exposure to Alcohol and Drugs" and at the other end, "Low Exposure to Alcohol and Drugs". I asked everyone to stand and place themselves along the scale which I walked along whilst presenting the idea. They eagerly responded with a sense of fun. I then interviewed a young man at one end of the scale. We discovered he was in a Boys' Home, at 10 years old, where he had access to alcohol and other drugs. "Obviously not wanted by my mother", he said, "no mother would send their kid away if she cared." He told me he still used drugs to experience a sense of protection. He was 17 years old.

I then asked each group member to respond to the person standing next to them and share something of

what they were experiencing in that moment. They relaxed again as they had an opportunity to be more private. By directing this activity at this time I was maintaining a level of safety amidst self-disclosure.

There were some sensitive issues arising here and it was my intention to protect the group from disclosing too much of themselves by controlling the amount of surplus reality expressed. I was providing an environment where expression could be experienced safely, without the protective use of substances.

Interviewing at the lesser end of the "Exposure to Alcohol and Drug Sociogram" revealed some exposure to alcohol and drugs but more adequate role models providing limits for these people. For example, a young woman whose grandfather was alcohol-dependent was told clear stories by both her parents about him, the mother's father. This empowered her to make healthy choices based on facts.

The two in the middle of the scale believed the level of exposure was normal and one young woman believed in using alcohol, to "get rid of problems". People challenged her as to how much she really believed that view. Not wanting her to be further isolated from the rest of the

group, I firmly acknowledge her view and explored the possibility for change. She was adamant her view "will not change, yet". It was clear to me she was in the roles of Stubborn Rebel and Shy Ostrich, keeping her thinking well hidden.

A young woman responding as an Observant Analyst noted that all those at the greater level of exposure were males. Doubling her response I stood alongside her and echoed her words directly towards the young men. This affirmed her response and also affirmed the developing sub-group of hopeful young men.

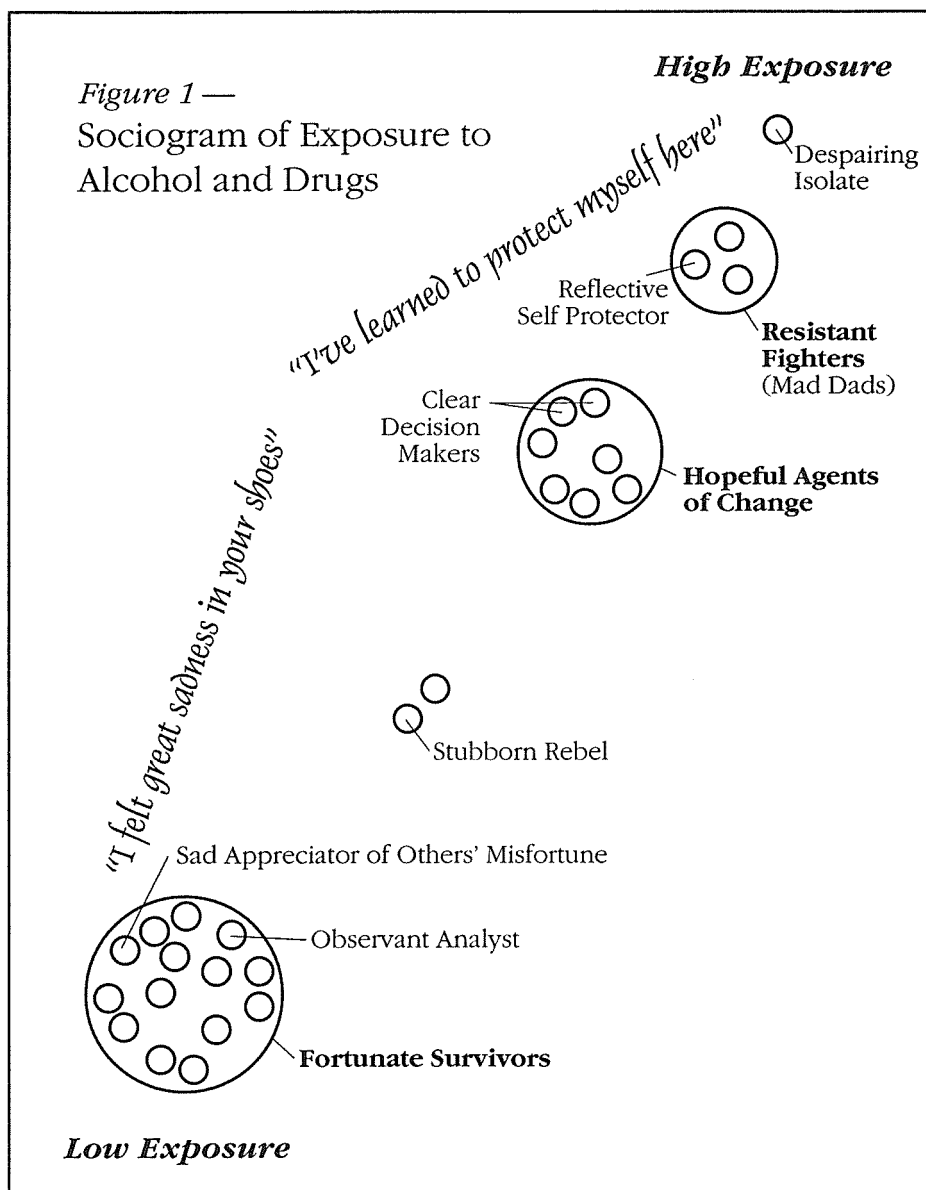
Another young woman spoke to one of the young men at the opposite end who had been at the Boys' Home and said, "I don't know how you do it down there." He responded with angry passion, saying she would "never understand what it's like for someone like me." I asked them to reverse roles, he said gleefully (quietly to me on his way to his new role), "Now I get to be a goody-goody." Immediately I responded as an Enthusiastic Master of Ceremonies and echoed his words to the group. Responding to his auxiliary ego he said, "It feels good down here". The young woman (as auxiliary ego) said, "I can't get into his role". I could see she was nervous and choosing not to take up his role. I felt that reversing roles across the sociogram in itself would achieve an adequate outcome. Reversing back she revealed that she experienced "great sadness when in his shoes". Encouraging her to make that interactive, she let the young man know her experience, "I felt great sadness in your shoes". He responded by saying, "I've learned to protect myself here." Acknowledging that he has had to protect himself with the use of alcohol and drugs, I moved the focus to the group as a whole.

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One of the women at the lesser end of the scale asked two young men to clarify what they had expressed before regarding how they would like to bring up their own children. The two young men had a chat and both agreed to restate they would prefer their own children not to have unguided access to alcohol or smoking. They were in the role of Clear Decision Makers and fearless of other group members' responses. It seemed there was some generational responsibility for change developing on their part. I affirmed their ability to discuss together and come up with a new idea.

There were sub-groups developing at the high end of the sociogram. Initially everyone crowded together. Then, as they talked they physically moved and regrouped. Some remained hopeful that opportunities would arise to assist change. One person was isolated from any group and there were those who were resistant to change.

Interviewing revealed firstly two sub-groups. One formed around the young man who became a protagonist. He presented the conflicted roles of the Reflective Self Protector and Angry No Hoper. He also displayed the embryonic role of Secretive Gleeful Appreciator as he passed me on the stage. Two group members aligned themselves with him and named themselves the Mad Dads, who would expose their children to as much alcohol and



drugs as they had been exposed to themselves. This group I thought to myself to be the Resistant Fighters.

The second sub-group I've openly named the Hopeful Agents of Change as they believed it to be important to move towards change even though it would be difficult. As I named their values they seemed pleased with themselves.

One young man at the highest point on the scale said he belonged

to no group, never wanted to be a father and he didn't care what happened to him. I've named him the Despairing Isolate. This person represented the worst fears of adolescents. As he talked of his values I believe he assisted in the development of the more hopeful sub-group but kept himself isolated.

The young woman in the middle, shyly stated her unwillingness to move saying she was happy where

she was “for the moment”.

Group members at the lesser end of the sociogram revealed themselves to be Fortunate Survivors and acknowledged that even though they were ignorant of the “things going on in the family”, they were protected from intense exposure.

The young woman who revealed “I felt great sadness in your shoes”, I have named the Sad Appreciator of Others’ Misfortunes. I had a sense that this young woman showed signs of coping that could lead to co-dependent relationships unless she further developed the empathic qualities that she displayed. She also had the ability to reverse roles with the young man but due to feeling unsafe was unwilling to express herself in his role.

Ending the Action Phase

I thanked everyone for their creative participation and invited them to return to their seats. This was the time for each person to share their experiences. Full use of sharing is a very useful tool. I was able to make a good assessment of each person’s role. Two members of the group revealed they were already seeing counsellors after I had enquired with whom they might discuss sensitive issues that had arisen for them.

Others said they had friends they could talk to, as well as the tutors on their training course. Several people asked for leaflets advertising our agency and the male tutor who had attended was “inspired not to judge” his students “by what they had presented on the surface”.

The use of action had enabled the group to show their complexity and richness. For a short time the inflexible protection offered by external substances was replaced by

the warmth of flexible humanity. I was invited to return and run a similar group within each of their eight week courses. This has not in fact occurred. I think that this reflects the current attitude that self development is a luxury therefore perpetuating the neglect of youth.

In the car park outside some of the students laughed and talked about the group with each other. I felt satisfied that we had achieved something that enlivened their relationships and that will carry them forward in a positive way for the next period of their day. As the ripples on the pond radiate when a stone enters the water, I felt sensitively warm to these young men and women. The effects of a relatively minor intervention seemed to fan out into their lives with positive potential.