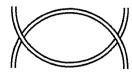


Australian and New Zealand Psychodrama Association, Inc.



No.7, December 1998

Psychodrama Sociodrama Sociometry Role Training Group Work



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JOURNAL No.7, December 1998

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psychodrama method and its applications and developments as a Psychodramatist, Sociodramatist, Sociometrist, Role Trainer or Trainer, Educator, and Practitioner (TEP).

The purposes of the Association particularly include professional association with one another, the setting and maintaining of standards and promoting the establishment and reputation of this method.

Members associate particularly within its geographical regions, at the annual conference, through regular bulletins and this Journal.

This Journal has been published to bring about these purposes through the dissemination of good quality writing and articles on the psychodrama method and its application by practitioners in Australia and New Zealand.

Front Cover Illustration: Die Hand des Teufels, Auguste Rodin, 1903

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A Psychodramatic Warm-Up to a Theatrical Rehearsal

by Christian Penny

Christian lives and works in Auckland primarily as a theatre director and teacher. He says, "This has been my passion since leaving school. The mix of psychodrama and theatre stems back to my primary teachers Bridget Brandon and Francis Batton at the Drama Action Centre in Sydney in the early eighties." Christian is in his third year as a trainee at the Auckland Training Center for Psychodrama.

In the past year I have been making some links between my work as a theatre director and my learning as a psychodrama trainee. The challenge for me as a theatre director, is how to best assist the actor to create a performance that is authentic. I have incorporated and drawn on the principles of group work often in creating shows with companies of actors but, this year, I began to experiment more directly with a psychodramatic warm-up as an aid to acting.

I had observed in my psychodrama training group in Auckland how as the protagonist warms-up to their drama, their involvement in the reality of the drama becomes more and more complete. I am often fascinated by the sheer theatrical reality of dramas I have been a part of. Often, I felt like I was in a film or watching a very good play, the reality felt so tangible. The degree of my involvement was linked I realised, in part, to the degree to which the protagonist entered into their own reality. This is also a key element in a good acting performance – an absence of self-consciousness.

I realised how truly powerful a psychodramatic warm-up could be while participating in a drama in my training group in Auckland. One of our group was enacting a drama from her life. In the drama she was speaking with her daughter in a very loving and appreciative way. Their respect was mutual. As she reversed roles, I noticed the protagonist's eyes

"I realised how truly powerful a psychodramatic warmup could be while participating in a drama in my training group in Auckland. One of our group was enacting a drama from her life ..." change colour from brown to blue. It was a remarkable moment and one I wasn't sure I had truly witnessed until talking with a colleague afterwards who had also observed the same thing. It seemed to me that this was potentially a physical indicator of the degree to which she was becoming the other role. I began to wonder about how the intensity of a psychodramatic warmup could be achieved with actors working with a script.

In May of this year, while directing Arthur Miller's "The Crucible", I had a go at using a psychodramatic warm-up to an acting role. One evening, while rehearsing a scene with an actor, I suggested to her that she think of her own life and the connections between that and the scene she was trying to create. She recounted a time when she had overheard her parents fighting. I invited her to lay out the scene as it had happened. I followed the principal of warm-up, seeking to assist her to create the reality of the time and place as accurately as possible.

She stepped out onto the rehearsal floor and began to set out the scene from her life. In this scene she was in her early teens. She was in her bedroom, lying on her bed, trying to read. Her parents were in another room fighting. There were two other actors present for the rehearsal and they took up the roles of the parents. These roles corresponded almost exactly with the roles they were trying to create in the scene. I warmed her up to the scene and encouraged her to enact it. She was lying on the bed, frightened and stunned by the voices of her parents. As she took up each role to create the enactment, the level of warm-up in the room rose considerably. By the time the conflict had been enacted fully the scene from her life and the scene in the play were almost direct parallels. At this point I invited her to play the scene from "The Crucible". She knew her lines and could enter into the scene immediately. All three actors began to play the scene from the play. It was a very exciting

"As they worked, they were able to bring to life a whole chunk of the play in an authentic way, free from the need of direction. The warmup had created the emotional truth the scene required and from that point the text, and their own imaginations, merged to create an authentic picture of the reality of the play ..."

moment for all of us. The actors were liberated by the warm-up. They began to act in a very free way. They all spoke the words from the text freely, with great sensitivity and a lack of inhibition. The scene appeared real. As they worked, they were able to bring to life a whole chunk of the play in an authentic way, free from the need of direction. The warm-up had created the emotional truth the scene required and from that point the text, and their own imaginations, merged to create an authentic picture of the reality of the play.

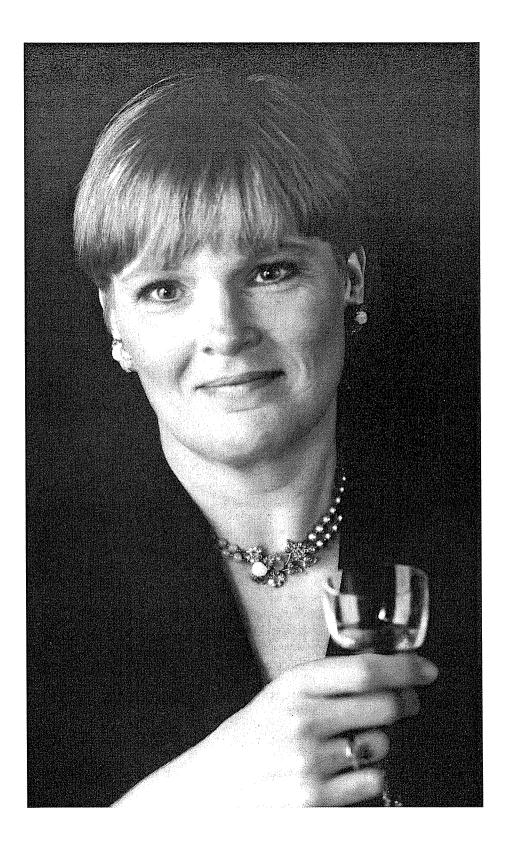
It was very exciting to watch. I have been trying over a long period

to find ways that will assist actors to play text in a way that is both true to the reality of the play and to the actor themselves. Often an actor will leave themselves behind as they become someone else. This creates a hollow interpretation. For this moment it seemed to draw on the actors own imaginative abilities and powers in a concrete way. They didn't have to pretend to imagine what it would be like for that person, instead they discovered this in action.

I think the role I am developing is the *explorative* emotional instigator, the director as catalyst, the assistant to fuller expression. I was aware of being a bit clumsy at times in the setting out of the drama because the role of producer is still developing in me. I am still developing confidence in this stage of production. I am learning about standing next to the protagonist and entering into their world, picturing it as it is for them. There is some delicate ground here too. Actors are used to drawing on themselves but in a more private way, and, in order to respect their previous ways of warming-up to a role, I have only intervened in this way at points were the actor had become frustrated with there earlier attempts at the role.

Working as a director to warm-up an actor to such a personal connection to their role is new and very exciting. There is more light to be shed on all of this and I look forward to discussing these developments with others. mark the outstanding work on the Wellington stage for any given year. Two of these awards were for acting: Robbie Magasina for 'Best Male Newcomer', and Dave Fane for 'Best Male Performance of the Year'. All of the actors acknowledged the significant part Christian played in assisting their performances.

Christian recently used the approach outlined in this article when directing the play 'Sons' by Victor Rodger. This play won four awards in the Chapman Tripp Theatre Awards in Wellington. These awards



Brave, Sensual, Feisty, Warrior

The Passionate Spirit, the Enquiring Vigorous Mind, and the Steadfast Love

Our Friend and Colleague,

Elizabeth Hastings

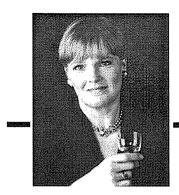
Born 21.1.1949 – Died 13.10.1998

Elizabeth has left us staggering a little. She has captivated us because we know that she indeed had a vision, a clear and defined purpose, and she accomplished them both.

The nature of her spirit, that which can be so hidden or sheltered from our view, now blazes at us directly. And somehow we are ripe with her presence, the lifestyle that so occupied her in recent years has fallen away, and now, a new realm is open to us where we feel her shimmering a spirit, a life streaming towards us with an undeniable quality of movement and freedom.

The first part of this article is some of Elizabeth's writing. In reading what she says here, we can recognise how much she has been an integral part of our Association, and an advocate of all that we aim to create through this organisation. For some of us who will be reading her writing again, we may appreciate her with even greater meaning, perhaps perceive even more clearly, what motivated her and what a tremendous impulse it was. We can listen with renewed depth and be drawn into a very tender intimacy with Elizabeth.

The second article is written by a professional colleague. Through the writing of Phillip Adams, we are carried into another other world that was also a central part of Elizabeth's life, one that may not be so known to us, her friends in psychodrama. We can further realise her influence on many individuals such as Phillip Adams himself, and all the others he speaks of.



Elizabeth Hastings

21.1.1949 - 13.10.1998

In the Preface of her psychodrama thesis, written in 1992, Elizabeth, our respected friend and colleague, writes:

- 6 -

I am lying in bed ten or twelve years ago, ritually rehearsing my plans for suicide. This is an automatic nightly occurrence and has gone on for nearly as long as I can remember. The thoughts are distressing and familiar, but do not compel me to action. The ritual is more an unquestioned aspect of my being than the expression of a real wish to die, though its intensity is exacerbated by difficulties in my life, as at the time I am describing. Suddenly, in the midst of this painful anguish, I "hear" what I am "saying" for the first time. What I always understood as "I wish I were dead" I astonishingly realise is "I should have died". The shock of this realisation, the sense of deep "cellular" recognition, tells me I have just understood something of my functioning for the first time. I am experiencing consciously what has been a wordless background noise all my life. The sense that I should have died has been embedded in my somatic being since I did almost die of polio when I was six months old. I digest this recognition over the next few weeks, experiencing desolation at having no place in the

universe. After a while something in me begins to realise that I am indeed alive, and starts to behave as though I should be there. The "cosmic sneer" under whose implacable coldness I have lived for over thirty years recedes and at last I take up my place in the universe.

Many years later, during another life crisis, I am again lying in bed. My head is turned to the left, my left hand rests immobile on my chest, there is pain radiating out from the middle of my chest and suffusing my whole body. There is great fear, fear of disappearing, ceasing to exist, not being. This, too, is familiar to me, but right now is about as intense as I have ever felt it. A tiny voice in the back of my head says, "I wonder how a baby feels when the sustaining gaze is taken away?" The thought passes. I continue to feel terrified of ceasing to be. This is repeated a few times, then, with another chock of cellular recognition, I put the question and the feeling together - this is how a baby feels when the sustaining gaze is taken away. I am experiencing consciously what has been another wordless background noise for my

whole life – the terror of ceasing to exist because the one who is existence is gone. My body is remembering the absence of my mother, probably when I was in hospital isolation in the acute phase of polio. I begin to picture a tiny baby alone and tentatively, in imagination, I stretch out my hand and put it on her tummy.

I reverse roles with the baby, feel the contact, and begin to sob with relief. Alone in my bed, I put my hand on the tummy of the baby that is me; I hold it there as I cry with

"These are two of the personal experiences which have led to my giving a lot of thought to the matter of memory and the events of infancy; they have informed the development of my theory that these evens are embedded in memory and express themselves throughout *life in ways that may* cause great trouble to the unconscious bearer of the memories"

relief. I tell her I am there, I bring her my "sustaining gaze". Over the next weeks I experience a new solidity, a "thereness" inside myself. It has not gone away.

These are two of the personal experiences which have led to my giving a lot of thought to the matter of memory and the events of infancy; they have informed the development of my theory that these events are embedded in memory and express themselves throughout life in ways that may cause great trouble to the unconscious bearer of the memories. In my own life the difficulties of living in a wheelchair were nothing compared to coping with the chaos of a dysfunctional inner structure.

If we take it for granted that good (or good enough) early experiences create a firm foundation for the development of a self which is spontaneous and original, having strong ego boundaries and a healthy level of basic trust, then disruptions at the same stages will, if not properly attended to, result in equivalent dysfunctions – a self which is anxious and constrained, with uncertain boundaries and an unhealthy level of basic fear.

In my work I operate on the premise that this is so, that the apparently obstinate perversity of some people who will not "get better" is more helpfully understood as their being in the grip of some as yet unidentified "background noise" which interferes with all responses to life.

My ability to conceptualise this, and to feel free and unconstrained enough to develop and hold to a theory at all, is largely due to my own therapeutic experiences, and to my training in the psychodramatic method. It is appropriate therefore, and an act to which I have been looking forward for some years, ever since I began to recognise that there was now enough of me seriously to consider achieving the valued goal of becoming a psychodramatist, that I acknowledge with deeply felt gratitude those people who have been my teachers.

In this next section Elizabeth goes into the depth of her thesis, or her hypothesis. She makes a clear presentation of her theoretical basis, she involves/envelops us in her relationship with Moreno, she begins to include us in the excitement of her own discoveries. In this section, we come to know her passionate humanity, her dedication to those she worked with as a therapist, her determination not to settle for mediocre thought, her pragmatism, her ability to teach, and her willingness to speak as an individual.

The Function and Dysfunction of Somatic Roles in Everyday Life

I find myself bewildered by the apparently *kamikaze* behaviour of some of my clients. Even after extensive work, insight, and development of new roles, some people re-enact old, dysfunctional roles, as if compelled to do so by an alien force. They know full well they are not possessed, yet so strong is the role emerging in them that they describe their experience as being "possessed".

In a sense the people in the select group I am speaking about are possessed, not by any external demon, indeed by no demon at all, but by a particular experience which occurred at such an early period in their development that it is embedded in the very fabric of their being. In the clients I have been working with, this experience involved physical events pertaining to their own bodies in the first few weeks of life. They are "possessed" in their pre-verbal process by a force that precludes their further growth. The registration in memory of these events is of necessity somatickinaesthetic or per-verbal cortical memory of olfactory, taste, visual, non-verbal auditory and tactile and kinaesthetic experiences.

This concept of pre-verbal memory is not universally accepted. Moreno described psychodrama as "play for adults" and in that spirit I play in this thesis with these theoretical ideas, with my personal experiences in real life, with the work completed by my client and myself, and with my own predilection for synthesis and pattern. I then offer guidelines to others working with people with similar disabilities.

In this paper I put forward the hypothesis that certain per-verbally embedded events, through their unknown presence and unmitigated effect, colour or shape much of the person's experience of and action in adult life. The effect is present throughout life, though not perhaps an object of focused attention until it influenced adult decisions, adult behaviours, adult relationships.

Some will reject such an idea, thinking that anything so early, so far outside conceptual, verbal or relational stages of development, would be outside the realm of therapy. Early as the experience is, it is nevertheless within the span of being of the individual, and therefore within human comprehension and human contact. The work involved with one client in the unravelling of her life history and work view, the meaning of an overdeveloped role, coming to a new relationship with that role and development of new roles is the topic of this thesis. It is relevant to practicing therapists and counsellors as well as to personality theorists and theorists in the area of psychotherapy.

I hope to stimulate motivation and practical activity such that both the therapist and theorist are able to enter into the life experiences and psychosomatic processes of those who have been traumatised by external physical factors and internal physical malformations.

The Ideas of J.L. Moreno

Moreno's analysis of roles as pertaining to three major categories of somatic, social and psychodramatic has been a useful framework for my thinking in the specific area which is the focus of this paper. Of particular value has been his statement in <u>Psychodrama</u> <u>Volume 1</u> (1988, first published in 1946) that the personality, or self, arises out of the roles, rather than *vice versa*.

My focus will be on certain somatic roles and the consequences of their disruption. I present the other two categories, briefly, in order that my thoughts about these consequences may be more easily understood.

Social Roles

Social roles pertain to the network of relationships and tasks which surrounds a human being from the "There is a paradox inherent in social role labelling; when we attach to a person a social role label we both establish that person in an identity we can relate to, and potentially reduce the person to only that identity, thus creating restriction in the possibilities for relationship ..."

moment of birth.¹ One

simultaneously fulfils a wide variety of roles, some of which are chosen, others imposed. Some will be welcome, others onerous. I, for example, am a daughter, sister, inlaw, aunt, friend, psychologist, disabled person, tax-payer, house owner, voter, church-goer, employee, committee member - and so on. Some of these roles I was born into, some I chose, some I worked and studied to achieve, some are labels administratively imposed, some are the result of external events, some I would rather avoid. Certain adjectives may be attached to some of these role labels, adjectives such as "competent", "regular", "moderately" so the labels relate to some objective, socially recognised characteristics. The broader the range of these "objective" labels which can be attached to any person, the more embedded and involved that person may be said to be in the social matrix.

There is a paradox inherent in

social role labelling; when we attach to a person a social role label we both establish that person in an identity we can relate to, and potentially reduce the person to only that identity, thus creating restriction in the possibilities for relationship.

Psychodramatic Roles

Psychodramatic roles are those that pertain to the unique inner being of the individual. They capture the style, flavour, feel, and meaning of the functioning of a person in any moment. Where social roles tend to be permanent, or stable for some time, a psychodramatic role will belong to a specific situation, a moment, a particular set of circumstances. A person may have a wide or narrow repertoire of psychodramatic roles, that is, may be adequate in a wide or narrow range of circumstances. The more developed is one's capacity for spontaneity, the broader will be one's repertoire of psychodramatic roles. As these roles belong to unique individuals in unique situations, it is more difficult to give examples as these may be ossified into social roles, or become part of the cultural conserve, the expected and demanded range of acceptable behaviours and beliefs. This danger notwithstanding, some psychodramatic roles which emerge in psychodramas are "intrepid adventurer", "tender contactor", "regal hostess", "sensuous lover". The point about these roles is that they emerge spontaneously in adequate response to the moment, and they belong to the unique being of the individual.

The social roles are, on the whole, externally determined, though the range of social roles available to an individual will be related to the range of somatic and psychodramatic roles in that person's repertoire. The psychodramatic roles are, on the whole, internally determined, though the breadth of these will be related to the external roles and events impinging on the person, and to the development and expression of somatic roles, to which I now return.

Moreno and Somatic Roles

The somatic roles relate to the body, to the embodiedness of our being, and are the earliest to be expressed, particularly the role of "eater". This is developed in intimate relationship with the mother, who Moreno describes as an auxiliary ego to the infant, or "role giver" (p.62). Moreno's infant enters the world with a creative genius intact and ready, through the "spontaneity factor" to make what it can of the material presented. Certain roles,

"These first roles to emerge from the undifferentiated 'matrix of identity' of the neonate and physiological or 'psychosomatic' roles which strive towards clustering and unification, towards an organise wholeness ..."

such as "suckler", swallower", "grasper" are already preset and themselves create interaction with the mother. In these observations Moreno anticipated some later research into infant behaviour and physiology. He conceives of the infant as an immediately active and interactive being, never as a passive recipient or an encapsulated entity.

These first roles to emerge from the undifferentiated "matrix of identity" of the neonate are physiological or "psychosomatic" roles which strive towards clustering and unification, towards an organise

"Despite the later interweaving of actions and words, particularly in adult behaviour, it is necessary to realise that in infancy there is no such means of normalised social communication. The impress of this period of life on future development is, nevertheless, pervasive ..."

wholeness. To this end links develop among these roles, integrating them into a unit which may be regarded as a "partial" self. In a similar way the psychodramatic and social roles will cluster to create partial selves. Before these can become an integrated "entire" self of the later development, there must be the establishment of operational and contact links between them such that there can be the identification and experience of an "I" or "me". Imbalances may occur in the clustering of the roles in the three primary categories, or there may be imbalance in the relationship of these areas, which would result in a delay in the emergence of an

experienced self, or in disturbances of this self (p.III). It is with the history of one of these imbalances that I am concerned in this thesis.

The three sets of roles, "in the course of their transactions", help the infant to experience what we call "body", "psyche" and "society" respectively. Given that for the infant at the stage of the matrix of identity, there is no differentiation between any of these areas, it is probable that disturbance in any one of them may "spill over" into the functioning or expression of the others in a way that will have a characteristic manifestation in the person's life. A disturbance in the evolution of a somatic cluster of roles would thus influence the development of psychodramatic and social role clusters, resulting in emotional or behavioural disturbances in later life that may not be readily accessible to description or understanding in verbal formulations.

Of this very early period of development Moreno warns that we should not diminish the "profound distinction" between actions and words which is fundamental to early childhood. Despite the later interweaving of actions and words, particularly in adult behaviour, it is necessary to realise that in infancy there is no such means of normalised social communication. The impress of this period of life on future development is, nevertheless, pervasive. "In this period acts are acts, not words, and the action matrices which develop in infancy are prior to the word matrices which we integrate into them later."

The Role of the Eater

A role is the "functioning form the individual assumes in the specific moment as he reacts to a specific situation in which other persons or objectives are involved" (Moreno, 1977, p.IV). In the related functions of feeding and eating in infancy there are two clusters of roles operating in intimate, mutually reflexive complexity; those of the mother which may be spontaneous, embryonic or conserved, and those of the infant which are spontaneous², embryonic and exploratory. The infant's roles are emerging from the undifferentiated "locus" of the matrix of identity and are "the embryos or forerunners of the self" (p.III).

Of the role of "the eater" Moreno says "characteristic patterns of interaction between mother and infant in the process of eating produce role constellations of the eater which can be followed throughout the different life periods" (p.V). Both the child and the mother, particularly if this is her first baby, are arming up to a novel situation. That is, each is getting involved in something neither of them has done before. The baby particularly comes at first to the situation in a state of complete spontaneity, with no preconceptions or conserved roles. This is the first time, and the baby has to get going with whatever stimulus, reward or response is offered by the mother and the situation.

The mother may have already warmed-up through her memories (conscious or unconscious), imagination, thinking, or sharing with others. She, too, has to get going in this unique relationship with this unique baby, and her warm-up will be affected by the baby just as much as the baby's warm-up is affected by the mother.

The baby becomes attached to the new world through its own physical needs and responses, and through the warm-up of its primary auxiliary, the mother. The baby's self-starting and warm-up capacity is intimately connected to that of the mother; the baby bit by bit getting the whole system going, the mother fostering the warming-up process and co-operating with the baby's striving toward various physiological. psychological and social acts. Where the act is successfully completed the system is established, that phase of development had unfolded "according to plan", and the infant is free to move onto the next thing. Where the baby is not able to complete an act there may develop an "act hunger" which will later be express in repeated patterns of behaviour3.

In the somatic, or physical realm, the warming-up process of the infant "is specialised around many focus areas (zones), which serve as physical starters".4 Each of these zones, small, scattered and weakly related at birth, is formed "on behalf of an indispensable function of the infant, and therefore arouses the infant to concentrate on the acting out of this function." It is essential for the infant to take in nourishment, and to experience holding from its mother, therefore certain physical structures of the infant's body will act together to ensure that this essential thing is achieved. These structures won't be able to complete the act unless the mother brings her milk-filled breast (or a bottle) into the system. When she does this, and the whole process is switched on, "a warming-up process takes place in which the neuro-muscular system and the zone plays a leading role". The baby begins to grasp and suckle, the mother's milk is let down, the baby sucks and swallows, the mother holds, the stomach is filled, and the next or overlapping zone begins to act as the baby

digests the milk (and the mother's body continues to meet the supply). As this process is successfully repeated the warm-up will be established, and the enactment will be smooth and reliable.

Along with all this will go elements of exploration, play, emotional response, satisfaction and so on. These elements involve zones other than those strictly required for suckling and eating, so the whole organism is orchestrated into a complex symphony. Thus a zone is not only the focal point of a physical starter in the warm-up to a "spontaneous actuality state" which is in turn an element in the shaping of a role, it is also the place of emergence of "starters warming-up towards objects and persons". A zone is never isolated from other zones but, when active, to some extent involves the whole organism. Related zones begin to act in concert: the stimulation of one will activate whole regions of the body. In time the baby "will begin to be identical with a large area of the body at one time".

As yet the infant has not developed the ability to experience a self in charge of these transitory, albeit repeating, "selves". There is not a developed "observer", or a stable "I", but rather a series of largely allencompassing "beingnesses".

Consider, then, what may be the outcome if, in addition to the elements necessary to the emergence of an active zone which then contributes to a developing role and experience of self, there are regularly added other, spurious, elements such as nausea, noise, fear or pain. These would become inextricably bound into the warming-up process for that zone, role, self. The "increased specialisation of numerous tracks" for the warming-up process would include and incorporate these spurious elements in the "construction of the experiential actualities" of the infant, quite separately from the biological, physical structures. That is, the neuro-chemical connections which are the basis of all our voluntary and involuntary acts, including mental acts and memory, would incorporate these spurious aspects as part of the "main event".

"The mother may have already warmed-up through her memories (conscious or unconscious), imagination, thinking, or sharing with others. She, too, has to get going in this unique relationship with this unique baby, and her warm-up will be affected by the baby just as much as the baby's warm-up is affected by the mother"

Apart from the baby's own physical starters and zones, there is also the all-important relationship with the mother, who is experienced in the beginning as co-extensive with the infant's own body. Moreno gives the auxiliary ego in the psychodrama situation two functions, that of a required person, and that of guide. A mother, as the primary auxiliary in the infant's life, has the same two functions. As a required person, she must act adequately in the role of a mother, and as a guide, she must develop a clear picture of the needs and rhythm of the infant to assist in the infant's development of adequate functioning (p.59). This is a two-way relationship involving cooperation of effort for the aim of the satisfaction of the child. The "physical adjustment efforts" go together with "mental adjustment efforts" and may be affected by the mother's inaccuracies of timing or care. Thus the infant may be deflected from optimum realisation of this early phase of development.

The mother-child dyad is essential to the normal sequential unfolding of roles in the infant (and in the mother) and is at the same time extremely vulnerable to distortions and difficulties. This vulnerability is recognised in all "psychodynamic" theories of personality development, and in the therapeutic systems evolving from these theories.

Three further points made by Moreno are relevant to the work I undertook with Jackie. These pertain to immediacy, expectancy and amnesia.

As the infant emerges from the matrix of identity, one activity excludes almost every other activity, one focus nearly every other focus. The infant "lives in immediate time [in a] co-being, co-action, and co-experience which, in the primary phase, exemplify the infant's relationship to the persons and things around him, [and] are characteristics of the *matrix of identity* [which] lays the foundation for the first emotional learning process of the infant" (p.61).

The quality of the immediately experienced reality of the infant at this stage will influence the infant's perception of the universe with which, perforce, there must be lifelong interaction.

As the role of "the eater" is shaped there is a reciprocal relationship between a role giver, which is enacted by the mother, and role receiver, enacted by the child. Each participant warms-up to a certain series of acts which develop a degree of inner consistency. "The result of this interaction is that a certain reciprocal role expectancy is gradually established in the partners of the role process. This role expectancy lays the ground for all future role exchanges between the infant and auxiliary egos" (p.62, italics mine).

It also shapes all future expectancies in the emergent adult's relation to the universe.

I do not accept Moreno's dictum that we have "total amnesia" for the first three years of life. He suggests there is such a strong <u>act hunger</u> that the infant organism, living in the single dimension of the present, is totally absorbed in the spontaneous act such that "not the least fragment" (p.65) of the infant's being is available for observation and registration of the experience. The remembering, he asserts, is done for the infant by the auxiliary ego.

From my personal experience, and my experience as a therapist, I conclude that there is no such thing as "total amnesia" for any part of our lives. Memories of per-verbal events cannot be laid down in verbal form. I suggest that the recording of events which does occur in the pre-verbal period is in somatic and not linguistic code, ⁵ and to this extent there is at least a "fragment" of the infant's being observing and registering the experience. It is this "observing fragment" which can be developed in therapeutic work such that the client has the "now I see" experience we call insight. The capacity to "see" provides the

"It is the work of therapy to unravel the crosslinkages between somatic. psychodramatic and social roles and create a space between these automatisms. The protagonist can then experience spontaneity, the 's-factor' which is that aspect of the range of individual expression which occurs in 'an area of relative freedom and independence from biological and social determinants. an area in which new combinatory acts and permutations, choices and decisions are formed, and from which human inventiveness and creativity emerges' (p.51). Where the s-factor is operating there is freedom to be creative in response to the universe"

distance necessary for the client to relate to the experiencing, remembering entity (an earlier self) in a new and spontaneous way.

The great absorption of the infant in satisfying the act hunger could be regarded as the reason that the events and experiences of that time are so indelibly, if non-verbally, "remembered" by the organism that they continue to shape and colour the world-view for the rest of the infant's life. The precipitating events, however, will not be accessible to verbal memory. Winnicott's concept of the transitional object who interprets in verbal terms to the infant is relevant, the transitional object performing the role of Moreno's auxiliary ego.

Difficulties encountered in this period of primary (somatic) role emergence and reflected in a "spillover" into the development of psychodramatic and social roles will be unknown consciously to the adult self who will know of only those early events and experiences which are held and passed on by the original auxiliary egos, or their delegates. My thesis is that the therapeutic process should provide an auxiliary ego to take up the missing transitional object roles of required persona and guide. This auxiliary may be the chosen therapist who confronted with a life shaped in part by events which are out of the protagonist's awareness, enters into a "meeting" with this person.⁶ In Moreno's terms this meeting is more than "a vague interpersonal relation". It occurs when the two persons meet not only face to face, but "to live and experience each other" (1978, p.65).

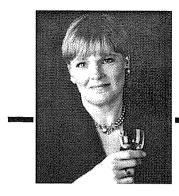
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The creation of this "space between" requires that the therapist be sufficiently involved with client's world to be able to mirror, double and reverse roles, while at the same time being separate enough to operate in a differentiated way as an analyst, magician, and adequate auxiliary. Moreno says "the more original and profound the problem ... a genius sets himself the more is he compelled to use ... his own personality as an experimental tool and the situation around him as raw material" (1978, p.41). I certainly had to use the whole of myself as an experimental and operational tool in my work with Jackie, as I developed and followed up a hypothesis of "organic memory".

- ¹ If not before! A foetus certainly has a social reality whilst still in the womb, and is the object of fantasy, projection and expectation.
- ² Spontaneity of the role includes the aspects of new response to the old or adequate response to the new originality, flexibility vitality and creativity.
- ³ This "act hunger" which results in repetition of behaviours in the search for completion of the act may be compared with the "fixation" of psychoanalytic theory. In both formulations the infant/adult is stuck at an unresolved challenge of

development and not able to move smoothly onto the next phase which is then coloured by the particular "stuckness".

- ⁴ Examples of zones would be the mouth, the stomach, the hands, the olfactory organs, and so on.
- ⁵ There is also the shielding from our memories of intolerably painful events until such time as it is safe to become aware of them.
- ⁶ When working in a dyad the therapist must be both Director and Auxiliary.



Elizabeth Hastings

21.1.1949 - 13.10.1998

In November 1998, Phillip Adams wrote this article for the Weekend Australian. He had a long and enduring relationship with Elizabeth and in this article he highlights many of her very fine qualities. He escorts us into the more recent professional arena where Elizabeth worked for the last five years. This appointment involved Elizabeth in the heart of the political sphere in Australian politics, and Phillip brings to life the highly personal consequence of Elizabeth's work at this level, a personal effect that we tend to despair never occurs.

Phillip Adams Writes:

A constant source of sadness and surprise, The Australian's Time and Tide page sometimes provokes guilty pangs of *schadenfreude*. But there are times when the page is devastating. As when, a few days back, it told of the death of Elizabeth Hastings, a remarkable human being. The photograph showed Elizabeth at her loveliest, with all her humour and warmth, but it couldn't show the bravery, sensuality and feistiness of that warrior in a wheelchair.

I met Elizabeth when working on the United Nations International Year of the Disabled Person. A Council of Australian Governments ministerial committee, headed by Senator Margaret Quilfoyle, had briefed me on a media campaign. I was to sensitise Australians to the issue, to let them see "the ability within disability". It took me no more than 10 minutes to work out the approach. There'd be a filmed portrait of Stephen Hawking with his motor neurone disease, of Franklin Delano Roosevelt, the president with polio. Any of the afflicted mighty would be grist to my media will. No sooner had this approach been ratified by the ministers than Elizabeth Hastings wheeled into my office. She was accompanied by two other women, Edith Hall and Rhonda Galbally. That the lift doors

had opened on two wheelchairs and a pair of crutches was testament to their determination given that our building, like most, had no disabled access.

She explained, very politely, that I was a buffoon, that my campaign on "super crips" (her term) would do nothing whatever for the tens of thousands of ordinary human beings who suffered every thing from the fears and stigmatising of "the ablebodied" to a comprehensive apartheid. "We're sick of paternalism, of people speaking for us," said Elizabeth insisting that I sack Hawking, Roosevelt etc. It had to be the year of disabled people, not the year for them.

Elizabeth told me disabled people didn't want sympathy, let alone pity or charity; they wanted their human rights.

Thinking back, I realise that no one taught me more about human rights than Elizabeth. She made me realise that they weren't merely an issue in Burma or Afghanistan. They were missing here every time our bigotry, our buildings or our institutions placed a barrier in a disabled person's path.

Soon Elizabeth was introducing me to institutions that, from the outside, looked like heavens on earth. But many turned out to be gulags, full of disabled adults who were being patronised and humiliated by the able-bodied administrators who treated them as children. It was unthinkable that disabled people made love, let alone fell in love. Such institutions prided themselves on looking after physical needs – but with "physical" narrowly defined.

I went back to the ministers room mending an entirely new approach under a militant banner, "Break Down the Barriers". The ministers took some persuading; they were uncomfortable with the assertive tone. They could see a campaign leading to demands for new legislation. But the new strategy prevailed. And accompanied by Elizabeth, Edith or Rhonda, I travelled the country taping interviews with hundreds of disabled people whose stories became the basis of a program that went on to win the Golden Lion at Cannes for the best campaign in the world.

Far more important than the award was the fact that, but the end of the year, the disabled people of Australia had joined Elizabeth in speaking out for themselves. There were revolutions in those wellmeaning but stultifying institutions. And although the barriers weren't swept way, they took one hell of a battering.

Our films were simplicity themselves. Disabled people simply told their stories in their own words, usually using wit to soften the anger. Elizabeth, for example, told of the time she'd fallen from her wheelchair and broken a leg, "And while it was in plaster, people's attitude to me entirely changed," she explained, "Suddenly I was someone who'd just had a skiing accident. When people think it's going to get better, they're relaxed. But when they know that you're in a chair forever, they don't know what to say. I sometimes think I should have a cosmetic plaster leg for social occasions".

Then there was the Aboriginal girl I met in Adelaide. She and a Greek boy had been in love – but his family would have none of it. So they'd made a suicide pact, driving into the Adelaide hills with a rifle. He'd succeeded in killing himself, but she'd awoken, days later, a paraplegic in a hospital ward.

But that's not the story she told in her film. She told of her struggle, to get her chair up a tiny step into a milk bar on a hot day. Of her immense difficultly in opening a fridge door. Of her struggle to pop the top off a can, "I took a deep, deep drink and sat back in the chair, utterly exhausted. Where upon a woman came up and shoved a coin into the slot of the can". The gaffe symbolised the way able-bodied get it wrong. Apart from ruining the drink, she'd treated a disabled woman as an objective of pity or charity.

"I realise that no one taught me more about human rights than Elizabeth. She made me realise that they weren't merely an issue in Burma or Afghanistan. They were missing here every time our bigotry, our buildings or our institutions placed a barrier in a disabled person's path ..."

Most chose to make a simple point – and with humour. But here was one film so confronting that the ministers banned it. In it, a frail woman, in her early 20s, said, "I'm glad my mother died" in the gentlest of voices. "I'm sorry, but it's true. While mum was alive, she kept me in cotton wool. I was unable to do anything for myself. Prevented from taking the slightest risk. When mum died my life began. I live independently".

That message was regarded as

too hurtful. "Then let's make another one in which a mother says I'm glad my disabled child died," I argued. "What is wanted is honesty." But it wasn't to be.

Elizabeth was in her late 20s when I met her. She died at 49. In between, she'd gone whitewater rafting, trekking in Nepal and hot air ballooning. A member of Australia's Human Rights Commission, she was responsible for implementation across Australia of the Federal Parliament's landmark Disability Discrimination Act of 1992.

Last year the Federal Government chose not to retain a specialist commissioner for disability discrimination and Elizabeth's job disappeared. Resources devoted to the area were slashed.

No one taught me more about human rights than Elizabeth. Or about effective campaigning. And her lessons went far beyond the realm of disability, being equally applicable to racial prejudice. Her message? Ask the people who are on the receiving end. And don't try to talk for them, let alone at them. Get out of the way and let them speak for themselves.

Yoga and Psychodrama

by Nathan Dorra

Nathan is a psychodramatist and yoga instructor. Nathan recently moved from Israel to Sydney where he now works in private practise.

As a yoga therapist and a psychodramatist I find myself wondering more and more about the interactions between these two fields that I have chosen as a profession. Looking back I'm not really sure I can point out when did I start practising yoga or psychodrama. Both fields have been a mutation of different studies and occupations. My journey passed through studying acting and theatre in Tel Aviv University. Introspectively those where the happy non-awareness days. I have learnt to view and identified the need for stage, expression, adoration from people and being obsessively emphasising on body, fitness and sport as a way to expand and to take out the psychopathology of expression. My chapter of travelling to east Asia took six years, there I met yoga. It started in Thailand as I torture myself learning and practising meditation in a monastery near the Cambodian border. Later in Varanasi in India, a city of death and beauty, I trained in yoga, but still I was looking for results, new abilities. I can't simply point out where, when or how all this came to be a way of living. But I can definitely say that a different feeling of love toward the process of practice took place.

The return home was hard as expected, but it was real and peaceful this time. Back home, in Israel, as the circle brought me back, I started studying psychodrama in 1991 at Haifa University and finished my diploma as a yoga teacher. That constant dynamics between body and soul mind and spirit was probably unavoidable. For me it was not possible to function as a yoga trainer without referring to the therapeutic aspects involved. I also find I couldn't keep clear boundaries between teaching psychodrama and training group psychodrama. That unavoidable connection, in my experience, was a link between yoga and psychodrama. In Israel psychodrama, probably as in any other place in the world, struggles with suspiciousness and fear from the Academy and has been left out of curriculum. Teachers' training programs were the back door for psychodrama to enter university.

In the last three years I was working with teachers in Oranim seminar and Izrael College near Haifa. I have found the majority of them disconnected to their bodies. It was very easy to run a conventional psychodramatic warm-up such as sociogram, games, share something, but very hard to bring people to a warm-up emphasising their body. There was a great interest in speaking about yoga, but almost impossible to bring these groups to start with a simple breathing exercise. I often heard complains like: "I have no energy, my back hurts me ... I don't like my body ... If I breathe deep I get dizzy." I think that each of these statements can be turned into psychodrama where these conflicts can be explored.

But digging deeper, my concern is that our body is a non-defended discover of our self and being. The body cannot hide as good as our manner of speaking. We probably prefer to live near by the body and to ignore it's needs.

As I experienced in myself the possibilities of simply feeling better by listening to my body, this encouraged me to try to share it with those psychodrama trainees by allowing the body to be a part of the session. Often in those sessions I was putting yoga and psychodrama together to a combined experience. In this article I will try to share with you some of this experience that I'm still developing into practice.

Not so long ago I received a sixteen year old girl for yoga therapy. She was suffering from breathing difficulties and her main complaint was, "I often forget how to breath and suddenly find myself short of oxygen." As our work on breathing awareness progressed, the emphasis being on rhythm, consecutiveness, enlarging exhalation, we were slowly aware of the thoughts and feelings that influenced the form of breathing.

The images conjured by the girl illustrated strangulation and suffocation, "... as if a weight is bearing down on my chest". She was afraid of falling asleep and losing her breath. We started using yoga breathing exercises to facilitate her breathing through this blockage. As she gained mastery over her breathing pattern and her fear subsided I directed her to make a sculpture of these pressures which were revealed as a metal weight constructed from chains of all the negative opinions people might have towards her. The type of breathing that melted the metal blockage started as a technical breathing exercise (measured and controlled) and developed into being a psychodramatic one. Could we localise and identify the source of the flow of energy that enabled shifting and opening up new waves of air into her lungs? The answer is a connection of body and mind, the awareness of breathing, yoga and psychodrama.

Another example is a student who was suffering from sleeplessness, felt alert at night, and was very tired during the day. He wanted to find some relaxation via yoga exercises. Our therapeutic journey to the source of insomnia started by loosening the muscle tone. As a result of this, a great fear of being bare, uncovered, threatened, and defenceless emerged. As he set-up a psychodramatic event reconstructing "one of these nights" clear and significant essence to his long and restless nights was formed. That was the anxiety and fear of failing at a new managing job in his professional career. My track with the student went toward "failing at the new job". He created an imaginary situation: "The Fall" (the two words fail and fall have the same translation in Hebrew, as fall illustrate failure), there he stayed for a while. In that scene he finds out that life continues after the fall. He let him self be the "happy failure" in the final scene. To end he created a relaxation pause in which he was lying on his back letting himself to loose the job and still to live. That student finish his studies two months later. He didn't get the job, but he was able to fall asleep. He claimed that the improvement in his ability to relax and the development he did in understanding the roots of his destructive ambitions were both

"In one of the early encounters we had she said: 'I cannot stand people breathing in such way', and she adds voice while exhaling through the nose, named Hudjaai in yoga. 'It is like snoring ... disgusting!'..."

influencing one the other. In these two examples and in many others, I have found that yoga can enrich the psychodramatic process by adding important elements which receive legitimacy and support from a nondependant source, namely; the body. I don't mean that psychodrama is blind and disable in viewing or understanding the body. But emphasising on somatization through the practice of yoga direct links are formed to the fundamental stagnation clearly evident in our body. As I often reverse between the two methods yoga and psychodrama, I like to name these direct links "psychodramatic mines". These are components that can be measured and has immediate psychodramatic stimulus. For example: breathing (duration, rhythm, volume), concentration and

focusing, coping with different degrees of pain and tension, presence, the flexibility level of the body, muscles, tone, and stability. In each one of these "psychodramatic mines" I find representations of the emotional and psychological states of a person and relating to them is essential for diagnosis and for enriching the therapeutic process.

Often people ask me to demonstrate a singular use of yoga as a warm-up to a psychodrama workshop, or just for a session. It is possible, although my intention is for a prolonged use of both techniques. When such an event take place only once, it is interesting to spot fresh and natural reactions because participants which are not trained in yoga have an immediate, spontaneous body response to the exercise.

Resistance is hard to hide, and stands out clearly. Under these circumstances the body reaction tends to be stronger and will differ from one person to another.

I'll share with you these two examples:

The first is a woman, age 36, she participated a group combining yoga and psychodrama and came very enthusiastic toward the experience. In one of the early encounters we had she said: "I cannot stand people breathing in such way", and she adds voice while exhaling through the nose, named Hudjaai in yoga.

"It is like snoring ... disgusting!" Later in the psychodramatic part she as a protagonist had a fight with her partner as she woke up because of his snoring. As long as we were warming-up using yoga exercises, she was annoyed by the sound, she didn't make an effort to concentrate, she giggled, and made jokes about the process. But later in the session she wished to share with the group her irritations that day. She did get the group to support her need to work, and brought us to that argument with her partner the night before as she woken up because of his snoring. In her work there was a strong negative emotion toward her partner. That emotion was translated into symbols of territory. She claimed more space, more territory of her own! "If he is snoring what is happening with you?" I asked her. "I feel it is the same like when we talk. he interrupts me. doesn't let me finish the sentence and doesn't hear me at all!" Then we went back to yoga, as the group helped her to try this kind of yoga breath she couldn't stand. In the new situation she "made the effort" to breath. It was not better in the sense of quality improvement, but it link her straight to the sense of taking place, to snore meant for her in this stage to exist, to be there. The symbolic insight she brought was: "If I breathe that way I feel bigger and wider ... like having a monster inside me." So she was now the monster her self, trying to extreme the emotions by using the noise of the yoga breathing. The feeling she expressed was mainly concern with anger. The monster was the tool she used to allow her self to shift her aggression out. In the following sessions as we came back to the Hudjaai breath, she took her time and shared with us: "I'm trying to learn to live with the monster, but I'm not sure I know who is the monster now, him or me".

The other example is a 65 years old man. He had no previous knowledge in psychodrama. He was training yoga for few years before being introduced to the combined group work. In comparison to his age he seems to be very fit and had no problem in hard postures. I can't remember what was the first catalyst toward work with him. The memory I visualised sharply is the way he showed irritations and couldn't concentrate on easy and basic postures. As I confronted him with that observation he laughed and admitted he was simply in boredom. In his psychodrama he used the whole group to sculpture his life.

His work was huge, 12 people, a lot of movements, sounds he gave each auxiliary. The life that came of his work was identified by him as a fight, built by challenges, slow losers, and strong winner. That split he related to his father's way of treating him, "you can only be a real strong man or you would be treated like nothing." The attitude he had toward this sentence was first very positive. By reversing roles he started to realise there is something in this powerful awareness in contradiction to his presence in the group and his appearance. That psychodrama brought him to the fear of being weak, the loss of control and destruction. The protagonist took us to the death camps of the Holocaust.

As I'm writing to Australian psychodramatist most of who are far away from the holocaust influence about an experience happened in Israel where the majority of people practising psychodrama or yoga are on 2nd and 3rd generation of the holocaust survivors, I have to warn you from expecting new insights or solutions when protagonists find out holocaust patterns in his/her work or behave.

The big issue in such events is the sharing. The long silent sharing of memories, pain, despair and frustration namely the non-recovered scar of the group, probably any group in Israel, is still very real in these days.

At the beginning of a session that

uses this kind of approach we should remember that participants may come with body limitations or in bad physical condition. There is a danger of sociometric polarisation activated by the self-consciousness of the participants who have significant health problems such as obesity, lower back problems (very common in Israel), differences of age, low or high blood pressure, asthma. The training and knowledge that a psychodrama director has acquired is very helpful in observing and assessing the data and refer to the personal level of difficulties of each individual, rather than look for a high quality of performance. People can simply be overweight, non-sportive, stiff and these difficulties should not be identified as resistances. If one is used to certain diet that doesn't obviously mean what we as therapist may wish to understand. It is better to look for the approach, feeling coming through the process, changes, new images.

To have this happened we need time. Introversion, and insights as a result of process is very helpful. Therefore, I recommend a combined class with regular use of yoga exercises as a systematic framework gradually built up among the individuals toward psychodramatic work and group development.

We may wrongly interpret the use of hatha yoga (the practical framework of yoga) as a wish to bring the trainee to a better control over his/her body. Such control may act as a blockage or resistance, which in psychodrama may play a major therapeutic role. Thus it is important to explain that the natural pretence of yoga to gain control over the body is endless and "the way" (the training process) is a major component in the doing. That means "As yoga meets psychodrama, psychosomatic elements play a major role regarding body image and body language in connection with the existing and the repressed in our body ..."

that the process comes prior to the quality or result. The way and the search for control is endless and is embedded with difficulties which should be spontaneously channelled to the psychodramatic process. Control, as far as yoga is concerned, is a release from the burden of illusions which dictates and misleads human beings (Venkatesananda, 1962). A major principle in yoga regards restlessness as the cloud which covers the opportunities of living in harmony and creates illusions which confuse our perceptions of good and bad. In yoga, the way to the truth involves constant pain. Without going through the pain, the participant will be unable to reach the balance between good and bad, the existent and the missing, the comprehensible and the incomprehensible, the body and the soul.

Psychodramatically speaking, this means, living with the new insights which come out of the drama. That type of pain can be defined in both techniques as a good pain, presenting a new development.

 As yoga meets psychodrama, psychosomatic elements play a major role regarding body image and body language in connection with the existing and the repressed in our body. Through this experience I found a track in which yoga practice can support the psychodramatic process. In those sessions the practice started with personal yoga postures. I gave participants the freedom to choose the rhythm and time needed. I found that when the training finish it was important for the group to be seated in a circle in a symmetrical position balanced towards the centre. Such a concept help us focusing on the by-products of the psychodramatic work. Which was about to come. During this sitting, the group continues practising breathing (mudra). I regarded this situation as a "low fire warm-up" toward psychodrama, stimulated by breathing and directed the participants to be tuned to the practice outcome, and the new sociometric changes.

- At the beginning of those sessions I have presumed that the present warm-up of the protagonist will probably lead him/her to work on physiological elements concerning his body organs atom or symbolic work related to his breathing or any somatic problem. In fact some works were linked directly to the actual practice, but I witness protagonists moved towards any direction he or she wishes to. As the nature of process, the first attention had often concern the body, dealt with physical feeling, voices and tones changes through practice. However, the continuation was unknown as in any psychodrama. So often somebody in the group would ask, "How did we get to this?" Or, "Where did we start it all?"
- As I have witnessed many times before, the first 45 minutes of the session, usually brings up an irreversible multi-direction warmup. Therefore, it is important for me to establish a repetitive, systematic and a stable form of training before utilising the method of psychodrama. That "non-spontaneous" form of doing again and again the same group of exercises kept the group in contact with similar materials and memories of feelings and senses. That amazed me how certain exercise could bring up the exact emotion two weeks later although is was consciously forgotten. As one described it: "Every time I'm lying on the stomach and lifting my upper body (cobra) it remind me of my brother. Till this exercise I hardly thought of him at all!" There was nothing specific she could relate to that vision but she mentioned that few times and always during the cobra exercise she thought of her brother. It was not important to find out the connection to the brother as she didn't ask to search further on. Not every image need to be translated or analysed into words. I presume she needed more time for incubation and she will find her explanation when ever she wished to. This kind of reaction supported the idea that the body is a store house that contain heaps of imprinting emotions and memories. Those could easily come out if we learn to observe and listen carefully to the somatic soliloquy. To end sharing with you that particular and very personal experience, I'll simply try to show how this all come to practice. I would like to present two typical postures, which are

different in their physical effect and both need minimal effort to start practising. I often use these postures with participants that have not done yoga before.

- For example, we can start with Capalabati - a breathing exercise in which the diaphragm is pressed inwards and downwards while exhaling through the nose. While exhaling we shrink the stomach inside. Generally I'll pause after the first step and find with the group images to describe the feeling in that posture. More than once I've heard people saying: "I feel as if my belly is sticking to the back". On the next step the trainee exhales strongly and sharply in different rhythms through the nostrils. The way the air is streaming through the sinews (voice strings) causing a change of distance between the strings. As the person progresses, a sound will be heard throughout his or her breathing. The group then listens (one person in a time) and focuses on the Capalabati sound. According to the progress of the practice, I would turn into the psychodramatic tools: a soliloguy, words, images, sculptures, role exchange, drama. Regarding further development I add different gradation of difficulties by extending the duration of the exercise. The sound and the images are likely to appear from the beginning. My argument is that progress and skills development in yoga will not reduce spontaneous emotional and psychosomatic reactions. Rather it will shift the psychodramatic action to a deeper level.
- The other example is Padahatasana – a standing posture of bending forward (also named "head to the knees"). Without getting into the settings and details connected to this posture, it is prominent for the low holding of the head. As for balancing the blood pressure in this posture, a shift in breathing is required. Now we ought to put the emphasis on inhaling followed by a slow and soft exhalation. (Simply try to bend vour head forward and down and stay there for a short while. If you are not use to that you may feel nausea or dizziness.)
- But if we stay like this for 2-3 minutes breath in strongly and exhale softly we can balanced the change of blood pressure and slowly get used to the new position without any side effect. A new observance of the world is apparent now (upside down). The eyes should be kept open for balancing. Lifting the head up is the essence of the posture. The shifting back should be slow, synchronised with the breathing. On this point I pause to allow the group to share reactions. Here are few reactions I found in my notebook, all came out in the same session with a small group of adolescents:

"I feel as if I returned home, I was too far away."

"The view down there is funny, people looks like marionettes, disconnected from each other."

"It gave me the wish to cut my head ... I mean to stop thinking all the time."

"I had a bitter taste in my mouth, maybe because I have eaten just before we started."

- The last reaction was in my opinion "the less psychodramatic oriented one". But as in psychodrama that boy show spontaneity and wish to explore it. I asked him to go back to the posture, this time he had the choice to put the feeling into verbalisation, or to get the next sight that will appear. But I made sure he should not stay too long in the posture as he mention the fact he just finished eating not so long ago. The first link he had was "the sea, the salt that test of bitterness".
- Now the waves opened up different perspective towards psychodrama. "Where am I now? Where was I? What did it feel like down there?" "I'm not afraid of swimming but I hate the sea!!" We went through a monodrama in which he enacted an incident of almost drowned to death in the sea as he was six years old.
- That posture combined quite few more elements toward psychodrama like diving down, climbing up and a change of breathing. In each posture we can find the expression that refers to the movement and to different qualities of experience located in the intra-subjective world of images. I always try to make participants aware of their personal balanced pain. That is the border between pleasure and pain in doing the exercise. My wish is to have a constant awareness of the body limitations of the protagonist. Therefore, I keep repeating exercises through mundane postures such as lying on the belly, the embryo posture, and lifting up the upper body leaning on your hands. The

stream of associations following in this is enormous. The experience is likely to be different in every session according to the emotional and physiological and sociometric changes in the group. I found that staying with the same framework will be an important method and will be necessary for evaluation and sociometry changes. It will also allow a new present and create attention towards listening to the inner self.

I like to end that kind of experience, after the sharing, with relaxation technique. By then the group focus could shift from the protagonist to themselves as an individual. Relaxation starts with the echoing of the psychodramatic event and the senses will preserve and store the colours, odours, and forms of the work.

At the very end and just before saying good by there are two – three minutes of total silence ... end.

The Psychodramatic Technique of Doubling and its Relationship to Zen Buddhist Practice

by Katerina Seligman

Katerina is a psychodramatist and a TEPIT working in the Nelson region of New Zealand. In this article we come to appreciate the more recent integration of yoga and meditation in Katerina's life. We also can see how our connections, themes and concepts tend to be re-worked as we continue to open out to new areas of life.

Psychodrama has been a mainstay of my life for the past 20 years. Throughout he personal and professional work I have done, the quality of my life has improved in many ways. It was when I suffered a severe illness, and as a consequence, began a regular Zen Buddhist meditation practice that I began to find a consistent inner peace and joyfulness, which was previously only erratic and transitory. I have given considerable thought to the nature of this practice and have come to see it in psychodramatic terms as a form of doubling. This perspective has integrated the two most powerful influences in my life to date: Psychodrama and Zen Buddhism.

Consider for a moment the psychodramatic practice of doubling. When we act as a double for another person, we attempt to enter the world of the other, to momentarily put ourselves in their shoes, and to experience them, as it were, from inside their own skins. We aim to take up the same body position and breathing pattern to the other person and attempt to come very close to being that person, that person's experience, their thoughts, their feelings, and their impulses. When we lovingly communicate our understanding to the other person, we give them the experience of being understood and accepted.

Through this understanding and acceptance, the person's experience is validated. This produces a deepening of affect, self-awareness is increased and self-acceptance is fostered.

Several years ago I became paralysed from the waist down, my body's response to the self-abuse of working too hard, for too long on too many things at once. This crisis brought with it hidden gifts. Confined to a wheelchair, in an attempt to make sense of my illness, I re-discovered the simple Zen Buddhist practice of zazen. This practice was advocated by the Buddha to foster compassion and overcome suffering. It consists of sitting in an upright and relaxed posture, and focusing our attention on the breath. This sounds simple but can in fact be a difficult task as inevitably thoughts, feelings and impulses interrupt our concentration. Zazen goes something like this ... "Take a moment to try this: count each in-breath, from one to ten, and then start again at one. When you notice that you have become distracted from your breath, rather than pushing the thoughts away, simply notice their content and give them a label before returning your attention the breath. In the same way, label any feelings and impulses. This noticing and labelling is an acknowledgment. It brings to consciousness those thoughts, feelings and impulses which were previously unconscious or only partially conscious. Labels might go something like this: tense neck, sadness, thought about work; thought about Fred, and so on. Keep the labels simple, and each time you bring your attention back to the breath, start the counting back at one".

I have come to appreciate that it is this practice of labelling thoughts, feelings and impulses during meditation, which is akin to the psychodramatic process of doubling. Moreno developed the concept of doubling as a part of his theory of human development. A young baby starts life in an identity fusion with it's mother. The mother acts as a double for the baby and gradually the baby develops a sense of being a separate entity. If a child is doubled accurately, it develops self-awareness and self-acceptance.

Many of us were inadequately doubled in our early years, and consequently as adults there is a need to re-establish the lost sense of self. In a therapeutic relationship. healing occurs through the corrective experience of having our thoughts feelings and impulses understood and validated. I have come to view Zazen meditation as a process of self-doubling, where, rather than tuning in to the experience of another person, we are tuning in to our own experience. I think that we are in fact doubling ourselves. As we become aware of the content of our thoughts feelings and impulses, and in labelling them with acceptance. there is an increase in selfawareness, a validation and deepening of experience, and a consequent relaxation. Certainly, I have found that practising meditation, or "self-doubling" for a short time every day has brought a subtle transformation to my life, especially it has brought a greater consistency to my experience of inner peace that was previously erratic. The outcomes of greater more self-awareness, greater selfacceptance, are there, not just during the meditation practice itself, but throughout the day. Therefore, this practise has the potential to empower us to live with more consciousness and may impact on every aspect of our lives.

Applying the Concept of Warm-Up in a Life Crisis of Redundancy

by Caril Cowan

Caril is an advanced trainee in the Auckland Training Centre for Psychodrama. She works in the area of nurse education, nursing administration and programme co-ordination.

In 1998 I was made redundant. This is an account of a significant insight that I gained from living through this experience of being made redundant. I applied a general concept of grief to my experiences and found it lacking. The insight I had deepened my concept of warmup. This suggests to me that concepts of grief may be more useful to people experiencing loss if the concept of warm-up is incorporated.

I was a team leader of a supported housing service for people with chronic and severe mental illness, I loved this job. There were constant challenges. Everyday I flexed my professional muscles. I felt vibrant and vitally connected as part of the community of people who do deeply meaningful work in the world.

The Sudden Change

On Tuesday there was an emergency meeting with the other Team Leader, Manager and Director. The service is seriously over budget. In order to continue the Trustee Board and Director had a radical proposal. They suggested that the two team leader positions be restructured into one only position. Because I was the team leader most recently employed, I was the one to go. With a consultative process there is a week of thinking, talking and planning. The following Monday it is final. In one week I have study leave. The remainder of the week is spent handing over to the other team

"I was a team leader of a supported housing service for people with chronic and severe mental illness, I loved this job. There were constant challenges. Everyday I flexed my professional muscles. I felt vibrant and vitally connected as part of the community of people who do deeply meaningful work in the world ..." leader, informing and saying goodbye to clients, staff and colleagues from other organisations.

With the week of study, the reality of the redundancy is blunted. Sitting in the university tutorial room, I remain part of the community of people involved with deeply meaningful work.

Then comes the first Monday I am at home, three weeks since the emergency meeting. My stepchildren have left for school, my partner for work. I am alone. I have one vital purpose in my life today, to buy the newspaper and look in the situations vacant. However, this will not take all day. Then there is tomorrow, the rest of the week and the following week. I have no other demands, no relationships to foster, no accountability to anyone. Life is stretching forward to a great empty space. I am experiencing ... nothing.

Looking through a Grief Lens

I left the Tuesday morning meeting in shock and denial. This cherished position is under threat. It is unbelievable. I have been in the position such a short time. There is work in the team that is incomplete. There is movement in clients I want to be part of fostering. I have wanted to have comprehensive care/ life plans for each client, and embrace a recovery approach. A successful audit immediately prior to my arrival, and the interpretation of the policy by the experienced team members made such initiative impossible. A recently conducted audit has highlighted my concerns. These initiatives were now possible. I don't want to leave, least of all at this time.

The contract I have signed includes a redundancy clause. I cannot prevent the loss of this position. I can only obtain the best redundancy deal possible, leave gracefully, and in such a manner that is least traumatic on myself, staff, clients, but which also honours the work I have started.

Shock. Denial. Anger. Bargaining. "At least I am moving through the grieving process," I tell myself.

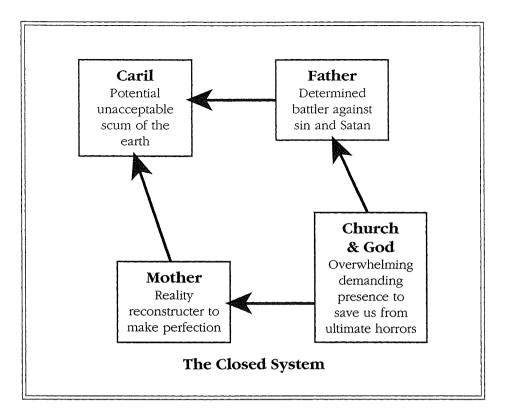
The first week I had at home I started waking at 5am (very early for a night owl). As I hover half awake I am besieged with all the inadequacies I had in the position. I maximise them unrealistically – unbridled self-doubt. I relearn the "real" cause of being made redundant. I am utterly incompetent. It was a cheek of me to have even applied for the position!

When I am fully awake I recognise this as insomnia and thinking of depression, another aspect of the brief process. While I don't like this experience I understand it is necessary not to bypass the depression stage, but to enter into it, as part of the path to resolution.

Looking through the Role Theory Lens

I have a great hunger to live my life fully. I wanted to do more than wait passively for the grief process to work its way through me. I wanted to be real about the situation I was in. I did not want to fall part, fragment. Neither did I want to determinedly hold myself together, coping. I wanted to respond to this real life role-test creatively, maintaining my sense of self-worth and my spontaneity.

On reflection I saw that I was in the role of *wistful, retrospective dreamer*, dreaming my life away, having value in the world only in my dreams of the past. Old coping roles were easy to use. Finding lots of



things to do such as applying for positions, writing for this journal, study, home-making, I was also in the role of *hard working escapist*. I devoured a six volume fantasy-sci/fi series – fantasy escaper. I carefully planned each day so that it was not wasted, so I was also enacting the role of the grimly determined organiser.

In the 5am insomnia sessions I heard the echoes of my social atom. The family of my childhood was dominated by the fundamentalists belief system of the Salvation Army. The whole world was seen as a battle ground between God and Satan. God needed everyone to be His soldiers, fighting evil. We were a privileged family because God has chosen my parents to work full time for him, battling evil and building His forces. Everything was sacrificed to this purpose. To be idle, in unpaid work, was to sin against God risking Satan's triumph and the unspeakable horrors of everlasting hell.

My father, now in his eighties, continues to battle for God against sin and Satan. My mother believes that because she dedicated her life to God, life must be perfect. She constantly reconstructs her perception of reality to create her ideal of perfection.

A Closed System: Part of My Social Atom Re-Emerges

The echoes of my social atom were with me through this transition. If I was not in paid employment I was one of the scum of the earth. It is unacceptable for anyone in my family to be scum of the earth. My father urged me to obtain any work that I could possibly do (McDonald's, cleaning houses, etc). My mother found a reason for me not being in paid employment immediately. Many positions were being offered to me but they were not good enough and I was refusing them! At this point I had not been short-listed for any position.

Warm-Up: A New Approach

Warm-up to action, how we live our lives, is constructed from how we make sense of our world. It comes from the personal meaning we create to provide identity and authenticity in the world. It is stimulated by a cosmic hunger for a full and creative life. It is creative life. It is created when we are young and relates to the psychodramatic roles we have developed.

In my early morning insomnia, it was difficult for me to feel that my life had value. I increasingly found it difficult to maintain my sense of selfworth necessary for promoting myself into new positions. I used the science fiction reading increasingly to dull pain of depression, waiting for a magical answer to my unhappiness, thinking that the grief had to be passively worked through, until resolution evolved.

I cherished the vibrancy, vitality and connectedness of doing the deeply meaningful work of the lost position. Every day I was reinforced in how I mattered in the world. My hunger for authenticity within the world was satisfied.

With the sudden redundancy I had lost my positive warm-up to life I no longer knew how I mattered in the world, or how I connected to others. In the vacuum, learning from my social atom came to the fore. But not being in paid employment I was a sinner, one of the fallen, scum of the earth, only fit for the unmentionable horrors of hell. During one of the 5am sessions I had this insight into warm-up, and saw that I needed to change my warm-up to life.

The personal meaning that I had for my life was that I critically mattered in the world primarily because of this position. Now that I was not in this position I did not know how I mattered in the world. There were many ways in which I did and do matter, but they had been put into the background. I was not seeing them or claiming them. I was passively waiting for the depression to pass, for the grief process to work its way through me so that I could again experience my usual vibrancy.

Role Training

Everyday I consciously focused myself on developing new warm-up. I started each day with a time not dissimilar to morning devotions. At a particular time and place I considered the position that I had been forced to leave, acknowledging the warm-up to it. I then considered my new situation as a time of transition, acknowledging the need for a new warm-up to life and the day ahead of me. I started seeing opportunity in this situation. I could do all those home-making things that get put off when life is busy. I could catch up with friends who are so often neglected. I could give my partner more support in an extra challenging period in his work. I could get ahead on my study. I started looking for a new position with eagerness and curiosity. What would the universe provide? What position would be available and desirable to me? What position would I be right for? I was surprised at how quickly the depression disappeared. Applying the warm-up

concept I re-discovered and became reconnected to the roles of my progressive role system.

The New Warm-Up: Reorganisation of My Role System

Progressive Coping Fragmenting Roles Roles Roles Loving • Wistful • Hopeless self retrospective hermit appreciater dreamer Worthless Fantasy scum of

escaper

diligent

organiser

• Grim

the earth

- Accepting change acknowledger
- Eager anticipator of life
- Creative transition organiser

Cosmic Hunger Satisfied

I found redundancy a particular challenge in my life. The employer made the decision for me to leave this position. It thus threatened the sense of control I have over my life. It threatened my basic needs for economic security housing/shelter and food. It was easy to personalise the redundancy, to feel dismissed and worthless, threatening the basis of my self-esteem.

Concepts of grief that I had developed during my profession life were some help to explain and accept the wise range of varying emotions I experienced while moving through this transition. I readily identified shock, bargaining, anger and depression. The depression stage was experienced as deadening and frustrating. It felt that I could do little but wait for the depression to lift. This fostered coping roles. I wanted to live with greater liveliness.

With a new insight into the application of warm-up, I deliberately applied some of the principles of role training on a daily basis, somewhat like morning devotions. I focused on the life transition I living through and looked for the opportunities each day. I started to wonder what new position I would gain. I was surprised at the speed with which depression lifted. I found the concept of warm-up to life tapped into my cosmic hunger for a deeply meaningful and vibrant life. This warm-up fostered progressive functioning.

Assisting Children and Young People to Participate in Legal Processes

by Clair Trainor

Clair is a lawyer working in a free legal service for young people. She is a psychodrama trainee within the Auckland Training Centre for Psychodrama. In this article Clair describes something of her application of role training in this legal setting.

I am a lawyer practicing in the area of education law. I am one member of a group of nine staff who provide a free legal service for children and young people up to the school leaving age¹. Education law is a relatively new area of legal practice. It involves both advocacy for children and young persons and assistance to them in the multitude of situations where they encounter the law or where their access to education is at issue².

When they come up against the law or the requirements of an institution like their school, most children are not equipped to act on their own behalf. In these kinds of situations I have successfully used role training. My assessment is that role training enables my clients to more fully participate in these forums and to comprehend the events as they occur.

I include two examples of my work where role training has been of assistance: school discipline meetings; and court appearances.

School Discipline Meetings

For example, a child is facing suspension from school for allegedly assaulting another student. The hearing would be before the school's Board of Trustees, made up of parents from the community. The Board of Trustees is entitled to make a decision on whether the accused student is able to continue his/her education or will be excluded from the school³. The accused student has certain legal rights. These include the right to have his/her views heard, though they cannot be compelled to be present.

Although in the majority of cases children and young people want to be present; their desire to actively participate varies. Where a child wants to be present at the meeting, my tasks include the following:

- preparing them for the meeting;
- facilitating their involvement;
- providing the structure necessary to allow them to be heard;

- preventing unfair questions being put;
- ensuring that a fair and lawful process is followed;
- advocacy;
- ensuring by the end of the meeting that the Board have heard their account of events (where there is a difference between that and the account put forward by the Principal);
- ensuring the Board have heard or received any apologies they wish to make;
- ensuring the Board have heard any suggestions they or their family wish to make to 'put right the wrong¹⁴.

My preparation for these meetings involves time spent explaining the process to the young person and their family and "role training" them to be as spontaneous as possible in this environment. There has also been a change required in my professional identity in this situation. This has taken the path of the *fighting advocate* becoming the *facilitating advocate*.

Typically, I will set out a number of scenes. For example, I will invite them to practice telling a member of the Board any information that they have indicated is important. This may be about their plans to sit school certificate that year or their fears that exclusion from the school will severely undermine their chosen career. Aspects of the method I have found particularly useful are to use:

- the setting of the scene to educate them about the functions of the various people who will be present;
- role reversal to provide a rehearsal for the meeting;
- mirroring, particularly when they are having difficulty expressing themselves (this often provides

an opening for a more real discussion on their concerns).

Court Appearances

For example, a child has complained of sexual assault by his/her teacher. The police are prosecuting the teacher. In these situations children may have to give evidence or appear as witnesses.

When educating children about the court process, it is necessary to avoid coaching the child to deliver the 'right' answers. However, it is not reasonable for children to be left to get by without guidance in dealing with questions in this very intimidating forum.

When preparing people for court my focus is on providing information and practice at answering questions (as long as they are not about the forthcoming case). Both these strategies are aimed at reducing anxiety.

I also try to assist the child to develop a role she or he identifies with to take into court. This may be the role of the *'truthful speaker'* for example.

Conclusion

Psychodrama has been valuable for my work in two ways. First, it has assisted me as a practitioner to develop more spontaneous responses to situations involving my young clients and their families. Second, it has helped me to think more creatively about how I can prepare children and young people to participate in formal environments.

 ¹⁹ years is the age at which you are required to leave school – although it can be as early as 16 years.

- 2. I also provide telephone advice to children and young people and adults assisting them, write submissions on amendments to legislation that will affect children and young people, comment to the media on matters affecting them and have input into agencies' policy where possible. The casework I do informs these comments.
- 3. Some children and young people drop out of the school system if they do not have advocacy to support them at the meeting with the school attempting to exclude them and to facilitate their placement in a new school, where that is necessary. Schools are often reluctant to enrol suspended students and the Ministry of Education may take many months to follow-up the excluded student. In the writer's view this can have an effect on criminal offending among young people - around 80% of those appearing in the Youth Court are not attending any school, despite being below school leaving age.
- 4. The notion of 'putting right the wrong' is from the restorative justice model, which encourages offenders or wrong-doers to identify that they have hurt another person and that they can assist that person's recovery.

Action Insight:

The Treatment of Adolescent Sexual Offenders

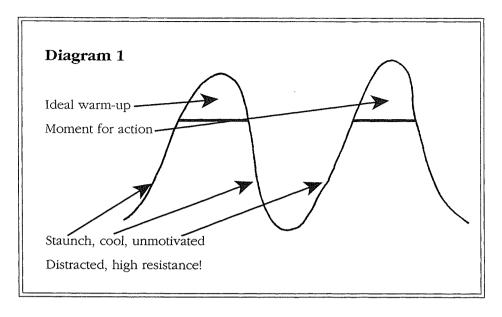
by Marlyn Robson

Marlyn is a group worker and family therapist who is working part-time in an agency for the treatment of sexual offenders. She is an advanced trainee in the Auckland Training Centre for Psychodrama. Her other professional interest is her work operating a private practice as a dentist.

I have been a psychodrama trainee for nine years, am currently in the peer group at the Auckland Training Centre, and have also been working with adolescent sexual offenders for six years. My particular interest has been the warm-up phase of the work, since this, in my experience, is often where a group becomes stodgy and stuck. How do you warm-up someone who is not motivated to be in a group, not motivated to change and is terminally staunch or cool; and how do you take them to the warmed-up moment where we can work without them spinning out into rage, hilarity, distraction or fragmentation?

The SAFE network is an agency in Auckland for the treatment of sexual offending behaviour in adults and adolescents. From its inception about seven years ago, and throughout its development, particularly in the adolescent programme, we as a team have incorporated psychodramatic methods into the treatment programme. As psychodrama trainees, many of us know that people learn through doing, by using their bodies and experiencing their emotions as well as developing their thinking. Understanding that has been achieved through doing rather than thinking is likely to be expressed by change in action and behaviour.

Changing behaviour that is well developed and satisfies a need is very difficult, as alcohol and drug agencies, weight loss clinics, antismoking campaigns and stopping violence programmes will all attest to. Sexually offending behaviour is no exception. Most programmes around the world, including SAFE's, that treat sexual offenders are based on a cognitive behavioural model (CBT) to a greater or lesser extent. The belief is that if the clients gain insight and understanding of themselves and their difficulties, how they arose and how they can be changed, then they will choose to

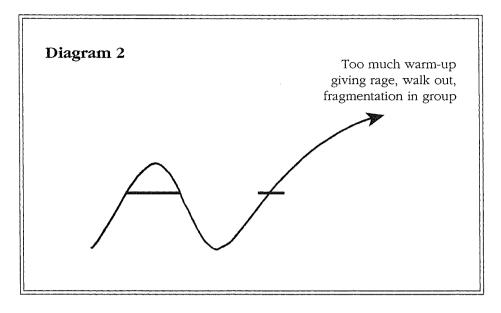


change (Bandura, 1997). Self understanding, however, does not automatically produce emotional or behavioural changes (Janov, 1970; Kohut, 1984; Yalom, 1975). Whittaker and Lieberman's theory is that there may be a wish for some reason to change, the disturbing motive, and also present will be the reactive fear to change. Both need to be acknowledged and explored for enabling solutions to be found. The cognitive behavioural concept is that what we think affects what we do so, if we change what we think, we will change what we do. However, sexual offenders, and probably other adolescents often undermine and sabotage such strategies because of feelings such as fear and shame and produce the restrictive solution of compliance but not real change. For therapy to be successful with this population, the process of selfdiscovery needs to include a catharsis of integration that touches all three areas - the emotional, cognitive, and action or doing levels of a person's expression in order for a truly new and creative solution to come about. Moreno describes the

process of self-discovery in psychodrama as *action insight*, and I find that psychodrama offers a powerful opportunity to change the old story, the old self-defeating patterns through the creation of new experiences.

Moreno proposed that an increase in spontaneity and creativity will bring about the formation of new roles. In the psychodrama work we do, we are indeed finding this to be so. As the spontaneity level rises in these boys, we can observe new roles developing that are positive and creative in their expression. As these roles begin to emerge then give a new found psychological strength to the boys, to work with their own traumas and that of others. Role theory presents to us that there is a thinking, action and feeling component to every role. This concept has encouraged me to use the experiential process of role play/ vignette, which affects and effects change in all these areas.

As we know, in one form of spontaneity, spontaneity is expressed when there is a new response to an old situation. In Moreno's



spontaneity theory (1972) he says that "in the development of a person there can be original moments, truly creative and decisive beginnings" and these are exactly what we are looking for in our work to help change sexually offending behaviour. Moreno (1977) talks of spontaneity being creative, original, dramatic and having an adequacy of response. It is the engine that drives the creative act. When anxiety or resistance is high, as it often is in our groups, spontaneity is low. I work to increase the spontaneity present, which then allows adequate creative responses to emerge from our clients. Drama therapy games are particularly good as action warm-ups here, especially with adolescents. The boys are actively using their bodies, and their emotions are also stimulated bringing about a balance of action and feeling in their warming-up process. The fun involved assists a great deal to lower anxiety and facilitate an environment where trust can be reborn. The level of increased spontaneity will determine how they will react to new situations.

See Diagram 1 and Diagram 2. Any game that gets them moving will increase warm-up, such as walking games, tag and fantasy or adventure journeys. There are endless games that can be used, but they will be more effective when used with a purpose. Some games warm-up their bodies, such as slalom, some games such as zip-zapbop warm-up their minds and concentration, and other games warm-up their spontaneity such as speaking in funny voices or passing an object around such as a hearth brush, and each boy using it as a totally different object. The skill in making the game have value as a warming-up process is for the leaders to select and address a moment in the group to produce interaction.

Slalom is an example of a game which is very physical, requires a certain amount of thought, as well as stimulating quite intense emotions. It is a visualisation game where the boys stand all facing one way, an arm's length apart, as slalom poles in a ski race. Then the end boy has a good look at where everyone is, tries to keep the picture in his head as he is blindfolded and then using skiing movements, zigzags as fast as he can between the poles to the end. Everyone has a turn, and each boy gets something different out of it. Boy A has to totally trust the group to stay where he visualises them. This is a tremendous test for most of these boys who have learnt to never trust anyone about anything in life. Boy B has to stay in line and play fair, in life he has learnt to be one up and always one step ahead. Boy C cannot ever dare to be blindfolded and experience the powerlessness of that but will participate if he can choose to close his eyes - what power for him! Boy D is small and timid - can he legitimately bump into the others in the group and not get done over?

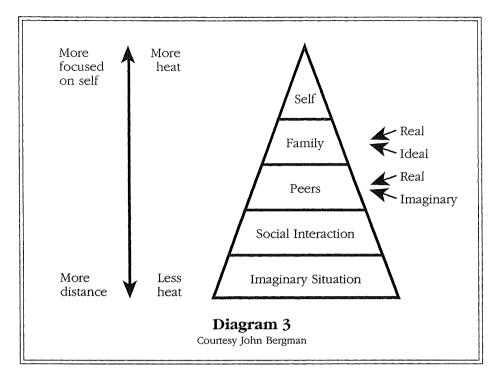
If the warm-up gets too high, fragmentation will start to occur, therefore constant assessment of the warm-up is needed by noticing voice levels, interruptions, body movements and general anxiety levels. Games can be introduced to slow the process down, help them to concentrate and to access self control. An old trust game of the small circle with one person in the middle with their eyes closed being moved around, can be useful here if the instruction is to really care for this person, act as lovingly and gently as you'd like to be touched. There is no place for "bossy teach" here telling them to be quiet! A change of pace is necessary as in the game described or a game to make them laugh - perhaps speaking in gobbledegook. There is something about being able to adjust the warmup of the group - up or down - thatallows the boys to trust the process of therapy more.

It is important for us to be clear that at SAFE we are very solution focused and the aim here is to change sexually offending behaviour. We are aiming to help all the members of the group to gain insight and awareness into underlying and hidden attitudes and feelings, to complete delayed developmental processes and to look at problematical interpersonal relationships, but our particular business is to change sexually offending behaviour. Therefore, as facilitators or directors of the group, we have these two main areas of focus - to keep an educative focus. and a personal process focus.

The Structure and Character of the Weekly Group

The weekly group includes between 6-12 adolescents, a co-therapist and myself. The structure of the initial activities is quite simple, such as small concretisations of incidents they mention about everyday life, then the subjects are general rather than personal, and at this stage, there is no role reversal. Throughout the work we encourage awareness of their bodies and feelings. Sex offenders in particular, have difficulty in naming any other feeling than anger. A primary task is to discover the hidden feelings that are often masked by the expression of anger. Once again, the director has a task here to tune into the special needs of regulating the warm-up so that the intensity of the enactment is able to be tolerated by the participants.

In time, as trust increases, the concretisations become vignettes and then enactment's that will include the technique of role reversal. We choose moments of their life to enact at any given moment, either from a moment in the group warm-up or



from a director's decision at that given moment using the ideas in Diagram 3.

The needs of each boy for a different warm-up requires an easy, flexible and sensitive approach. One boy may only be able to tolerate a fantasy journey as an explorer through an enchanted forest, while another may have enough self esteem to enact a small psychodrama about a high risk situation in his every day life and his choices around that. These boys are hypersensitive to criticism, shame, embarrassment, exposure and being isolated, all of which may lead to humiliation and this again is where we need to be extra careful to regulate the warm-up, constantly making decisions about more heat or more distance as in the diagram. Working with the resistances in bringing the hidden world out into the public arena so that new solutions can be explored, is a constant and difficult work. What

are their private fears, of whom are they afraid, are they remembering their own abuse, are they plotting revenge, do they ache for love and someone to care about them? Here the use of masks and pictures and strange toys are wonderfully helpful as we work to make the hidden and shameful overt.

Setting out family relationships of the 'tele' relationships within their families, using sculptures, adds awareness of family dynamics beyond the family therapy sessions. The opportunity to experiment with expressing what could never be expressed in the family directly, can be explored safely within the play of a psychodrama. Boys can explore being hugely angry with an absent father or a violent father and say clearly that it is not good enough, a role that would not be safe to explore in real life.

The Relevance of the Double

The concept of the double is very helpful in this work. I have found the ideas developed by Kate Hudgins on the Containing Double to be of special value. These ideas have been a central part of her Therapeutic Spiral work with trauma survivors. Only about 30-40% of SAFE boys would be sexual abuse survivors but all are survivors of other traumas such as physical abuse, emotional abuse, and severe attachment deficits.

There are three strands in developing the Containing Double. The first is learning to reflect on the process or on what is happening in any given moment. This ability to observe is frequently absent in our boys. A common phrase is, "it just happened" – so becoming aware is incredibly important.

The second strand of development is learning what is involved in being able to express the containing statement e.g., "I'm okay; I can handle this," "I do have some skills," "I can do it," "I think I can even begin to look at what happens when."

The third strand to the development of the Containing Double is the anchor in the here and now e.g., awareness of changes in the body, and awareness of the possibility of change. It is a bit like having a strong accepting loving mother beside you that notices what is happening and totally believes in you.

The Containing Double is a very helpful role relationship for these offenders to develop so that they can be safe in facing their own trauma, and safe in facing their own aggressive impulses towards others.

Simple Role Theory: "Good Voice, Bad Voice, Hot Head, Cool Head"

The concept of roles that we introduce to the boys are in a very simple form. Most of this teaching is in the form of it is "good voice" or "bad voice", "hot head" or "cool head". We ask, "What does the good voice say in a high risk situation, what does the bad voice say?" We might also concretise what we call the "hiding place" that they go to in their heads in a stressful situation and what might the voices say from there.

Enquiry into the Social System

A sociodramatic approach is used to help these boys become aware of the influences upon them and of them on others, both in the group and within the larger culture. For example, a sociodramatic question might be, "How have they, as a group of sex offenders, affected their world?" The roles of the police, social workers, victim, victim's parents, grandparents, their own parents and grandparents, their teachers, their friends are set out on the stage. This sociodramatic enactment is often a very awakening and expanding.

I hope that I have conveyed something of the spirit of our work, especially that we as facilitators and participants in this programme, are enlivened by the intensity and activity of the psychodrama work. We are confident that the focus of touching the three areas of a role, the feeling, thinking and action levels is what effects real change, and lasts longest in the life of the participants of our programme. Although Cognitive Behaviour Therapy (CBT) is the initial treatment of choice around the world for the treatment of serious offenders, more and more treatment programmes are incorporating some forms of experiential therapy to help change behaviour.

Out of Step But in Time

by Nikki Alderman

Nikki is a psychologist working in private practise and an Advanced Trainee in the Queensland Training Institute for Psychodrama. She has a love for both psychodrama and for writing stories. In this story she explores the inner life of a psychodramatic role which illustrates how an awareness and an appreciation of these roles can assist us to integrate difficult areas of our day-to-day lives.

History has a funny way of representing itself in the present day. For my part the way I live in the world today is a far cry from my time around the table in Camelot. My name is Arthur and I own a small novelty shop that specialises in challenging puzzles for all ages, but that is another story.

Growing up in England I wanted to be the same as all my peers, but I had a capacity to misfit that was unheralded in time. In most ages misfits are marginalised and required to follow the linear order of things and that is as nature intends. Very occasionally there are brief moments in this world where instantaneous change is welcomed as though the planet is in a trance. All the usual laws of nature do not apply. This is no struggle or upheaval and the trees grow down with ease from the sky, beginning with fruit, flowers and leaves and eventually sprouting branches, trunks, roots and seeds. This canopy of wisdom must grow down to take seed in the earth before it can be realised and grow back up to maturity. The clouds came down with the trees to meet

the earth in my time in Camelot. It must have felt similar for Noah when the water rose to meet the sky and bring new possibilities back down to earth. The laws of time changed when I was King of England as well. We lived outside of logical and liner

"There was no grounded belief in my visions of equality, imagination, developed thinking or justice. Knights still wanted the physical tests that decided issues irrevocably and the ladies of the court considered the round table nothing more than a unique fashion statement ..."

time and instead moved up and down through moments of time,

higher and lower but never back or forth. So we very often had our heads in the clouds or our chins resting in earth.

There was no grounded belief in my visions of equality, imagination, developed thinking or justice. Knights still wanted the physical tests that decided issues irrevocably and the ladies of the court considered the round table nothing more than a unique fashion statement. All maintained their original beliefs and could simultaneously accommodate the new ideas with some assistance from the clouds. My ability to think these strange, new and apparently wild thoughts aloud perpetuated the trance and allowed a new order to be voiced. It needed to be voiced to later evolve up through people's beliefs and take hold, but not to be embraced before time is ready. I grew younger with age and I gave birth to a son who carried the old order of conflict. We met in middle age and died in conflict, as there was no way to hold our opposing experience of time or the different laws of nature. The clouds lifted and the trees came crashing to the ground, as they do when a trance is broken and an age is ending to take fruit at another time. Awake once more the knights fought and, simply, whoever was left standing, won. The seeds of this time grew stronger with the blood shed on the fallen trees and couldn't be wiped away. The world had changed and a new way forward was beginning.

As I look through my shop window, I can see that the time for that particular world order has not yet arrived. The world is expectant and alive with anticipation for a new age. This new age started over a thousand years ago and as with all lasting change, the growth takes a long patient time to eventually exist. The real change occurs when the ideas are very old and it is the fruit of King Arthur's age we are about to encounter. Some of us are born not to fit so that new ideas can continue to take seed outside of time and appropriateness.

"A Cast of Thousands" Working with the Five Instruments of Psychodrama in the Therapeutic Relationship

by Brigid Hirschfeld and Charmaine McVea

Brigid and Charmaine are both psychodramatist's working in private practise in Brisbane. Brigid is also a Trainer, Educator, Practitioner and a staff member of the Queensland Training Institute for Psychodrama. Charmaine is a clinical psychologist who conducts both individual and group sessions.

Introduction

Psychodrama is traditionally and more commonly known and experienced as a group therapy method. However, some of us work primarily with psychodrama in the one-to-one setting. This requires shifts in our thinking, ingenuity and creativity as therapists. There is very little written on the similarities and differences between group and individual psychodrama. Over recent years we have become intrigued by the challenge of using psychodrama in the one-to-one setting; by the importance of the space we work in; by the use of the objects that occupy that space as potential auxiliary egos and audience; and how these relate in the context of the therapeutic relationship between therapist and client.

Moreno (1953) identified the psychodramtic method as using five instruments, "the stage, the subject or actor (protagonist), the director, the staff of therapeutic aides or auxiliary egos, and the audience" (p. 81). Take a moment to picture the room in which you work with clients. In that room there will be an area you think of as the action or therapeutic space (stage). This will be distinct from office space. There will be at least two chairs or other seating arrangements for you the therapist (director) and the client (protagonist). Around the therapeutic space will be other items of furniture and various objects, cushions, pictures, books etc. This could be thought of as an audience.

In this paper we will explore how Moreno's five instruments of psychodrama may be applied in the one-to-one setting, so as to assist the development of spontaneity in the client.

The Stage

The stage in the one-to-one setting is usually an area of the therapy room

or whole of the room. The traditional stage as designed by Moreno in the group setting provides the actor with a living space, which is multidimensional and flexible to the maximum degree. The living space of reality is often narrow and restraining, he may easily lose his equilibrium. On the stage he may find it again due to its methodology of freedom - freedom from unbearable stress and freedom for experience and expression (1953, p.82). The traditional stage was multilevel and round in shape and followed the influence of Greek dramatic form.

The concept of a space that is multidimensional and flexible may be beyond the resources of many of us in our therapy rooms, but the principle of providing a space where client and therapist meet is still valid. Russell Meares in his book "The Metaphor of Play" has this to say about the place of therapy, "The place must be quiet, free of noises from the corridor, from telephones and the sounds of conversations in neighbouring rooms ... The decoration of the room should reflect something of the therapist, who is expected to be ordinarily human and not the opaque, neutral character of classical times ... Nevertheless, his or her life should not obtrude ... The most important characteristic of the setting is reliability. The (client) must have confidence in a fairly predictable environment ... It is as if this space becomes a precursor of inner space" (1993, p.128).

When I think about the space I work in, I am aware of what warmup it might produce in the client and in me. This has become particularly relevant in recent years when I moved into a large space that became my office and therapy area. "It is not just that there is more room but that there are a variety of spaces e.g. a verandah, pillars, a clear office area and the action area itself. The affect of the room on the people who come in is often remarked upon ..."

Previously, I had worked in a very small and cluttered area that permitted little freedom and movement. Now I had choice about what came into the space and how it was set out. I gave thought to what I wanted to create in myself and the people who came into this space. I felt, thought and acted quite differently when my external space was cramped, confining and stifling. The therapy I provided in those years tended to be restrictive, limited and safe. In my new space I found I was more spontaneous, moved freely and used concretisation and maximisation in ways that hadn't been possible before. Enlarging the therapy space (the external space) has assisted me to develop my inner space and my capacity to make room for a depth and range of therapy beyond me in the past.

It is not just that there is more room but that there are a variety of spaces e.g. a verandah, pillars, a clear office area and the action area itself. The effect of the room on the people who come in is often remarked upon e.g., "What a welcoming place". The plants, posters, furniture and objects of all kinds convey their own message, which may be one of hope of life or struggles or possibilities. As the relationship between therapist and client develops, the space becomes a container that safely holds the feelings and experiences that emerge. The space develops familiarity and flexibility as the client explores its potential and sets scenes for a variety of situations.

The Protagonist, the Director and the Auxiliary Egos: Bringing these Elements Together in the Therapeutic Relationship

The therapeutic relationship is the dynamic encounter between therapist and client that emerges when both are working together towards enhancing the spontaneity and well being of the client. The therapeutic relationship is the primary vehicle for one-to-one therapy. Ultimately clients are most likely to remain with a therapist because the therapeutic relationship seems viable – that is, strong enough to contain the depth of work the client is preparing to move into.

Psychodrama appeals to me as a model to assist me to understand and work within the therapeutic relationship, because psychodrama theory and practice emphasise the essential value of encounter - the relationship of person to person, of person to self, of person to group and person to environment. Psychodrama holds as a starting point a picture of the healthy spontaneous individual, rather than the sick patient. So the therapeutic relationship begins as an encounter between two adults who are both competent in some aspects of their lives. The client enters into the relationship as a free agent who

chooses to engage in therapeutic work. The therapist brings her willingness to travel alongside the client on their journey. The therapeutic relationship offers the client an opportunity to enter into an encounter with another human being in a real and intimate way; and challenges the therapist to be spontaneous and genuine, while remaining clinically aware.

The goal of all psychodrama is spontaneity. Moreno saw the director's role being to develop the spontaneity of the client by warming

"The client enters into the relationship as a free agent who chooses to engage in therapeutic work. The therapist brings her willingness to travel alongside the client on their journey. The therapeutic relationship offers the client an opportunity to enter into an encounter with another human being in a real and intimate way; and challenges the therapist to be spontaneous and genuine, while remaining clinically aware ... "

them up to creativity. When he spoke of spontaneity Moreno said, "(the) spontaneity state is not only an expression of a process within a person but also a relation to the outside through the spontaneity state of another person" (1953, p.334). He also described the role for the director in a psychodrama to be that of an auxiliary for the client, much as a mother is an auxiliary for the infant: "(the director) arouses and starts them, prepares them for the key situations to be portrayed ... (and) leads their analysis after the scene and tries to arouse and stimulate them to spontaneous reactions during the analysis" (1972, p.211).

Marsha Stein and Monica Callahan (1962, p.121), in applying psychodramatic concepts in individual therapy, see the therapist as often taking on the role of double, "comparable to the natural co-being of the mother and infant", and the role of mirror "to reflect to the client in action how he or she appears to others". In one-to-one therapy the therapist does not need to set out an enactment to become an auxiliary to the client. Within the encounter of the therapeutic relationship, the therapist has the opportunity to take on auxiliary roles that are developmentally indicated for the client. As the dynamics of the client's world play themselves out within the therapeutic relationship, I (as therapist) am required to explore what is happening between us. In this I am an auxiliary to the client, and where my spontaneity and clinical judgement are both functioning well, I am likely to be an auxiliary who assists the spontaneity of the client.

However, when we talk about the therapist taking on auxiliary roles, we are usually referring to the enactment of the client's drama. In this instance, the therapist moves moment-to-moment between being director and auxiliary. Some therapists choose never to take an auxiliary role in the one-to-one setting; others selectively take various roles but keep a chair or open space that is quite firmly established as that of the therapist.

Various issues may influence the decision of whether or not to take on these roles. To act as director. and also enter into the various roles within the client's drama, may create confusion in the minds of some clients. The presence of the therapist in the therapy room, is a significant aspect of the containment that the client requires to do the therapeutic work, so while the therapist is taking another role, her presence as therapist must also be felt. The variety of auxiliaries available in a group session enables the protagonist's transference to have a number of potential targets. Williams (1989, p.192) notes that "the 'internal objects' become living auxiliaries. The director slips back as the 'transference object' and group members fill up the roles occupied by historical figures from the protagonist's past". Without additional auxiliaries in the one-toone setting, role taking by the therapist may increase transference. This may mean that taking on certain roles is contra-indicated. For example, Hudgins and Toscani (1996) argue strongly that the therapist must not take on a perpetrator role in a drama, as the client risks losing sight of the therapist as a safe therapeutic guide.

Yet often a client is assisted by having an actual person in the role, by being able to make eye contact with the other person, and by being able to respond to the sound and strength of the spoken words. The therapist taking on the auxiliary role, will expand the depth of the encounter, particularly in areas of the client's life where their capacity to imaginatively enter into the situation is limited.

The Use of Objects as Auxiliary Egos

Moreno speaks of a staff of auxiliary egos in the group setting. "These auxiliary egos of participant actors have a double significance. They are extension of the director, exploratory and guiding, but they are also extensions of the subject, portraying the action or imagined personae of their life drama. The functions of the auxiliary ego are threefold: the function of the actor, portraying the roles required by the subject's world; the function of the counsellor. guiding the subject; and the function of the social investigator" (1953, p.83). In this sense, the director is the only one available in the one-toone setting to be an auxiliary ego. However, the description above could apply just as well to the symbolic objects or props used in a session (e.g., toys, materials, magnets, etc). It is as though the symbolic objects make available to

"There is no limit to the variety and range of symbolic objects that can be used as auxiliary egos in one-toone therapy apart from the dimensions of the space and the resources of the therapist ..."

the client vast resources that have their origins in the world outside the therapy room. Williams suggests that "by means of concretisation and dramatisation, the self may be represented dramatically either by another person or by a chair or other object ... The object is thrown 'outside' the speaking self in order that the relationship aspect of self with self may be manifested and then developed" (1989, p.17). The use of symbolic objects for a particular role concretises some aspects of the role, marks the space, assists in setting out the system. The projections of the client are cast on the object giving much more colour and substance to the role than an empty chair - though an empty chair may the very choice for a particular role. We have noticed with interest that the object that gets chosen again and again for a role by a client actually becomes a familiar part of their social atom in the therapy room. Both therapist and client can bring this object/role into the action space when it is appropriate or needed.

There is no limit to the variety and range of symbolic objects that can be used as auxiliary egos in oneto-one therapy, apart from the dimensions of the space and the resources of the therapist. Stuffed animals of all types, shapes and sizes; materials and cushions of different colours, textures and proportions; clay figures; stones and shells; pot plants; posters and pictures; all these are some of the aspects we use. Even the furniture in the room may prove useful at times e.g., the standing fan with three blades was chosen as a metaphor for an enmeshed family or mum, dad and daughter. Separating out the three people as individuals and their roles in relation to the client became the work of therapy.

The animals in particular are available for a range of roles based on their real life abilities or stories they have inhabited. Kermit the Frog is often chosen as the Humorous, Down-to-Earth Counsellor while the Dinosaur becomes the Angry Truth Sayer. It has been important to provide the ferocious and scary animals as well as the more loveable Disney-type animals. The worlds of fantasy, story and imagination bring social investigation to a new art form. The animals are not bound by the same rigid rules imposed on human beings!

On occasion an object may be taken home on loan when it has been used to symbolise a role in transition or newly developing. The relationship between the client and this new role seems to be assisted by the time spent with the object outside the therapy session. Recently a woman was startled by the eve of a crocodile hand puppet as she reached for something else. Later when the system she was exploring was laid out, I asked who or what was the crocodile's eye in the system. The Cold, Heartless, Watching Judge was crucial in the system and was transformed to a Discerning, Caring Observer, no longer remote and uninvolved. She asked to take the crocodile home so she could get to know this new role in herself.

Just as participants in a group bring their experience and life history to the auxiliary ego roles they take for each other, it seems the objects, when chosen, provide a similar service.

The symbolic objects are metaphors of their very nature and working with them stretches the client beyond their well trodden paths of old systems and surprise them into new ways of thinking and being. In choosing an object, the client is already acting spontaneously and well on the way to change. The change will not always be visible in the words used but may be manifested in the behaviour that ensues. Musical instruments are a recent addition to the therapeutic space. The very day the drum was installed a client announced, "On my way here, I decided that today I want to learn to walk the beat of a different drum". Seeing the drum was affirming and exciting for her and the sound of the drum and the movement of her body allowed her to experiment and develop the beat of her new life.

The Audience

Moreno spoke of the audience as having a double purpose in psychodrama. "It may help to serve the subject, or being itself helped by the subject on the stage, the audience becomes the problem. In helping the subject it is a sounding board of public opinion" (1953, p.84). If we think of the symbolic objects around the therapeutic space as the audience in the one-to-one setting, then purpose is a single one - that is, to serve the client by being a sounding board of public opinion. It is useful to look at what objects we have available. Do they offer a breadth and depth of opinion in the roles to which they warm-up clients? It seems even for the client who has a limited role repertoire, toys, cushions or materials will remind them of someone or something that offers hope and spontaneity. The different textures can offer new understandings in a similar way to hearing the sharing of a group member, e.g., choosing a large piece of black material to be the Blanket of Depression may startle the client by its silky, soft feel, inviting touch and stroking rather than a kick. It is good to have objects which are abstract rather than specific characters. The shape, texture, size and colour stimulate associations,

which are far reaching. They are more open to projections and thus more versatile.

Because one-to-one therapy generally takes place over time, the client becomes familiar with the objects available and some retain the original role they were chosen for. They remain as witness to the work or the client and accessible as an immediate auxiliary ego. The therapist may bring them into the action space to assist the warm-up of the client and to provide the wisdom needed to produce change or the challenge to old behaviour.

In one sense you could think of the audience in the one-to-one setting as being the internal audience of the client externalised. Initially, this internal audience may be limited, critical and unsupportive. In the course of therapy, the audience is expanded as social atom repair takes place. Gradually the new roles are integrated internally by the client.

One of the many roles of the therapist in the one-to-one setting is that of audience. The therapist stands as witness to the client, often being the first to receive a very painful story. As a "sounding board of public opinion", the therapist will challenge and educate, e.g., where there has been a lack of information, or inaccurate information given about sexuality. The client undertakes many role tests in the therapeutic space before taking the roles in their everyday life.

Conclusion

Although Moreno developed the concept of the five instruments in relation to using the psychodramatic method in groups, we have demonstrated that it is very relevant to the one-to-one setting. The therapist is required to be flexible and versatile in a multitude of roles. The use of symbolic objects as auxiliary egos and audience and the therapeutic space as stage, are important adjuncts to the development of the therapeutic relationship. Therapy becomes both enjoyable and challenging with a "cast of thousands" to draw upon.

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The Ancestor Syndrome *Transgenerational psychotherapy and the hidden links in the family tree*

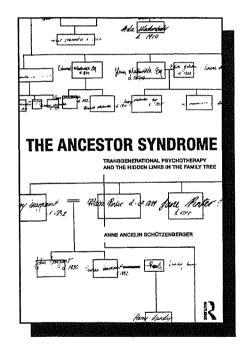
by Anne Ancelin Schutzenberger

Routeledge

As her work traverses generations, Anne Ancelin Schutzenberger's writing traverses those who have influenced her work, case studies, her methodology, examples, events within and between countries, her own family stories, and her wisdom from over 40 years of practice.

The author reveals that not discussing and sharing painful or shameful events or losses at the time ensures a legacy within subsequent generations with repeated or similar events re-emerging.

Careful and dedicated unravelling of the geneosociogram, working to five generations in the historic context, and defining sociometric links and important facts and events together with her own free association and attentiveness, assists her clients bring forward the not remembered into consciousness. Her passion is helping those who are suffering, and she digs deeply into life stories searching for hidden and unconscious links. Revelling in the synchronicity of group members lives, Anne Ancelin Schutzenberger outlines the processes and concepts she works with, enabling clients to free the self from repeating patterns



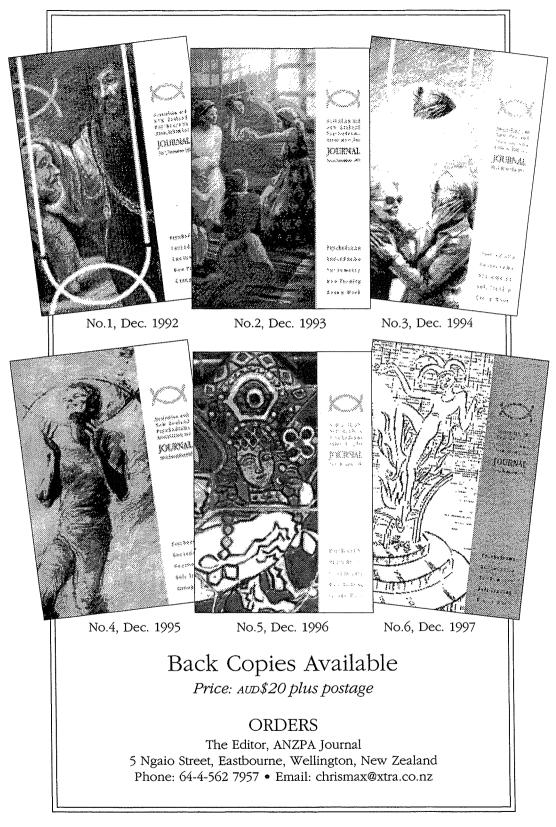
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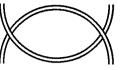
She weaves together influences from Freud, Moreno, Dolto, Abraham, Boszormenyi-Nagi and others, in a tapestry displaying depth of knowledge, concepts, thought, innovative and classical methodology embedded within her psychoanalytic and therapeutic practice.

I loved reading this book, gained

further insight into the complexity of human life, and am inspired by the depth of thought, care and experience the author brings to her work. The book is practical, easy to read, roves freely between stories and concepts. The Ancestor Syndrome will appeal to anyone who values therapeutic intervention, and is particularly relevant in New Zealand where Maori have deep appreciation of their genealogy.

Reviewed by Diana Jones





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- To establish and maintain a professional association of those qualified in the areas of psychodrama, sociodrama, sociometry and role training.
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