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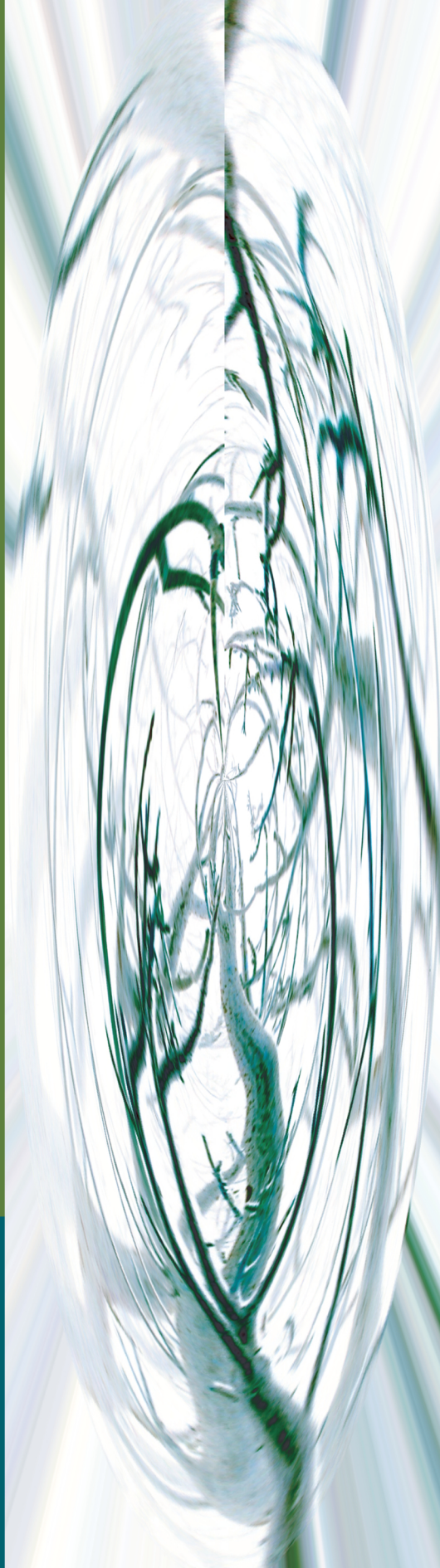
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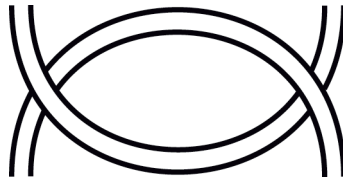
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Australia & New Zealand Psychodrama Association Inc.

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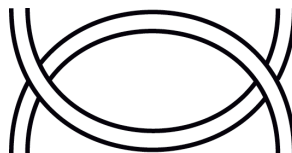
This Journal is published by the Australia and New Zealand Psychodrama Association Inc. (ANZPA)

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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 conterence, 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. For more information visit our website:-

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The Flowering of a Rose
An Illustration of Progressive Role Development

Jo-Anne Colwell

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

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

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

First Presentation
When Rosemary entered the room with Helen, her foster mum, she presented as a timid little waif who had lost her way in the world. There were bald patches in her short hair and her nails and quicks were severely chewed. She was dressed in an ill-fitting school uniform with very scuffed black shoes. Rosemary sat in the chair curled in on herself with her head lowered. There was an air of fear about this young woman that permeated the room. She started at outside noises as if they threatened her. Her eye contact was quick and jerky. My initial discussions regarding the reasons for her visit were mainly with her permanent carer, Helen. Helen watched me read the case cover sheet. When I read "severe anxiety and depression due to past history of sexual, physical and emotional abuse" and glanced up, Helen lifted her fingers to her lips and indicated that I should make no comment. This I thought a bit strange but complied and commenced to ask other relevant questions.

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

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

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

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

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

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

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

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

Table 1: Role Analysis of Rosemary in the First Session

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

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

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

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

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

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

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

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

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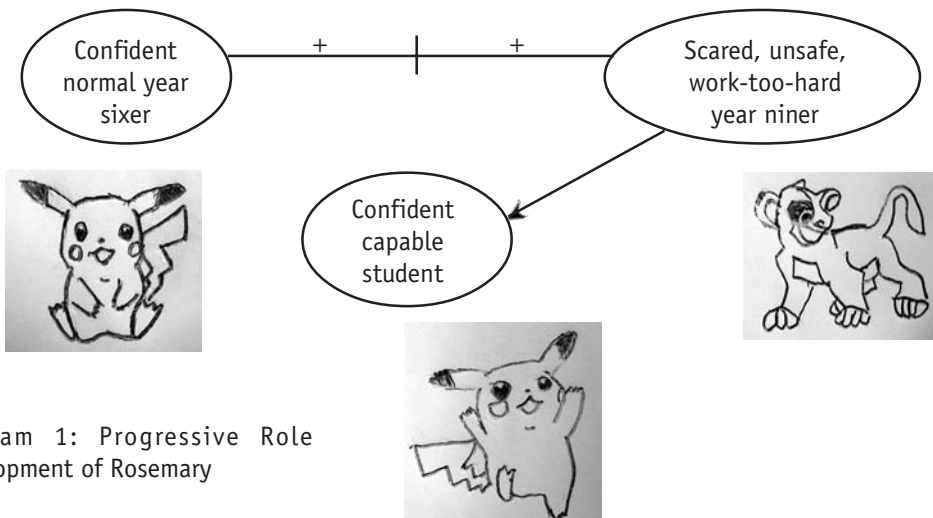

Diagram 1: Progressive Role Development of Rosemary

Discussion of Second Presentation

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

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

Third Presentation

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

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

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

Discussion of Third Presentation

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

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

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

At school Rosemary had been developing and testing the role of t*he confident capable student,* very slowly and with great subtlety. For example, she had achieved an A grade for a piece of work, had asked her art teacher a question, had attended classes on time and was dry during the day. During her drama Rosemary had been able to expand this new role even further. As well, there was within Rosemary an *intelligent creative genius.* It is possible that this role was the only one in communication with Rosemary's inner self at the beginning of the work.

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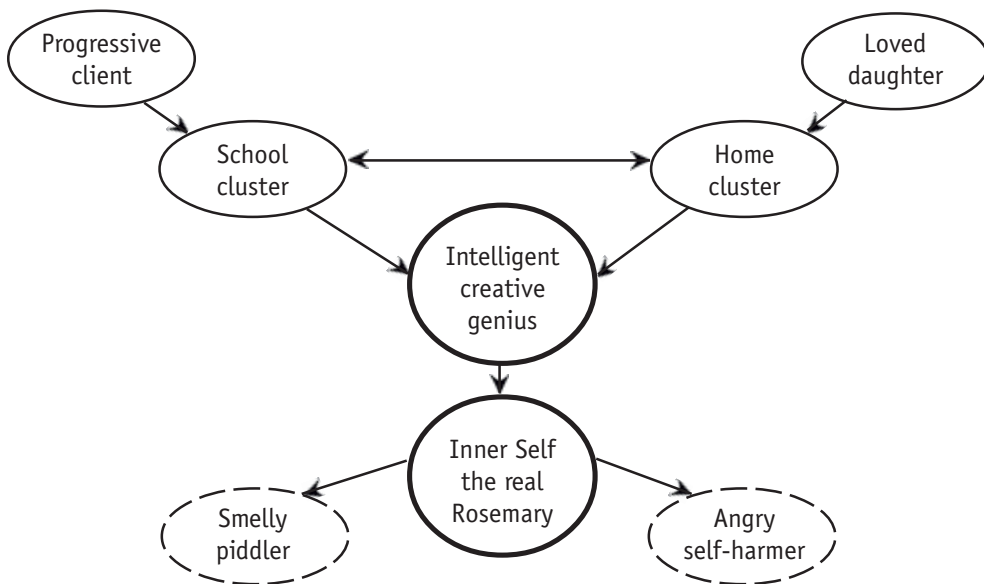

Diagram 2: Representation of the Internal Culture of Rosemary.
Solid line circles are developing roles, dotted line circles are diminishing roles.

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

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

Summary of Presented Sessions

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

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

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Under The Kwila Tree In PNG

The Power of Concretisation in Creating Shared Meaning

Helen Densley

Helen is a Mercy sister based in Adelaide. She works mainly with young mums and their children who are homeless. She is an advanced trainee in the Adelaide Psychodrama Training Group.

In 2002 Helen went to Papua New Guinea with Margie Abbott to assist the Mercy community run a major event for their sisters. Known as a 'Chapter' this is in effect an organisational review which elects leadership for the next five years. Here Helen talks to the Journal about her experiences.

Say something about the Mercy community in PNG..
There is a community of up to 40 sisters living in about 8 local groups in various parts of the country such as Wewak, Pt Moresby, Medang and Goroka. They are mostly engaged in different kinds of community development work. This Chapter was held at a conference centre in Goroka in the PNG highlands. About half of the group were Melanesian, the rest were expatriate Australians and the common language was English.

What happened?
We flew to Goroka and were met at the airport with great care. This was an important event in the life of the PNG community. We knew this was a time of transition in the balance between Melanesian and expatriate culture and leadership in the Mercy group. There was quite a strong 'disturbing motive' in the group wanting a Melanesian woman to be in a significant leadership role. As outsiders and as white Australians we were very sensitive to working respectfully across cultures to assist them to reach the decisions that best suited them.

My memory of the Chapter coalesces around three significant images in the process over the 5 days.

The Boat
At the beginning we introduced ourselves and we had come to listen and help facilitate the meeting. We used the image of embarking on a boat to go on a journey. The group set out the boat and then as each person approached to get on board they spoke about their experience in the moment and their hopes and fears for the journey.

There was sense of excitement in the room. Everybody spoke. The notion of getting on board to create something was meaningful to the entire group. Some spoke about the fear

that as a group they might not be united. This created a strong unifying image early on in the process of the Chapter.

Circles of Power

The next image we used assisted the group warm up to the process of selecting leaders. It was important that everyone could see and understand how power and decision making are shared. In our community some have the right to vote and some do not - depending on how far through their training they are and the stage of their vows. Anyone who's an initiate can stand for office. So there are those who have an active voice and those who can speak but cannot vote have a passive voice

We concretised this by creating circles representing the structure and different positions in the group. The first time we did this in complete silence.

In the inner circle were those who were eligible to stand and be voted for. In the next ring were those who were able to vote and in the outermost ring were those who could participate but could neither vote nor stand for office. As the participants took their place in the circle they brought their chair with them. This was essentially a warm up to the process of voting.

It was also clear that of those sitting in the inner most circle, not all would stand for office. And of those considering it there were huge fears about what it would mean to step out into a leadership role.

Gossip

We then explored the dynamics about someone deciding to stand for office.

"Let's have one person represent a sister who has decided to stand for the leadership team. How about you do that." Auxiliary stands.

"What would be said about such a person? ... What would be the gossip that gets going about them? Let's have two people volunteer to be other eligible sisters talking about it." Two people stand.

"OK could you both stand behind her, because gossip is done behind someone's back.
So here she is. She has announced her intention to stand for leadership, what kind of things would you say and hear?"

Auxiliaries as gossipers improvise a conversation.
"What makes her think she's fit to lead? Is she better than us?"
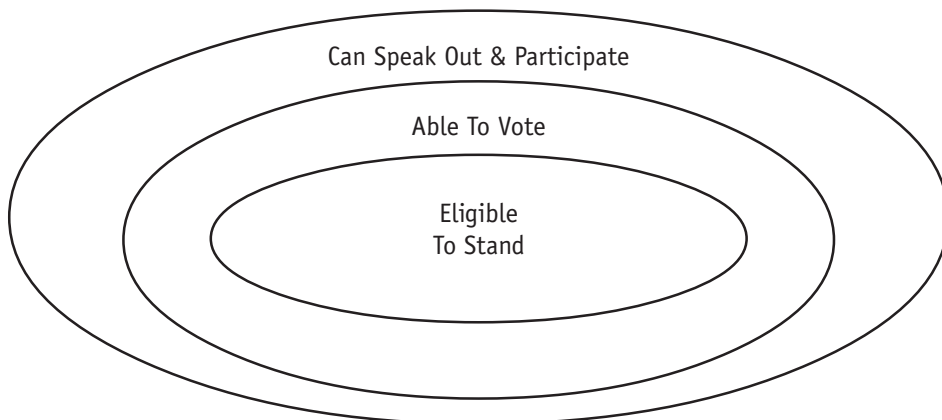*"Yes I remember her when she arrived ....."*

Diagram 1: Circles of Power

The gossip was fully enacted. The group delighted in the truth of it. There was a sense of 'yes, this is how it is'.

We then moved to a consideration of what it is we looked for in a leadership candidate.
This was concretised by a chair in the centre of the circle with a hypothetical person representing the role of the leader. Participants were invited to speak about what characteristics and behaviours they wanted in their leader. The first voices were hesitant.
"I want someone who'll listen to me."
"I want someone who's interested in what I do."
"I'm looking for someone who's honest."

The feeling in the room deepened and the voices grew clearer as people spontaneously spoke out what was important to them. The effect of this concretisation was extraordinarily powerful as it assisted people's warm up to speaking their truth and to the kind of community and leadership that they valued.

The Tree
Every evening the planning group for the Chapter met to reflect on the day, discuss progress and look at the program for the next day. As well as elect the next leadership team the work of the Chapter itself involved considering questions such as: What are our issues? Where do we want to go? The answers would come out of people's passions and commitment.

One night the planning group decided they needed a tree. Not just any tree but a Kwila tree - a huge native hardwood with an immense canopy.

The next morning we simply set out the Kwila tree. Participants brought out what such a tree would have: deep roots, a very strong trunk, big canopy, plenty of fresh air, no termites. The

group kept building the tree - lots of birds and little animals sheltering, feeding - parts interacting with each other, talking, moving, bringing water and nutrients up, expanding the life in and around the tree.

Slowly the tree started to turn into a picture of our community.
"Well this is like us - lots of conversation with each other, interacting within the metaphor of the tree."
"Yes these are our deep roots in the communities we live among."
"And there are the people who came and started our group many years ago."

The full image of the tree as community came alive. The branches reaching out into the world began to speak.
"We need to go back to the remote villages and live there."
"We need to work with the people with AIDS."
"Yes that's very important."

The expression was totally group centred with a lively feeling and a buzz of excitement. In all, six directions emerged which we captured as part of our planning for the future.

The concretisation of the tree triggered an amazing sense of group involvement in creating something together. The action and expression built a common language of strength, connection, beauty, abundance and direction.

What else happened at the Chapter?
Life at the Chapter had its own rhythm. There was an evening concert at the end of each day. Before the evening meal there was a liturgy prepared by one of the local community groups, for example, a dedication to our sense of place of birth and the land sung in traditional language.

Why did they invite you to assist them?
I had previously worked with this existing leadership group when they had first been elected. This was for two days of team building as leaders. So I was already linked with them. Several years later I had facilitated the meditation retreat and workshop held at Christmas time. Some of the women on that Christmas retreat were on the planning group for the Chapter and they invited me to assist. I knew I didn't want to work on my own so I asked Margie to come with me. Her presence was a gift to me.

What did you do on the Christmas workshop?
At one point we did the traditional story. I asked, *"What do we need to make this story?"* *"Well we need a star"*, was the reply. *"Who can be the star?"* The person who volunteered immediately took up the role fully and extravagantly *"Come follow me ..."*
And so we set it out. The group were playful and creative.

Instead of shepherds and sheep we had gardeners and pigs crawling around. It was a wonderful scene. And the gardeners with their pigs came to the hut where the mother and child were. We set up the nativity scene with multiple mother and child pairs. Each mother cradled her child, carefully checking him out for nits, supremely tender. Then we reversed roles and every divine child became the mother who sang a song to her baby. One mother started and the took up the lullaby in language. At the end of the song the group went absolutely quiet. There was a sense of stillness as four mothers held four babies, each being the only mother and child on the planet. Some weeping very soft and tender as the beautiful singing had wound down. We wept with the fullness of this love.

After some time we reversed roles back into the gardeners and the pigs and slowly made our way home. Many pigs escaped up and down the mountain and had to be caught again before finally being tied to a tree so that the gardeners could tend their plants. We had the sharing later on that evening.

The rest of the workshop we worked on personal stories. Each of the women picked something and they would set out what was important to them. I think the workshop was advertised as building their identity as Melanesian sisters and the deeper purpose was to get to know each other from the inside.

Can you give an example of the type of dramas that emerged?
One woman working in a village with people with AIDS set out her first meeting with a man, Patrick. She introduces herself and there is complete silence. The auxiliary playing Patrick made up a response but the protagonist said *"No. Patrick said nothing."*

It became clear that Patrick couldn't speak. People living with AIDS were the subject of village gossip and he had developed such an extent of shame that he couldn't speak. She spoke deeply about her work in the village.

Returning now to the Chapter, how did the election go?
Near the end of the Chapter a straw vote was held. This was the equivalent of tossing a stick into a river to see where it floated. The idea was for group members to let each other know what they were thinking so that as a group they get a sense of the direction they are heading in. Then it can consider and discuss this as a group.

At lunchtime we invited any of the sisters eligible to stand for office to process their thoughts. This was to deepen the warm up to leadership, to staying in the selection process if they were hesitant. For Melanesian sisters this

was a big thing because the 'ex-pat' Anglo sisters had held leadership for the previous 40 years. As a group we invited them to share their thoughts together. It was a significant step to bring our their hopes and fears because their greatest fear was that they were not up to the task. The conversation clarified for each person what they wanted to do.

When the election came the group elected their first Melanesian woman on the leadership team. More than that, the PNG Chapter had always been auspiced from Brisbane but in 2004 it became a congregation in its own right.

At the end we had an enormous farewell meal, speeches and went out to wait at the airport. For hours and hours. A group came to wait with us and we spent the time telling stories of people's dreams of what they wanted to do, inspiring each other to do their work in the world.

Looking back on your time in PNG what are your reflections?

It was a time of transition: of leadership and in the cultural balance in the group. It was time for them to take their future into their own hands and this occurred. In terms of our work as a group, what stands out is the power of concretisation: the tree, the pigs, the circle, the boat. There is a voice for everyone. We were working in a way where people are in connection with each other: the exhilaration of truth telling.

Early on in the Chapter one of the Melanesian women came up to me and said; *"This is good. You do it Melanesian way."* By this I understood her to mean that there was space for a voice for everyone and time for everyone to have a voice and that through action there was a different way to have a meeting than having to use pencil and paper.

In my groupwork I am getting bolder in experimenting and concretising what is there. I kind of amaze myself, when I look back at my fluidity and keeping applying what I have been learning for years and what I know.

Moving from Restrictive to Progressive Learning Systems In Professional Healthcare Training

Julia Hailes

Julia is a psychodramatist, educator and mental health clinician. She is currently completing her PhD research into spontaneity within groups. This is an excerpt from her psychodrama thesis.

When a trainer works with a group for the first time there are dynamic forces already in play. The trainer approaches the group with a particular warm up and vision for the training that is going to take place. Within the group there will be particular roles and role relationships that participants will have warmed up to. There is a curriculum or negotiated objectives, which provide a basis for the work that the trainer and group will do together. This paper describes how these dynamics come together in the first session of the interpersonal skills module of a 3-week training program in palliative care for registered nurses.

Three Sections in this Example of Spontaneity Training :
- *group dynamics:* at the beginning of the session which contribute to a restrictive learning system. Observations are based on the framework developed in the Psychodrama Section at Saint Elizabeth's Hospital, Washington D.C. (Clayton, 1989, p.2).
- *sociometric interventions:* used to build a progressive learning system.

- *warming up:* to a professional role system of active listening.

Group Dynamics, Observations At The Beginning of The First Session

This is the first of seven 2-hour sessions of interpersonal skills training in a 3-week training program in palliative care for registered nurses. There are 13 people in the group - 2 men and 11 women with ages ranging from early twenties to mid fifties. This session takes place in the second week of the course and is the first training session for the trainer with this group. The training so far has been of a didactic nature with lectures and discussion groups on physiological nursing care of a dying person.

There are chairs and large wooden tables arranged in a semicircle at one end of a large hall. There is a lectern at the front with another table beside it and a chair behind it. All group members are present - some chatting in small groups, others sitting quietly. The air is very humid.

Tina, the course co coordinator, is standing

speaking in hushed and solemn tones to Evie and Linda, two immaculately groomed young women, who have downcast eyes and look uncomfortable. The trainer walks to the front of the hall and she is introduced by Tina in a respectful way. There is a stirring of tentative interest in the midst of a prevailing listlessness. Jed and Mary, two matronly, earnest looking women pick up their pens and Jed moves a dictionary in front of her. The trainer gives an outline of the areas of work that will be covered in the sessions on interpersonal skills. A couple of people write a heading on the blank page in front of them. Fran has a gentle smile on her face and a far away look in her eyes.

The trainer states the purpose of the first session as: to get focussed on what particular interpersonal skills each person wants to develop and for group members to connect up with each other in a good way to do this work. She then asks Evie, who is looking alert and interested, whether she can get on board with this - Evie looks taken aback and a ripple of surprise runs through the group. Linda is looking curious and pleased. Evie steals a glance at Una and Barb, two silver haired, solidly built women who stare impassively ahead. Evie nods her head quickly. Adam and Peter exchange a glance and their eyes twinkle. Carol comments in a low voice that it sounded better than getting writer's cramp. Erin nods and laughs.

The trainer then stands up and invites everyone to come to the back of the room and she walks purposefully towards it. There is a moment of hesitation and uncertainty. Most people look at Una and Barb for guidance and after a couple of moments they stand up and once they have moved other group members follow - Erin and Carol walking quickly and purposefully, Mary and Jed giving their textbook a longing look as they go.

Discussion of Group Dynamics:
The warm up of the group initially conveys the expectation that group members will be learning knowledge from the trainer. Body language and attention given to pens and papers demonstrates they expect to be writing and the physical environment lends itself to a lecture style format with large desks and a lectern. Participants are warming up in a somewhat desultory fashion to being dutiful scribes. This is a pretty common situation for a trainer working with a group for the first time in an educational setting. We can say that there is a culture of dependent learning that contributes to a restrictive learning system.

Dependent Learning:
Scribes learn in a dependent way where the source of knowledge and authority lies outside of them and resides in another person. In the first week of this course group members had been learning new facts, which required them to record details for reference and eventual integration into their nursing interventions. In undergraduate nursing training, as in much professional training, the role of scribe is developed out of necessity and is adequate.

The Contribution of Dependent Learning to a Restrictive Learning System:
The dutiful quality in the role of scribe in this group conveys a sense of the giving up of personal authority and valuing of own thinking. This is an element of a restrictive learning system where the capacity of each person to think and act independently is diminished. Another element of dependency contributing to a restrictive learning system is that of looking for affirmation before speaking as one of the group members does when the trainer speaks to her and she looks at senior members of the group.

The Contribution of Hierarchy to a Restrictive Learning System:
At the beginning of this session two of the

6 months	4 years	8 years	15 years	30 years
Evie	Adam	Tina	Jed	Una
Linda	Peter	Carol	Mary	Barb
		Erin	Fran	

Diagram 1: Sociometric Line

younger nurses were being admonished for asking questions the previous day. They were told that they were being smart and to get back in their place and to stay there. There was a well-defined hierarchy within this group based on length of time in the nursing profession. This was regardless of actual competence as some nurses had postgraduate qualifications that the nurses heading this hierarchy did not have. When a hierarchy is established and maintained, leadership in the group is through position in the hierarchy. This limits the range of thinking that can occur as it can only come from a small number of people rather than drawing upon the resources of all members of the group. Clear thinking is diminished due to anxiety and dependence on approval by those at the top of the hierarchy. The value placed upon your words depends on your position in the hierarchy.

In this group authority is initially assigned to the trainer and senior group members. As all of the group are registered nurses they have already developed a set of roles around their interpersonal skills, which are part of their professional identity. When they are acting as if they need to write they are not warmed up to the skills that they already have. Given the patterns of restrictive learning in the group it is clear that the group members would benefit from interventions to increase their spontaneity.

Sociometric Interventions
With the movement out of their chairs there is a change in energy within the group - an increased sense of life. The trainer chats to Una and asks her how long she has been a registered nurse - she replies 30 years. A sociometric line is set up

for length of time in nursing and as people worked out where they belonged there is good-natured chatter and some physical contact. People placed themselves as shown in Diagram 1 above.

The trainer comments on the value of having such an extensive time frame of experience in the group. She asks the group what abilities they see Una and Barb bringing to the group. Peter suggests that they know a lot about nursing, Linda looks intrigued and thoughtful and then says in a strong voice that they have plenty of experience - Una looks surprised and pleased, Barb remains impassive. Then the trainer asks what abilities Linda and Evie bring to the group. There is silence and a thoughtful atmosphere - Evie crosses her arms and moves from one foot to another. Linda looks worried. After a bit Adam says that they know about up to date techniques in nursing. Carol says that they know how to write nursing care plans - Linda looks relieved and Evie goes very red. Group members think about what motivated them to be a nurse and get together with a person from a different end of the scale to them to discuss this. They begin chatting in an animated fashion.

During the next part of the session people place themselves in a sociogram on where they travelled from geographically to get to the session. This brings out different aspects of their work, some people had travelled from remote areas - it became clear some people worked in very isolated roles. They have a chat with a colleague on one difficulty they overcame to get there that day. These are brought out in the group. Then group members get together with
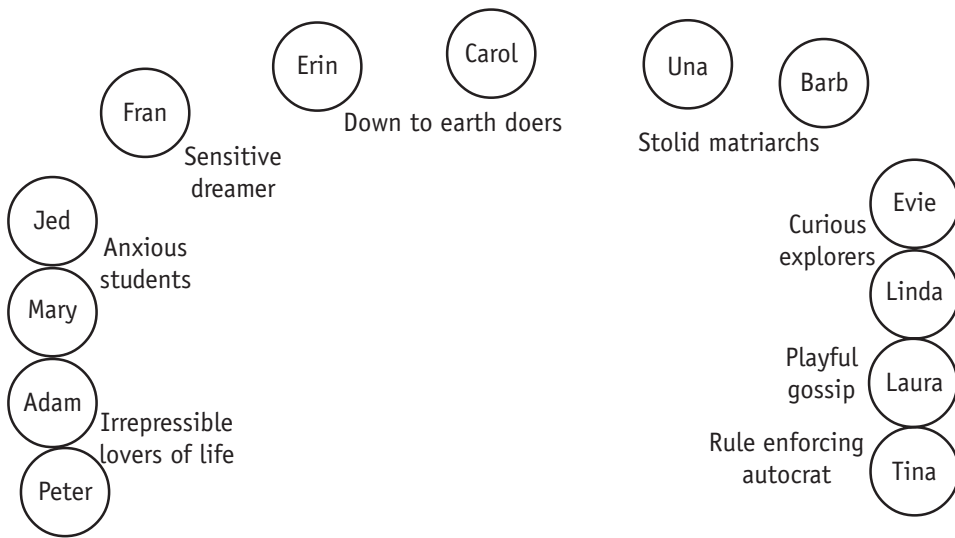
Fran

Erin   Carol   Una   Barb

Sensitive
dreamer

Down to earth doers

Stolid matriarchs

Evie

Jed

Curious
explorers

Anxious
students

Linda

Mary

Playful
gossip   Laura

Adam

Irrepressible
lovers of life

Rule enforcing
autocrat   Tina

Peter

Diagram 2: Subgroups and Roles Present at the Begining of the Session

another person they don't know very well and discuss with them areas of interpersonal skills they want to build on in the course.

After a few moments the trainer asks group members to pause their discussion, for Adam and Fran to stay just as they are at that moment and everyone to observe them. Is their relationship positive, neutral or negative? There is general affirmation that their relationship is positive. The trainer suggests that Adam was being an effective listener with Fran who nods vigorously. Group members identify what they see Adam doing nonverbally that demonstrated he is listening to Fran - eye contact, body leaning forward, looking friendly and being relaxed. The work of Gerard Egan (1985) on nonverbal listening skills is then introduced with reference to these. Group members are invited to reflect on whether they thought the colleague they were with was listening to them and what they were doing that brought them to this conclusion. There is an intrigued silence - the trainer suggests people look at their colleague now and carry on communicating their observations. Each person then presents their colleague to the group

including one interpersonal ability that they had experienced with their colleague in the interaction. Laura makes a playful comment about her partner's ability to marry a good-looking man. Everybody laughs.

Analysis of Subgroups:
An analysis of roles and of subgroups assists the trainer to be alert to the changes in role and role relationships that will support a progressive learning system and recognise the nature of the learning system that they actually encounter. Underlying role theory is the belief that all human beings at any stage in their life are capable of developing a wider range of ways of creative being. Role theory is infused with hope. There is value for the trainer in having an optimistic way of thinking about human development when confronted with difficulties in training situations. Role analysis provides a means of thinking about these to guide the trainer's choice of interventions. The following description of subgroups and roles is based on what participants were doing in the first part of the session. The Diagram 2 above depicts where they were sitting in relation to each other.

- *irrepressible lovers of life:* exchanging glances, comments and smiles with twinkling eyes.
- *anxious students:* worried focus on pens, dictionary, textbooks and chairs.
- *sensitive dreamer:* empathic non verbal language, far away look in eyes.
- *down to earth doers:* alert body language exuding 'lets get on with the job' attitude.
- *stolid matriarchs:* sitting stolidly, observing others and modifying their behaviour through nonverbal expressions of approval or disapproval.
- *curious explorers:* interest shown toward new ideas, light of life in their eyes.
- *playful gossip:* cheeky jokes about other group members' personal lives.
- *rule enforcing autocrat:* telling off younger students in hushed and stern tone, thinks that young students should keep silent and respect their elders.

All of these subgroups have the potential to support a restrictive learning system if they remain static within the group. *Irrepressible lovers of life* can be so warmed up to fun that work may not get done. *Sensitive dreamers* can focus mainly on visions and ideas without accompanying actions. A *rule-keeping autocrat* runs a tight ship with not much flexibility. A *playful gossip* can warm up to talking about people rather than to them. *Curious explorers* can be so focussed on finding the next thing they may not integrate the new thing they've just encountered. *Down to earth doers* can warm up to activity without reflection and *stolid matriarchs* can stifle new life.

Interventions that Build Progressive Roles:
Beginning with the established hierarchy and then facilitating people getting together with someone in a different position helped to cut across the interactional patterns which previously existed in the group. The level of

spontaneity in the group increased markedly as people progressed through the three different pairings around different criteria. Asking people to identify and publicly communicate an interpersonal ability they perceived in a colleague lifted self-esteem and warmed people up to their strengths.

As people become more aware of the observations they are making of the nonverbal communications of their colleagues, and then communicate these, they warm up to the roles of *objective observer* and *constructive communicator.*

The trainer is paying attention to a systematic process of warm up in which people move from simple to more complex interactions so that they experience 'in as natural a way as possible' progression to active involvement with each other which will move into specific clinical situations during the sessions that follow. The session has been planned to link in with the curriculum objective of the first session of further developing ability to be an active listener.

Warming Up to a Professional Role System of Active Listening
The purpose of the warm up and interventions to build the sociometry and spontaneity in the group is to develop the role of active listener. This role is an integral foundation for role development in the future sessions on interpersonal skills in this course including counselling, mental status assessment, family assessment and conflict management.

The following role system (Diagram 3) is of an active listener. It portrays the range of roles which the trainer works to warm participants up to, thus further developing their ability to listen effectively in a variety of situations. This is done in the session by warming participants up to finding out some things about their
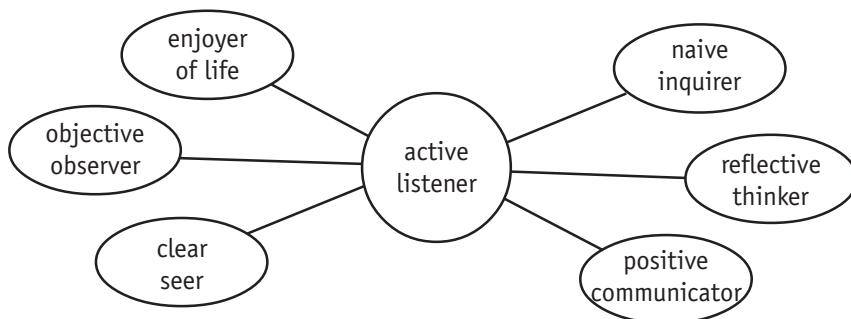
Diagram 3: The Professional Role System of an Active Listener

colleague (*naïve inquirer*), thinking about what occurred in their interaction (*reflective thinker* and *objective observer*), what they valued in each other (*clear seer* and *enjoyer of life*) and stating some of their observations in a constructive way (*positive communicator*).

This role system is important as it has guided the planning of the session and is directly linked to the learning objectives. The focus is on warming up the group in the first of a number of training sessions on interpersonal skills. The warm up of group members at the beginning of a training session to each other, themselves, the work and the trainer will have an impact on the learning system that develops. The development of roles from the active listener will assist the learning system to move from restrictive to progressive.

Warming Up To Enactment:
As we have seen the group has been operating in a dependency learning system with a lack of independent thinking and action and where spontaneity is low. There is little free and flexible expression between group members. In such a restrictive learning system there is no place for naive inquiry. The challenge for a trainer is to work with the motivation of the group members to learn in such a way that they warm up to roles and group functioning in which a progressive learning system is created and spontaneity training effectively used.

People have varying degrees of enthusiasm in participating in role-play and by its nature spontaneity training can be equated with role-play in people's minds. Although there are marked differences for the trainer and participants between spontaneity training and role play it can remind them of previous experiences - both positive and negative. For some people the mention of the word role provokes a fear of having to 'act' a role and not feeling able to do this. It is crucial that the trainer lay the groundwork in the early stages of a first training session to establish a learning system within the group in which people become involved in action in a meaningful and reflective way. This is done by setting clear expectations for the participants. They are not being expected to 'act' anything different to who they are. The trainer is attempting to increase their warm up to particular professional roles by tuning into and refining their abilities. The trainer deliberately does not refer to role play or actively try to address past negative experiences or fears - this would be an impossible task anyway - she is focussed on creating a positive learning experience in the present that can be built on in future sessions.

As we have seen it is important to create a resilient environment within which people will be able to try out new interpersonal skills, gain confidence in these, be able to make mistakes and not be judged or made to feel stupid by their

colleagues or the trainer. Exploration, light heartedness and thoughtfulness are encouraged. The use of sociometric exercises gets people out of their chairs and warmed up to acting.

The aim is to warm people up to each other and the work of the session. It is also immediately beginning to establish a working environment for the rest of the sessions in which people act and interact. Rather than saying there will be action the trainer does it. Spontaneity training begins the minute the session starts.

Recommendations for Trainers on the Use of Spontaneity Training

It is useful to have some guiding principles in mind when using spontaneity training. The following recommendations have been derived from working on this paper.

- Start on the front foot with the use of interactional activities in the group - do not be apologetic or tentative. Asking people if they want to do enactments will raise indecision in them.
- Use sociometric exercises which move from simple to complex interactions and from superficial to more revealing criteria.
- Include a criteria of difficulty and ability used in overcoming this, for example, one obstacle overcome to get to the session. This contributes to the development of a learning system where obstacles are acknowledged.
- Link enactments clearly with the learning purpose of the session and participants' own clinical practice.
- Structure enactments to link in with curriculum objectives and include choice of the details of the roles enacted for participants to bring their own experience as practitioners or of patients that they have worked with.
- Take time to warm people up adequately to the roles they have chosen.
- Include reflection and discussion on role development.

- Strengthen your own capacity to be present and not reactive to your own discomfort when there is turbulence and/or resistance in the group.

Conclusion

There are moments in this session where the trainer is out on a limb. At these times she cannot depend on the approval or the immediate cooperation of the group in what is suggested. When a group is expecting a certain style of learning it requires some readjustment for people when it becomes clear that their expectations are not going to be met. When a particular structure is operating within a group there will be some anxiety when this is not actively upheld. During this period of change in warm up of the group the trainer needs to be able to sustain their warm up to the work that they are doing while the turbulence and discomfort is present in the emotional climate of the group.

Spontaneity training may result in an increased awareness of elements contributing to a restrictive learning system. While awareness in itself does not guarantee any change in functioning, a greater level of spontaneity may result when awareness is combined with active practice of new responses in a range of interpersonal situations. The vision is of professional healthcare workers learning and working in a progressive learning system where they work with purpose and flexibility and contribute to effective patient care and ongoing workable structures.

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Trusting Myself, Trusting The Method

Martin Putt

Martin is a therapist and group worker at SAFE, an Auckland-based community therapy program for boys and men who have sexually abused children. He presents his reflections of a weekend workshop for adult male sex offenders, focusing particularly on the warming up process to self, to directing, and to the group.

This piece of writing was written the day after one of my first 'solo-voyages' as a director of psychodrama. Looking back a year later with many more dramas produced and experiences integrated I enjoy my words and work. My purpose here is to explore some of my own internal process as I come to identify with the role of a psychodramatist at work.

Towards A Safer Future

It is Sunday afternoon and I have returned home from two days away with a group of four male clients and three therapist colleagues. We have conducted a Victim Empathy weekend for adult sex offenders in treatment. They are applying themselves to the task of understanding, and appreciating better, the experiences of their child victims, with a view to a safer future for all. We have used the psychodramatic method in this work. I am with my friend and training companion, John Wenger, and two therapists from the SAFE program who have acted as auxiliaries. These therapists are the regular facilitators of this group in the weekly program.

From Theatre to Therapy

We start after work on Friday evening. Drama and theatre-games provide the basis of a director-directed warm up. As our bodies move, emotions flow more freely and we become warmer and more fluid, allowing this method to better meet its purpose. For this group the aim is to widen perspectives, develop empathy, and move toward more accurate role reversal with victims. I use partner and group exercises with blindfolds for building trust in one other. I use theatre games based on improvisation and turn taking. I am clear that this is taking the men out of their comfort zones, so I approach this with much playfulness, ever watchful and responsive to the nuances I sense in them individually and as a group. These experiences warm up other qualities, such as curiosity, achievement, openness and trust. As these theatre improvisations involve imagination, physicality, spontaneity, play and touch, a warm up to exploring the unknown and unconscious begins. None of the men can remember doing anything similar since school

games.

Action-insight is the goal of this work, where the actions, feelings and thinking processes meet together to assist real change. I have assessed that the sociometry and communication within the group requires building and have focused on this in two preliminary two hour sessions as a visitor to their normal weekly groupwork program. This has perhaps not been completely successful as two members of the group have not turned up. Friday evening's play is valuable in creating the active and trusting learning environment we need. I believe this spontaneity training will develop fluidity in the capacity to connect with one's self and each other, and with our purpose. It will assist the warm up to new roles necessary for experiencing the world from the point of view of others, in this case the children the men have victimized.

Twelve Birthday Candles
Later that same night, we watch a poignant video where young people talk about living with the hurt of childhood sexual abuse. One speaks of remembering it at every birthday party she goes to. I ask the men to choose children's birthday cake candles to represent each child they have harmed. We stand outside in the dark with twelve candles placed in the earth, silently respecting, and watching them burn down. I leave it open to their own symbolism but say *"I wonder what memories the children you hurt will carry with them?"* In the distance moreporks (a New Zealand bird) hoot at the moon and the Tasman Sea laps and washes upon the nearby shore. We are surrounded by the night and I become very conscious of why we are here as a group and why I am doing this work.

I wake the next morning knowing that I am beginning to move toward directing the day's dramas. I tussle with a building anxiety, and imagine that I am setting out to sea and getting out of view of the shore. I fear an impending creative death whereby I will end up not knowing what to do or where to go - a real sense that I am a fraud and about to be discovered. It is a debilitating and restrictive experience. I can, however, taste the force of my will pulling me forward to produce, to be the spontaneous actor and creator that I am. It is bittersweet on my tongue and something wise in me knows that I am ready for the inevitable spontaneity required, as once I was in the womb, preparing for that first great creative act.

Trusting the Method
I remember Dale Herron's words from supervision as I left the 'home shore' two days ago. *"Trust the method, Martin...Concretise what is"*. Then there is the mantra whispered by Max Clayton to me in training. *"Produce. Produce. Produce"*. A steadying warm up to personal authority and creativity begins to occur. I am breathing and my eyes are looking out now. I can hear the tui (another bird) in the trees outside and despite really wanting to drink coffee I decide against it this morning! As I bring this warm up forward in me I trust it will occur for the men too. What is to come is new. It has never been done before and we will make of this what we will. And for myself (and them) I add...*"and it will be great"*. Now I am ready! My stride quickens as I walk towards the group room.

While I could write about the dramas, describe the roles and the rationale for decisions made, I am most interested in how my style emerges from my theatre background. This couples with the inspiration I felt while watching Max Clayton produce surplus reality scenes, not just from the protagonist's picture but also from his own creative vision of the drama. For me this weekend, it is in surplus reality that the psychodramatic method fires into life and I with it...

In Dad's Garden

Producer: *"Create the childhood football field now...use the rope... choose someone to be Dad finally coming and watching you play from the stands...reverse roles...Dad, you're here at the rugby and Mike is playing for the trophy...what's it like?... ok now...all of you! You are in a game of rugby and Mike is going to score the winning try....you can hear the whistle...Go!"*

And later...

Producer: *"Yes, he's dead, I know. I want you to think now of a place where you and your Dad could have a talk together, somewhere that's meaningful for you both."*

Tears come as he says, *"Dad's Garden."*

"Ok! Use props and people to create the garden, Dad's pride-and-joy! Describe it to us... what time is it? Dusk. Right it's dusk, and you are talking with your Dad."

A tender scene plays where Mike tells Dad about the things he loved and hated about him.

Producer: *"Now choose someone to be your young niece and bring her here to the garden also. Tell Dad what you did to Shayla...tell him how frightened she was...how you knew that...let him know what was happening inside you, how you feel about it now. Reverse roles...Dad, you tell your son how you feel about it....reverse roles. Reverse roles with your niece"*

Producer: (to the protagonist as Shayla with a double)...*"What is it like for you that Mike did this thing? Did you want this to happen? Could you stop it? What sort of uncle did you want? Reverse roles back to yourself. Dad died and there was nothing you could do to stop it... What connections do you make between what you have experienced and what Shayla experienced? Can this information help you in any way in your future?"*

The scene has produced tears. Feelings of loss, remorse, shame and helplessness are experienced throughout the system and there

appears in this catharsis some insight that can provide hope and understanding, even resolve. This is necessary. It is not enough that Mike cries. It is not enough that he is remorseful or ashamed. What is required is an integration of the many facets of his experience as a man, so that in his experience of the roles in his drama and the insights gained in role reversal, he has a clearer mirror of himself and his potential for both creation and destruction. There is a thread of self running through his life experience and this self is not simply a series of isolated events.

The others in the group experience themselves in the protagonist's position and warm up to their understandings and experiences. This is Mike's drama but this is also a group-centered drama, with the common theme of getting in touch with the victim's experience. Aspects of it will be repeated throughout the weekend. Through the sharing this group method proves itself pragmatic, efficient and effective. The men are empathetic toward each other and I name this. I remind the group of our purpose and our work to build connections between the members by encouraging them to express growing understandings from the drama, and feelings about themselves and each other.

Director: *"There is no-one else to blame here is there? And no way out of this. It happened and it must never happen again to anyone else. What can you do now to ensure this stops here? Tell Mike....it looks like he is really creating something new here for himself and is more resolved to successfully complete his treatment at SAFE? Tell him what you saw in him and what you are seeing now. Let him know how his work is helping you."*

I feel great. However, it is not all smooth sailing! In the last drama of the weekend I tell a Rotarian public speaker that we will enact a scene where he will make a public speech about the effects of sexual abuse on children. I am thinking that this

will demonstrate understandings and test roles developed during the weekend. However, I don't tell him this. In retrospect it would have been good to let him in on my thinking as it seems he warms up to suspicion, failure and defensiveness. We could have warmed up more together to play, ease and openness had I taken a different route with him. He does not warm up to the role. What am I going to do? I am tired, and he seems to be the toughest of the lot.

The Sea Captain
Somehow I recover from that dismal first scene by admitting my failure. I ask him what scenes he is warmed up to. He begins to speak about Mike's drama and his own dead father, and tears come chokingly. He covers his eyes and heads for the door, head down, hand in the air in defeat, profusely apologizing to the group. I warm up to action quickly. Now I get going with him.

"Stop! Robert, you are a man of the sea...you are twice my age" (78 years old and a sea captain) *"You know the currents of the ocean and the rules of the harbor...I do not. I cannot sail though I long to. I love the patterns the wind makes on the surface of the sea but I do not understand it. You could teach me all I need to know to be safe out there and to really enjoy the sea... it took you a long time to learn that? Well I've learnt some things too. I've taken years to train myself in this work, and what I know a bit about are feelings and expressing them so you can be safe and in time come to really enjoy them. What say you let me teach you how to let the tears come so the pain comes out safely and you can benefit from this experience you are having, without feeling you're shameful and weak, and that men shouldn't cry?"*

To my surprise he shifts. There is a long pause and he smiles in a mischievous sort of way, like Puck, and says *"OK, but when do I get to take you out to sea?"* The group laughs as we all imagine me buried at sea or walking the plank (or is that just my picture!). He is easy to like and while

'the Joker' may be an overdeveloped role in him at times, it is a spontaneous and adequate expression in this moment.

I coach him to feel his feet on the ground, to keep breathing and to let his lungs keep working, and his body to shake. The full breath-work seminar would be useful for him but what we do is adequate. He does cry and stays in the room, without retreat or apology. He acts on all my coaching. The others support him. I am moved.

We set out a graveyard of old friends, now dying in his advancing years. We have a discussion about how feelings get buried when really they need airing. He slips into storytelling mode and in soliloquy from the stage speaks to us as a group about his ill wife and the sexual difficulties he has experienced. Here is the private speaker and public speaker in action together. We hear about the sexual feelings and activity he resisted and repressed as a young naval officer in ports throughout the world.

Then he candidly tells the group how he felt some freedom in sexually touching the two little girls he abused, while knowing desperately that it was wrong. He has not before disclosed as coherently as this. It is difficult for him to role reverse with them and despite my encouragement to try, he steers a wide berth. *"I can't go there. No. No."*

Is this success or failure at victim empathy? He is more 'with' himself. He is making connections and integrating a number of life experiences. New roles are emerging that could assist him to one day role reverse with his granddaughters. I ask myself, was this a necessary step in his warm up to the next bit, and all he was able to do for now? What other steps are needed for him to truly role reverse? Perhaps we could enact and explore the scenes he presented in his storytelling? Perhaps more doubling and

storytelling might assist the social atom repair that is necessary to role reverse with others.

For now though, it is enough that he has witnessed and experienced all that he did. A good relapse prevention plan and strong support people will assist his safety. The embryonic roles that he has developed will need a structure to support them, as well as others who can model adequacy and ensure that he continues his work towards 'victim-empathy' and other modules of the program.

Danny the Champion of the World

I am beginning to understand that my psychodramatic work cannot be about orienting towards a product or a desired outcome, but rather about trusting and learning and practicing the method; concretizing what is present and building warm up and readiness for the next step. This is how I can be an auxiliary to spontaneity, my own and others', and approach living as Moreno advocated.

It is exhilarating work. Normally I work with children and adolescents, and here I am in the company of men the age of my father and grandfather, knowing that I am producing something life giving. As I sit in the group towards the end of a heartfelt sharing session, I feel power surging through my veins. It bloats me like a soaked raisin. I am somewhat overwhelmed and feel suspicious and slightly scared of this experience. Is this the megalomania spoken of about Moreno? Whatever this juice running through me is, it is also healing and all-loving. I resolve to talk about this in supervision and for the time being, thank god, let it be. I begin to notice it in others, in the room, all around me. I am breathing with the world and feel ready for whatever is next, and ready for that cup of coffee, and yes, a rest.

My experience now as I reflect and write about

this weekend is one of pride and compassion. Like a king-tide coming in full, disowned parts of me swell with acceptance, integration and movement. A deeper sense of intimacy creeps into my relationship with the psychodramatist within. It started once in awe from afar, moved through a mutual flirtation to full blown lust, and now I hunger for time together and walking down Ponsonby Road arm in arm, confidently committed!

I feel like Danny from Roald Dahl's *"Danny the Champion of the World"* - discoverer of the perfect bait for catching pheasants. I am like his discovery, the raisins swollen with brandy. Not just creation but the creator as well.

June 2003

Postscript

A year has passed since I wrote this paper, and my colleagues at SAFE and I are rethinking our work. We are grappling with questions about how we use the method to develop victim empathy, and the nature of the relationship between empathy and role reversal. We suspect that some of our practice has become a bit too formulaic, and as such the warm up to learning and creativity has become limited. We have begun exploring new ways to ensure that our work remains alive and life giving, and better meets our clients 'where they are'. This is a work in progress that represents our developing trust in each other and in the psychodramatic method, and also developments in the clinical practice of sexual offender treatment. My next leap of trust involves further inquiry into the steps necessary in the warm up to role reversal, and into the process whereby psychodramatic theory and practice can be utilised in this client group to build an orientation to life that is based on safe connection with others *and* with self.

Expanding Our Thinking About Families as Systems

Liz Marks

Liz works as a psychodramatist, psychologist and family therapist in Melbourne, and is a staff member of the Australian College of Psychodrama. While a systems approach has long been a central part of Morenian thought and practice, the more recent expansion in family therapy offers ideas on how families operate as a system and possible approaches for working with families. This article is based on her conference presentation at Christchurch in 2004.

This paper will introduce you to several concepts that family therapy teaches us about systems in general, and about family structure and dynamics in particular. There are currently at least fourteen schools of family therapy. I will focus on a few aspects that can inform our thinking and perhaps our work as psychodramatists. A glossary of terminology is provided at the end.

The various schools of family therapy emphasise different themes. Some schools of family therapy, including structural, cognitive-behavioural and strategic schools, focus strongly on *problem-maintaining behaviour patterns*. Other schools, including social-constructionist, solution focussed and narrative, particularly address *belief systems and narratives*. Other schools again, including transgenerational, psychoanalytic and multi-systemic, emphasise predisposing *historical, contextual and constitutional factors.* This article touches on all three themes.

The first and perhaps most influential model of how families operate was cybernetics. This is the study of feedback mechanisms in self-regulating systems, such as heating systems. *"At the core of cybernetics is the feedback loop, the process by which a system gets the information necessary to maintain a steady course. This information includes information about its performance relative to the external environment as well as the relationship among the system's parts."* (Nichols and Schwartz, 2001, p.55).

As in other cybernetic systems, in any family there is a tendency to maintain stability, or homeostasis by using information about its performance as feedback. Family therapists who focus on cybernetics regard patterns of communication, known as feedback loops, as the basic source of family dysfunction.

A Family in Therapy
Some key concepts from Family Therapy will become clearer if we focus on a family as it first attends therapy.

The parents, Marguerite and John have requested therapy because they have problems with Mick, who is 14 years old. They also have a daughter, Joanna, aged 18 who *"has never given them a moment's trouble"* and a son, Timmy, aged 12.

Marguerite and John's family is at a particular stage in the developmental life cycle (Carter and McGoldrick, 1989). Perhaps this is the first time they have experienced any rebellion from one of their children. The therapist might hypothesise that this is a time of transition in the family's life. Such times of transition often require new learning, which is navigated with more or less difficulty in every family (ibid).

In addition to the transition to being a parent of adolescents, there are many other times of transition in families, for example the birth of a first baby and retirement. A family therapist who is conscious that there are new challenges at times of transition would be likely to normalise some of Mick's behaviour.

In the first session Marguerite, the mother, sits between her husband and Tim, aged 12. Tim moves his chair close to his mother. Mick sits next to Tim. John, the father, sits between his wife and Joanna, leaving the chair next to Joanna free for the therapist. Joanna glowers at Mick and indicates with a gesture that he should remove his cap. He scowls and ignores her suggestion.

As a result of having the whole family present, the therapist will notice dynamics that may never have emerged if Mick had been seen on his own, or had attended only with his parents. According to systems theory the essential parts of an organism, or living system, are properties of the whole which none of the parts have. They arise from the relationships between the parts. These properties are destroyed when the system is reduced to isolated elements (Nichols and Schwartz, 2001). From a systems perspective, then, interviewing Mick on his own is unlikely to be productive.

Many hunches or hypotheses can be arrived at from observing where family members are seated and what they have done as they sit down. Hypotheses need to be held lightly by the therapist so they do not dominate our thinking. *"We don't have to marry any of these hypotheses; we don't even have to date them, we'll just flirt with them for now."* (Boscolo, L in a Workshop at Williams Road Family Therapy Centre, Melbourne, 1983: quoted by Dr Brian Stagoll, personal communication, 1992).
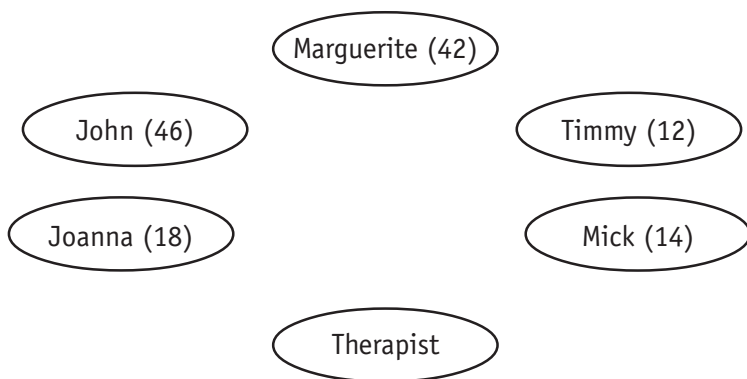
Diagram 1: Seating Arrangement of the Family in the First Session

For example, John has readily agreed to attend the session and is glancing around the family: he seems involved, does not seem to be disengaged. Joanna acts in a disciplinary parental role without comment from her parents: perhaps she is often in this role. Perhaps she is supporting or protecting one or both of her parents. Joanna may be more strongly and positively connected with her parents than Mick. Is she enmeshed with them? Tim wants to sit close to his mother and has moved away from Mick. Is he seeking support, giving it, or both? Perhaps the whole family is in a coalition against Mick. Generating these varied hypotheses enables the therapist to play with or test them out during sessions.

> Marguerite and John describe Mick as increasingly out of control, angry and rebellious. A policeman, who is a family friend, agrees with them that Mick's angry rebelliousness could get him into real trouble. Mick's form teacher recently told them that Mick is defiant, sullen and no longer interested in his school work.

Family systems vary greatly. Some families are open to external systems and influences. Others, for instance families in a highly orthodox religious context, are more closed or impermeable. We already know that this family has been influenced to some degree by the educational system and by their friend the policeman, who is a member of the legal system.

All these descriptions from John, Marguerite, the policeman and the teacher attribute the problem to Mick. Many of his social mirrors provide him with a negative picture of himself. The 'reality' about Mick is socially constructed by many others. It's part of our everyday language or cultural conserve to regard what happens in families as the result of qualities within an individual, such as rebelliousness or anger.

Yet we know from everyday experience that what appears to be the behaviour of one person is in part the product of a relationship. The moment we see a complementary role system this is apparent to us, as psychodramatists. A *"problem is not intrinsic to the protagonist, but is interactional or relational"* (Williams, A 1989, p.28).

A familiar example of a problem often attributed to one person is that of a complaining nagger, who is generally coupled with someone like a persistent ignorer. Family therapists have come up with numerous descriptions of how two people contribute to what arises in the relationship between them: pursuer-distancer, controller-rebel and over functioner-under functioner, to name a few. When such a pattern is recognised, either or both participants can alter their part of the dance. While it's quite easy to see interactional patterns between two people, it's more challenging to see the patterns of interaction, or feedback loops, in whole families. That's where systems theory is useful.

Family Structure

Early family therapists focussed on the structure within families (Minuchin, 1974) and on what structure enables families to function well. Structural family therapy proposes that a family functions most effectively when there is a hierarchy with the parents in charge; when the parents collaborate together; and when the boundaries between the parent and sibling sub-systems are clear. Within the family in our case study, as in any family, there is a parental sub-system and a sibling sub-system. We don't yet know if there are clear boundaries between the parents' and the childrens' sub-systems, though we may have a hunch from Joanna's behaviour with Mick; nor do we know if John and Marguerite parent collaboratively or competitively.

In the first session it emerges that Mick, previously a quiet boy, has been blowing up at his parents' demand that he returns home by midnight. In response Marguerite cries and John has grounded Mick for a fortnight. Mick exploded even more at what he saw as their unreasonableness and his parents continued either crying or attempting to punish him. Mick's 18-year-old sister Joanna, who he describes as bossy and 'a suck', supports her parents' views. She yells at Mick, telling him what to do. Tim is described as very close to his mother and hates to see her cry. He's annoyed with Mick for upsetting their mother.

It's apparent that the intended negative feedback of crying and punishing is escalating rather than decreasing Mick's behaviour. The family has become caught in an escalating feedback loop that is a vicious circle, which might well escalate until Mick runs away from home. *"A change in constructs or patterns - spontaneity - is needed. The task of therapy is to inhibit the repetitive and ineffective use of a current solution in order that new constructs may develop."* (Williams, 1989, p.83). Perhaps the nearest approximation to the Morenian concept of spontaneity is when a family therapist speaks of a new solution or 'news of difference'.

Joanna is in a coalition with her parents against Mick, as if she's an extra parent. Such a cross-generational coalition tends to create or add to problems in any family. A structural family therapist would intervene to alter aspects of the family structure and would address the cross-generational coalition that currently sees Joanna involved as part of the parental sub-system and being enmeshed with her mother.

Circular Descriptions

A linear, reductionist description of the cause of the problem is that Mick's angry behaviour leads to Marguerite crying. However it might be as true to say that Marguerite's tearfulness, whenever Mick disobeys or wants a change to the family's rules, is an ongoing irritation to him. By taking account of both Marguerite's and Mick's perspectives, we arrive at a double description of these dynamics. We might also hypothesise whether John's instantly punitive functioning contributes to Mick's reactivity. Now we have a triple description of the pattern of interaction. If this was concretised and the dynamics were enacted, the triple description would be readily apparent to us.

The feedback loop, or interactional pattern, could be described as starting at any point. Here is one of these descriptions, starting with Marguerite crying. Read it clockwise.
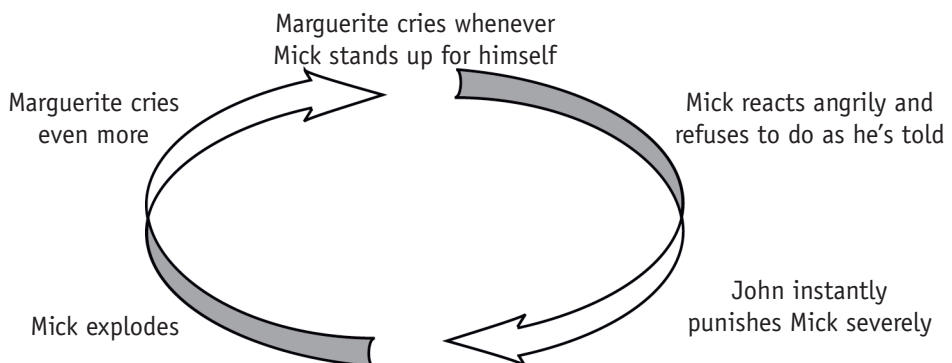

Diagram 1: The Feedback Loop

In this description John, as the third person to be involved in the interaction, can be viewed as triangulating. He appears to be attempting to stabilise the situation. Triangles generally indicate some perceived threat or fear. We can 'flirt' with the possibility that this might well be the case here. We might also begin to hypothisise about what John might be fearful of.

Of course, the vicious circle we've just observed could easily be enacted with either John or Mick as the initial focus, instead of Marguerite. Such circular views of causality provide a broader description of the family's difficulties, enabling therapists to intervene at any point in the cycle. The issue of where the problem started frequently becomes irrelevant when a circular view of causality is taken. A circular view of causality opens up the possibility of investigating new perspectives and hypotheses.

A systems thinker might now consider the question, "What would enable this family to find new ways of interacting when a family member is in pain or angry"? However, while systems theory focuses on interactional patterns, it does not inform us about the unspoken rules and beliefs underlying a family's dynamics.

Unspoken Rules In Families
It's evident that there are unspoken rules and beliefs to do with the expression of pain and anger in this family that are constraining people's functioning. These rules and beliefs need to be taken into account. Some unconscious beliefs and rules will need to change, in order for new perspectives to emerge and lasting change to happen. As we would recognise from any psychodrama, a family's beliefs and rules may be inferred from observation of repeated episodes of interaction and from explicit statements made about what is and what isn't allowed.
We might already have a few hunches about

what the family's unspoken beliefs and rules might be. Again, let's just play with these hypotheses, and not 'marry' them.

Marguerite's tearfulness around Mick is not addressed directly. The family seems to be functioning as if there is some pain that must not be discussed. Perhaps there is a fear or myth that if it's discussed the family will fall apart. Maybe there is an unspoken belief that Marguerite is emotionally fragile and must not be upset by Mick. Certainly other family members are acting as if she requires protection from Mick's anger. Perhaps there is a fear that Mick will go off the rails and never get back on.

One tack a family therapist might take would be an investigation of John and Marguerite's families of origin (original social atom). For sure, they learnt much of their parenting there. A focus on John and Marguerite's functioning might lead the therapist to inquire, "Where did you learn to be such concerned, involved parents?" Did you learn some of what you are doing from your Mum or your Dad? What was happening, that made your parents react as they did? And what would you have liked from your parents, when you were Mick's age?

Such family of origin exploration often proves enlightening and fruitful for the whole family, as you would recognise from working with the original social atom of a person. New perspectives on Marguerite's tearfulness, for example, might emerge from this investigation. We might discover that a brother of hers went permanently off the rails in his teens and her parents never recovered. Maybe Marguerite has felt ashamed of her brother and never grieved the loss of him. Perhaps she fears Mick will become lost to her too. This new information could invite some degree of understanding or role reversal with her from other family members.

While many different perspectives and stories are likely to emerge from an exploration of John and Marguerite's families, some narratives may enable the family to see Mick's behaviour in a new and more positive light. For example the therapist might become aware that there is a long tradition in the family of independent young men, eager to take charge of their lives in their early teens. Such a positive view or reframe of Mick's behaviour might overturn the previously dominant and negative narrative about Mick: especially if there is an invitation to look for further evidence that Mick is taking charge of his own life.

Conclusion

In this article I have focused on the context, structure, interactional patterns, rules and beliefs of one family during a time of transition. It's evident that diverse family therapy concepts and approaches can expand our perspectives on how families function and what may be of assistance to them. Some connections with a few psychodramatic concepts and techniques have also emerged.

There are many ways to conceptualize and work with this family. I've introduced you to a few that are drawn from a number of schools of family therapy, and trust that this brief flirtation with family therapy has been of interest to you.

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Glossary of Terms

Boundaries: The conceptual social border around a family system or subsystem which regulates the flow of information and energy in and out of the system or subsystem. The boundary around the family must be semi-permeable to ensure adaptation and survival. Families that have diffuse boundaries between subsystems are enmeshed and those with rigid boundaries are disengaged.

Circular Causality: The idea that within observed family systems, problem behaviours typically occur within the context of repetitive interactional patterns, in which event A leads to B leads to C leads to A. This is distinguished from linear causality which characterises non-systemic theories and takes the form: event A leads to event B.

Coalition: An alliance, either covert or overt, between two system members. The boundary around such a relationship usually excludes a third system member or subsystem. Difficulties can occur when a coalition is formed across generational boundaries.

Cybernetics: The study of the way biological and mechanical systems use feedback to maintain stability.

Disengagement: Psychological isolation that results from overly rigid boundaries around individuals and subsystems in a family.

Double Description: The process by which the discrepancy between two separate accounts of the same event provides information or news of difference.

Enactment: Inviting a family to engage in problem-maintaining or problem-resolving interactions during the session.

Enmeshment: Loss of autonomy due to a blurring of psychological boundaries.

Enmeshed and Disengaged Families: Enmeshed families are emotionally very close and do not tolerate high levels of individual autonomy. In disengaged families, members are emotionally distant.

Feedback: Within cybernetics: information about change in the system that produces action.

Family Structure. A set of predictable family rules, roles and routines.

Hierarchy: The difference in power between people on either side of a boundary. Parents are commonly hierarchically superior to children within the family structure.

Hierarchical Sructure: Family functioning based on clear generational boundaries, where the parents maintain control and authority.

Homeostasis: The tendency for families to develop recurrent patterns of interaction which helps them to maintain stability, particularly under stress.

Hypothesising: Developing a tentative, systemic mini-theory about some aspect of a system, the validity of which is subsequently checked out through interviewing and observation. Information from interviewing and observation may lead to successive modifications and refinements of hypotheses to improve the degree to which the hypotheses correspond with available information about the system.

Reframing: The positive redescription of behaviour originally described by family members in negative terms. Reframing tends to make the behaviour more amenable to therapeutic change.

System: A complex, rule-governed organisation of interacting parts, the properties of which transcend the sum of the properties of the parts, and which is surrounded by a boundary that regulates the flow of information and energy in and out of the system.

Triangulation: Under stress, dyads involve a third party to form a triangle. Triangulation is a pattern of organisation in which the triangulated individual (usually a child) is required to take sides with one of two other family members (usually the parents).

Pathological Triangle: A common, problem-maintaining pattern of family organisation characterised by a cross-generational coalition between a parent and a child to which the other parent is hierarchically subordinate. The pattern of alliances is covert or denied, and lip service is paid to a strong parental coalition to which the child is hierarchically subordinate.

(Glossary adapted from Carr, 2000, and Nichols & Schwartz, 2001)

Transference, Social Atom and Spontaneity

Mike Consedine

Mike Consedine is a psychiatric nurse, psychotherapist, pyschodramatist and TEP-in-training. He developed and taught clinical supervision based on psychodramatic thinking and practice during his work as in-service training supervisor in a large psychiatric hospital. He is now in private practice and teaches at the Christchurch Institute for Training in Psychodrama. This article is based on his presentation at the 2004 ANZPA Conference in Christchurch.

In recent years I have found it helpful on many occasions to assist people toward greater spontaneity in their lives by becoming more conscious of the constant re-enactment of old responses and patterns of behaviour. These are often referred to in psychotherapy as transferences. In training others to carry out these functions I have discovered that although most are able to understand the concept of transference, in real life they find it difficult to identify. Strangely, though, when I introduced the concept of 'social atom behaviour' there was a greater appreciation of this way of thinking and manifestations of a far greater ability to identify it. Since the terms 'transference' and 'social atom behaviour' seem to describe similar phenomena, and knowing somehow that they could not be used interchangeably, I began to investigate the relationship.

Transference

The term 'transference' was coined by Freud or others near him. Freud defined it as a transference of feelings upon the personality of the physician (cited in Moreno 1959). Others have been more forthcoming. Williams (1989) states that:

"Transference is the term used for an emotional reaction 'brought across' from an old relationship towards an authority. When that sort of reaction occurs between peers it is usually called displacement - the irrational aspects of any relationship between two people. All transference, therefore, is displacement, but not all displacement is called transference. It is convenient to define transference as displacement that occurs in a hierarchical relationship."

Another definition I have stumbled across and cannot properly attribute is more succinct:

"Transference is the lively re-enactment in the present of behaviour that belongs to earlier relationships."

There are in fact almost as many definitions and descriptions of transference as there are psychotherapists. In general terms we could

say that transference and countertransference are words that are often used to describe dysfunctional interactions between people. Transference refers to a warm up or response triggered in a person which includes thoughts feelings and actions and carries with it significant and dominating elements learned in previous experiences and carried over into the present. Since much of our current behaviour is previously learned there is a good deal of discussion in the literature as to whether or not the term transference should only refer to those responses which are not only dysfunctional in the present but also carry a very strong load of feeling and indicate previously unresolved conflict, or whether the term should be used to describe all previously learned behaviour.

Generally in psychotherapy the term 'transference' refers, as Freud originally intended, only to those problematic or neurotic responses which are a result of hugely conflicted and therefore unfinished experiences in the past. 'Countertransference', of course, refers to the response or perceived response of the other in any interaction which triggers or perpetuates the transference.

Moreno did not like these terms. He pointed out that as well as the transference, the unconscious fantasy which is projected, in his observation there is another process where *the patient sizes up the man across the desk and estimates intuitively what kind of man he is"* (Moreno and Moreno 1959, p.6). This is what he called 'tele' and occurs through that part of the ego which is not carried away through auto-suggestion. His principle objection seems to have been to the notion that the patient is transferring while the therapist is simply analytical and objective. He maintained that transference is an interpersonal phenomenon which works both ways. In other words both the patient and the therapist are caught in the same dynamic.

The difficulty with the terms transference and countertransference from a personal or professional development perspective is that the identification of these elements and the use of these terms is largely restricted to therapy or supervision settings. That is, identifying and naming it as such is not much use in ordinary everyday life, because there is no contract to explore and work through the transference in the relationship. This point was brought home strongly to me when I accused a person with whom I was in a social relationship of being in a transference with me. She responded by saying with passionate rejection, *"I don't care what you call it, it's all I've got"*.

The identification of the transference provides the therapist or the supervisor with an understanding of the dynamic and also, in therapy, an implied contract to work through it as part of the process. In everyday life this is not the case. Furthermore, in supervision and other professional growth activities there is no such contract, although I would argue that in supervision the identification of transference in the professional/client relationship is an important aspect. Generally, however, there is no mandate to work through it and in everyday life the person seeking personal or professional development but who is not quite so much in the line of what has traditionally been called therapy is left without concepts to assist in that development. This is where the concepts of social atom and social atom repair come in.

It is also interesting to note that descriptions of the phenomenon we are referring to as transference also occur in other contexts.

W.B. Yeats, the Irish poet, says:
"... ... no people hate as we do in whom the past is always alive". (in Foster 2001)

Mary Oliver, a wonderful American poet, in a poem simply called "Robert Schumann", says:

"... ...And now I understand
Something so frightening, and wonderful -
how the mind clings to the road it knows, rushing
through crossroads, sticking -
like lint to the familiar ... ...". (Oliver 1992)

Clearly both of these authors are referring to the effects of the past on the present and in the case of Mary Oliver I can think of no more adequate description of transference. This raises another aspect of the transference discussion. Does transference refer only to those experiences from the past which are unfinished or can it refer to any experience from the past? This is precisely the problematic area when considering the relationship between transference and social atom behaviour. Somehow Mary Oliver's brilliant lines seem to belong more accurately with 'social atom behaviour'.

Social Atom Behaviour

The term 'social atom' was coined and developed by J.L. Moreno. It refers to the network of significant relationships at any moment in our lives. Within that network of significant relationships roles and role relationships emerge and represent the life force within the individual. This, according to Moreno, was primarily creative. The original social atom is of course the family of origin with perhaps some significant additions. The social atom of any person is potentially in a continuous state of development through exposure to situations and relationships in which something new is called forth. So it is not just in the original social atom that roles and role relationships develop.

In Moreno's theory roles emerge in any individual in response to other persons or events which they encounter. Furthermore, it is not just the role which is internalised or learnt but also the role relationship or role system. That is, both the perceived role which triggered the response and the response role itself are internalised as a system. So that when that perceived role is again encountered or perceived, the learned response tends to emerge. These roles and role relationships have now become part of our role conserve of learned and internalised ways of managing the world.

When a new role emerges in us in its first manifestation, it is a spontaneous, creative living response. When that role is repeated in another situation that is somehow perceived to be the same as the original, then it lacks spontaneity, creativity or indeed life. It is often simply a repeat of that which has already been internalised and therefore does not take us forward in our development. We have not developed anything new. Of course we all need a conserve of roles and role relationships to manage our lives. We do not want to start afresh in learning how to be in the world each morning when we wake. However, there is a tendency to perceive situations around us as being the same as the original situation in which the role developed. We could say that unconsciously we perceive the current social atom or elements of it to be the same as or similar to the earlier social atom. We thus repeat social atom behaviour. Our responses lack spontaneity. So what is spontaneity and how does this relate to transference?

Spontaneity

'Spontaneity' is properly a Morenian concept although it was never defined by Moreno. It was and often is referred to as the 'S' factor. The operational description suggests that it relates to the ability to bring forth something new in response to an old situation or something adequate in response to a new situation. Spontaneity, it seems, includes elements of newness and elements of adequacy. Yet this description somehow lacks something. It

somehow does not capture something vital about those moments when we are truly spontaneous, truly flowing, truly alive.

For me spontaneity is the urge to live - the spark inside which prompts us to move forward unconflicted and non-anxious. The prompt which urges us beyond the known! The unconscious spark which propels us out of the conserve toward a freedom seldom experienced. Spontaneity enables us to be in the moment fully with all that we are and all that we have experienced. We are aware of nothing but our urge to live and yet we are aware of everything. In this sense perhaps we have recaptured something of what Moreno referred to as the "stage of all identity".

Once again literature captures such moments in a way that only literature can. David Whyte is a poet who takes his perspectives on creativity into many international companies. In a poem called "Out on the Ocean" he describes an experience of being five miles out to sea in a storm.

"the blades flash
lifting veils of spray as the bow rears
terrified then falls

with five miles to go
of open ocean
the eyes pierce the horizon

the kayak pulls round
like a pony held by unseen reins
shying out of the ocean
and the spark behind fear
recognised as life
leaps into flame."

It is this spark behind fear that in some sense I recognise as spontaneity. David Whyte continues:

"Always this energy smoulders inside
when it remains unlit
the body fills with dense smoke."   (Whyte 1994)

He goes on to discuss these lines saying that we cannot neglect our interior fire without damaging ourselves in the process. If the flame is not lit, he says, the body fills with smoke and the toxic components of the smoke are resentment, blame, complaint, self-justification and martyrdom. To these I would also add envy and grandiosity.

The flame of creativity must be lit. Spontaneity provides the spark.

Social atom behaviour, by and large condemns the spark to dark recesses where it is seldom lit. And so the body fills with smoke.

Social Atom and Spontaneity
What I am here calling social atom behaviour lacks spontaneity. It is behaviour which has been generated in previous social atoms and is now re-enacted largely in order to deal with anxiety. It is often brought into situations where normally it would be described as adequate. Once we realize how lacking in spontaneity it really is, we would have to describe it as coping behaviour at best.

Social atom behaviour then consists of roles and role relationships brought over from earlier relationships. Its primary defining characteristic is its lack of spontaneity. However it is not necessarily fragmenting. Social atom behaviour is not only more easily recognised but it is also a much larger and more comprehensive notion. Further, it is not nearly so pretentious. It is not surrounded by reams of learned documents and a good deal of mystery. It is an enabling concept in that all behaviour can be addressed.

The terms social atom and social atom behaviour

allow us to conceive of development and growth and indeed healing in a profoundly larger perspective than do the current usage of the terms transference and countertransference. Any piece of behaviour which is being repeated without re-enlivement may be described as social atom behaviour. When it is not producing much in terms of enlivenment and development it can be thought of as a response which needs to be examined if further development is to occur.

Diagram 1 sets out how Transference, Social Atom and Spontaneity might exist in relationship with one another. This diagram is not in any way intended to be definitive but does provide a useful starting point for discussion.

On balance I suggest that it is probably wise to consider social atom behaviour and transference as two separate concepts which have some elements in common. We might say that all transference is social atom behaviour, but not all social atom behaviour is transference. This makes social atom behaviour by far the more useful concept since it enables a greater range of potentially problematic behaviours to be identified. It also opens up a greater number of situations where these behaviours may be addressed.

Distinguishing Transference and Social Atom Behaviour

One day wandering along the corridor of a psychiatric hospital I said to a patient, absent mindedly, *"Gidday, How are you?"* He said to me with some venom, *"What do you care? You don't care how I am. You might as well say go fuck yourself."*

This is an example of social atom behaviour. It is part of my conserve of roles - built up over a period of time (we might call it the *'absent minded greeter'*). It is acceptable and accepted generally. However, it totally lacks spontaneity. In the situation it is neither a new response to an old situation nor an adequate response to a new situation.

The question is then could we refer to this bringing forward of an old response on my part as transference? I think not. There is very little element of conflict or unresolved difficulty about this. It is not perceived by most as being in any way inadequate. However, it does lack spontaneity. So if we want to conceptualise any adjustment to this way of responding in terms of a theory, we must go to Moreno and consider it in terms of social atom repair or perhaps better 'social atom development'. Here we see that the term social atom repair can refer to behaviour

PROGRESSIVE		COPING			FRAGMENTING	
Well Developed	Developing	Moving Away	Moving Towards	Moving Against	Diminishing	Fixed
SPONTANEITY		*SOCIAL ATOM BEHAVIOUR*				
					TRANSFERENCE	

Diagram 1: Mapping Transference, Social Atom and Spontaneity (onto framework from Clayton 1994).

which is normally accepted as adequate and yet on closer inspection is seen to be totally lacking in spontaneity (i.e. adequate and related to this present moment). Whereas transference would normally refer to behaviour which is seen as in some way less than adequate or perhaps not totally relevant to this moment.

Another example of social atom behaviour is Joan. She has organised and put together a study day for a group of people which has been exciting and stimulating for them. One of them makes a speech at the end of the day in which they thank her for her work. In response Joan stands and without acknowledging the gratitude the group feels towards her moves in to acknowledging other people whose contribution to the day had been minimal.

Now we could argue whether this is appropriate or not. I personally do not think it is adequate for an adult to completely ignore the effort that has been made to acknowledge the work that has been done. An opportunity for people to say thank you makes space for finishing this experience and moving on. A further factor is that those of us who know her know that this is a pattern. Joan never seems able to accept the compliment given to her and the thanks. She always seems to feel the need to redirect it to other people.

Is this dysfunctional? Hardly. Is it transference? That's debatable. She feels no need to do anything other than what she is doing. It is clearly social atom behaviour. It lacks spontaneity and does not relate fully to the situation in which it occurs.

Should we engage in some social atom repair? I don't know. Depends on how you think about it and what your relationship is with her. As a friend you might like to see her accept compliments in a fuller way and really let them in, but feel contented that she is happy. As someone involved with her personal development, we might think that Joan needs building up so that she is able to value her own contribution more fully and thus move on to making greater contributions in a variety of ways as she develops more confidence and greater acceptance of her own abilities. The point is by naming this as social atom behaviour we have a greater understanding of Joan and a wider range of options for relating to her. If we see it as transference our options are more limited.

Perhaps we might think of social atom behaviour as all behaviour that forms the conserve we have developed over time and is now enacted either with or without spontaneity in the present. Transference refers only to conflicted aspects of the social atom responses that are enacted inappropriately in the present.

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It's Not Enough Just To Say It Works
Research Into Psychodrama and Experiential Therapies

Charmaine McVea

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Psychodramatists need no convincing about the efficacy of psychodrama - we experience the benefits in our own development and in the work we do with our clients, and we have an understanding of the underlying principles of spontaneity theory and sociometry. Yet, to outsiders, psychodrama is often associated with drama and 'acting out' and as a consequence struggles to be recognized as a legitimate therapy.

At the same time there is a big push in the health field to promote 'evidence-based' treatments, and this push is having an impact on how therapists are encouraged to work. It is also influencing people seeking therapy, who are being educated to look for independent 'evidence' that the method is appropriate for them. Health insurance groups are increasingly looking for research evidence to determine which therapies they will fund. Therapeutic approaches that can support their position with research become the 'treatment of choice' not because they are necessarily more suitable or more effective than other approaches, but because they can point to published evidence for their claims.

Unfortunately, psychodrama has produced limited research into the effectiveness of the method in therapeutic contexts, and there is a need for further research that is directed at understanding the contribution psychodrama makes to therapeutic processes and outcomes. Research can also be of direct benefit to practitioners when it enables us to challenge our preconceived ideas about the work we do, and find better ways of doing it.

By adopting research approaches that are congruent with our identity as psychodramatists we can build research in ways that excite interest among practitioners and promote psychodrama at the same time. Developments in psychotherapy research - and particularly experiential psychotherapy process research - provide possibilities for research into psychodrama that can inform our practice and assist us to communicate our findings to the broader counselling/therapy

profession and the public.

The Current State of Therapy-Oriented Psychodrama Research

In a recent analysis of studies of the treatment effects of psychodrama Wieser (2003) concluded that while some good results were emerging, much more research was needed, and greater attention to scientific rigour was required.

Although psychodrama is commonly used as a therapeutic tool there are surprisingly few studies that specifically investigate the effectiveness of psychodrama in therapeutic settings. When studies are done, the results are encouraging. For example, Burger (1994) found that psychodrama assisted battered women to develop greater assertiveness. Ragsdale, Cox, Finn & Eisler (1996) reported that war veterans with PTSD who participated in an intensive group treatment with a major psychodrama component, improved on measures of hopelessness, guilt, shame, loneliness and emotional expressiveness. Their research wasn't able to isolate the impact of the psychodrama component of the program, but they noted that they had a lower drop-out rate than similar programs that employed other exposure-based therapies instead of psychodrama.

Some research has focussed on specific psychodramatic techniques such as doubling and role reversal investigated out of the context of a psychodrama session. Bohart (1977) found that having participants reverse roles with someone they were experiencing conflict with, led to a greater reduction in anger and hostility, than did the act of expressing anger alone. Hudgins and Kiesler (1987) found that the psychodramatic technique of doubling led to a deeper level of experiencing and produced a higher level of self-disclosure at intake interviews, than the use of a standard interview procedure. In a single-case study, Drucker (2000) found that the technique of the containing double, a modified doubling technique designed to contain overwhelming affect reduced dissociation in a client with PTSD symptoms.

Studies such as these contribute to an understanding of how the component parts of psychodrama can assist the therapeutic process, and can provide links between psychodrama and broader research findings. For example, Greenberg and Safran (1989) noted that high levels of experiencing have been consistently related to good outcomes in psychotherapy, so we might propose that the use of doubling in psychodrama could assist us to achieve good outcomes.

Broader Research Relevant to Psychodrama

Other areas of psychological research are providing indications that experiential, action oriented approaches to therapy may be important. From their research into traumatic memory, Van der Kolk, McFarlane and van der Hart (1996) identify the need to activate the experiential context of the memory, in order to heal. They also recommend the use of experiential processes that enable clients to take action in response to their traumatic experience, to regain a sense of mastery.

There is a small but growing body of experiential psychotherapy research that is encouraging in its findings because of the parallels to psychodramatic processes. With adults suffering from depression, Greenberg and Watson (1998) found that a therapeutic approach that included four modes of processing to access emotional experience - attending, experiential search, active expression and interpersonal contact - was more effective than attending alone. They concluded that engaging in experiential tasks assisted clients to resolve issues in more personally meaningful ways.

In a study of 'unfinished business', Paivio and Greenberg (1995) found that the empty-chair technique was more effective in achieving client reports of resolution than a psycho-educational intervention. Clients' reports of 'feeling resolved' were related to a change on the Beck Depression Inventory and the experiential treatment achieved greater improvement on all outcome measures.

Experiential psychotherapy research views therapy as an evolving process that is mediated by the therapist and the client, rather than a treatment that can be standardised and tested (Watson, Greenberg & Lietaer 1998). There is a growing interest among researchers in investigating issues of immediate relevance to practitioners. Investigating significant events within therapy and measuring the impact of therapy in terms that are meaningful to clients, assists us as practitioners to build our understanding of how therapy can achieve good outcomes. This movement is being led by a number of researchers in the experiential psychotherapy field (e.g. Bohart 2000; Elliott 2002; Greenberg 1999).

A summary of recent experiential psychotherapy research can be found in Elliott, Greenberg and Lietaer (2004).

Case Reports
Where the psychodrama literature makes a major contribution to therapeutic practice is in the rich tradition of case reports (e.g. Holmes, Karp & Watson 1994; Kellermann & Hudgins 2000) that warm the reader up to the experience of the protagonist and the director, and stimulates thinking about the possibilities of the method. This is the type of information that practitioners look for to expand their understanding and to help them reflect on their own practice. However, these reports rely heavily on the perspective of the director, and sometimes the protagonist, to describe and interpret the experience, and have generally not been exposed to the type of rigorous examination that, from a research framework, enables conclusions to be drawn with confidence.

Building On Our Strengths
Applying established case-study methodologies that combine the richness of case reports with analytical rigour may be a way to build on this tradition, providing research that assists psychodrama practitioners in their work and promotes psychodrama by being available for public scrutiny. This would contribute to the development of research within psychodrama by (a) investigating issues that are relevant to psychodrama practitioners, (b) using methods that capitalise on an established orientation to case reports and (c) linking psychodrama research to established practice in related areas, such as experiential psychotherapy research.

Some of the ways we can develop case-study research in psychodrama include:
1. Focussing research questions on issues of relevance to practitioners and clients by studying significant events within sessions, how they come about, their impact on clients, and how the director might make use of these events (e.g. Mahrer and Boulet 1999).
2. Examining multiple cases, to test whether results are replicated across cases, and to identify whether results are general, typical or variant (e.g. Hill, Thompson and Williams 1997).
3. Developing plausible therapy and non-therapy explanations for post-psychodrama changes by such means as:
   a. mapping outcomes against processes within psychodrama sessions (e.g. Greenberg 1986; Elliott 2002), and
   b. comparing processes and outcomes of successful and non-successful sessions.
4. Using videotapes of psychodrama sessions to

enable information to be collected from a variety of sources - including director and protagonist recall of significant events, and independent researchers participating in process analysis (e.g. Greenberg 1999; Mahrer 1999).

5. Using measures that are being used by other experiential psychotherapy researchers so that our work can be readily placed alongside a larger body of work (refer to the Network for Research on Experiential Psychotherapies www.experiential-researchers.org/ index.html).

Conclusion

We can be optimistic about the possibilities for psychodrama research. The psychodrama outcome research that has been done is encouraging, and the broader field of experiential psychotherapy research supports many of the underlying principles of psychodrama.

The act of doing research can be enlivening - affirming some of our practices, and challenging and extending preconceived ideas of what we do and its impact on clients.

Developing a stronger research base, relevant to practitioners and clients and open to scrutiny within the counselling/therapy professions, will further build our professional identity. Case study research is one way that we can build on our established interest in case reports, to establish a tradition of rigorous research.

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A Psychodramatic View of Adolescence

Jerri Bassi

Jerri is a psychodramatist who practiced until recently in Dunedin. He specialises in working with adolescents. This is an extract from his thesis.

Every person who has contact with adolescents is affected by the different significant roles that these young people display. At the point where an adolescent person arrives for a counselling session the counsellor is quickly aware of a variety of reactions and ideas that rise up into consciousness in response to the often quickly changing moods and roles of that young person. It is necessary in the early stages of counselling for the therapist to develop a variety of responses that are both complimentary and age appropriate.

When young people are referred by others for counselling, those making the referral are usually focused on problems or on the negative functioning of that young person. The referring agent wants the negative behaviour stopped so that the young person can "get on with their life". The work is normally short term and constrained by limited funding. Young people with problems are already under-resourced which means that interventions that are expected to be effective within a brief time. This often results in the individual being further marginalised.

It is due to this common dynamic that I have developed a role in myself that I term the *'Broadly Focused Therapeutic Guide'*. In this role it is important to develop an awareness of the young person's view of the entire social system in which she or he lives. The *broadly focused therapeutic guide* is prepared to assist in facilitating the young person in the transformation from child through to adult identity. This role is central to the forming of the therapeutic alliance from the first moments of meeting. The commitment of the therapist inspires trust in the young client. I encourage the young client to bring along a significant other to the therapy session. This may be a mother, social worker, friend, (uncommonly a father) with whom the young person already has some connection. This allows me to gather as much clear and truthful information as possible as well as often providing the young person with a supportive ally or companion.

Sometimes, however, the companion can be over-caring, neglectful or even abusive. In such cases I take steps to block the effects of the negative influences of the other involved.

I maintain contact with the young person to

observe their response. Then assert myself as an authority by getting responses directed through me, rather than directed toward the young person. This therapeutic blocking is aimed at protecting and providing the young person with an experience of self. The young person experiences me as a therapeutic guide and good authority figure who does not collude with the negative influences in their life.

Guiding Principles for the Initial Encounter

The primary guiding principle for the therapist is the belief that the client exhibits some ability that is functional. In the initial encounter with a young client I generally receive little information regarding their positive functioning as the referring agent is focused on changing negative behaviour. I endeavour to maintain the view that all people have access to, or are exhibiting some form of creative ability. When young people walk through the office door, often their creative expression is minimised as they assess my functioning from behind a defence structure of fear, apprehension and possibly anger. In order to be effective, I must continue to believe in the individual's ability to function in a positive way, whilst taking account of the qualities of their defensive behaviour.

A second principle applicable to the initial encounter is that if conflicting role clusters manifest themselves they can be clearly identified. Every professional person will benefit in having at their fingertips a methodology that enables them to begin the work and to develop a clear assessment. In my case I have in my consciousness an analysis of typical adolescent roles. This assists me as I begin to work toward making clear assessments of both positive and negative functioning. The model I use assumes certain roles to be necessary for the development of a positively functioning personality and sets out the common roles enacted by negatively functioning adolescents. I use the model as a

basis for recording and analysing the roles enacted in the first encounter. This gives me a base on which to formulate the individual's past experiences and future ideas. I add to this by making further assessments of the young person's role system as the counselling proceeds. Therefore we gather a clear picture of role development over time.

Typical Adolescent Roles

In Diagram 1 (overleaf) I present an analysis of typical roles that are common to the young people with whom I work. The role analysis consists of two basic groups of roles that relate to the individual's negative and positive functioning. A central role is identified in both fragmenting and progressive role clusters.

The diagram portrays the fragmenting roles of the adolescent over-shadowing potentially progressive roles, both preventing and inhibiting positive expression from fully coming into being. It is the function of the broadly focused therapeutic guide to actively assist in turning over the next page in the adolescent's story.

The individual's development of fragmenting roles is frequently an internalised response to interventions made with the young person from an early age in their family. That dynamic is sometimes recreated in the current therapeutic encounter. There is value in the therapist keeping in mind that negative functioning is often the result of 'projective identification'.

Projective Identification

Abuse and neglect become values and beliefs for living throughout generations. The result is the child projects these feelings into the therapist who is in danger of not being able to respond adequately. The young person's feelings of inadequacy and incomplete accomplishment of life's developmental tasks result in the continuance in the cycle of normalising failure
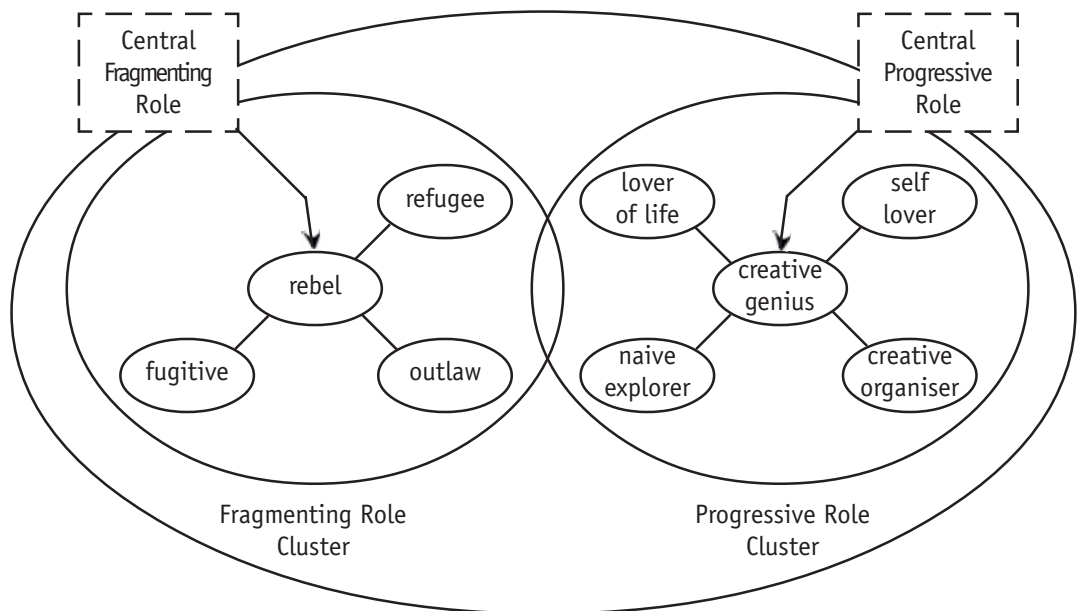
Diagram 1: Typical Fragmenting And Progressive Role Clusters of an Adolescent Client

and aggression. The degree to which the young person has been exposed to adequate mirroring, modelling and nurturing as an infant influences their ability to function in a therapeutic relationship. Along with therapist commitment, I have found that a key task of therapy is to assist the young person to develop the ability to function in the therapeutic setting.

Nurturing and being a compassionate authority requires dedication and a great sense of timing. All of the young people with whom I work experience a lack of what Winnicott named, *"good enough mothering"*. The work of the therapist includes continually finding creative ways of maintaining the therapeutic alliance, especially when there is acting out behaviour and aggressive feelings expressed toward the therapist.

The results of the negative developments in the individual adolescent personality frequently present in patterns that are on the surface shaped by fashions and trends of an era. I have noticed

that underneath these patterns of youth culture lay other patterns of responses to relationships and experiences. Below I present my experience of meeting with young people in a therapeutic setting. I begin with a description of the fragmenting role cluster as this is what I often confront when I first meet adolescent referrals.

Roles in a Fragmenting Role Cluster of an Adolescent

These roles identify negative functioning that leads to fragmentation of the individual's sense of self. They are often present in young people I see and the young person will accentuate these roles as part of his or her defence structure. The referring agent may also accentuate the presence of these roles by focusing on the young persons negative functioning. However, when these roles are valued as a specific response to a specific situation and thoroughly explored, the actions of negative role functioning can be transformed. This occurs when the spontaneity in the negative functioning is redirected into progressive functioning.

The Rebel:

The central role of the *rebel* is present in the adolescent when creative and spontaneous expression is prevented or in some way distorted. Erikson's *"Life Stage of Middle School"* suggests the incomplete developmental task of social co-operation will result in feelings of inferiority and absence of competency (1950). The inability to remain a part of the mainstream group identity results in the need to belong in an alternative system or counter-culture where individuality is developed by acting against the dominant system.

The role of a *rebel* as it manifests in the life of the young people being discussed comes into being because of an inner force that resists being controlled by others. The resistance to external control is potentially creative when the young person is closely coached. Such coaching mirrors creativity and enables understanding of the emotional, physical, social and spiritual implications of growing into an adult. However, the inner force of the *rebel* does not always manifest in a positive way. As the adolescent is moving forward biologically and socially toward independence they are often viewed as moving against the rules and habits of society. In other words the young person is moving against the conserved roles of the culture in which they live. As a result they may present for therapy having internalised the concept that they are bad for wanting to progress. The *rebel* is often angry, confused, mistrusting and therefore often makes choices that are conflicted and constantly rejects others. The *rebel* leads the individual triumphantly into a new adult world.

The Outlaw:

The role of an *outlaw* comes into being when a young person finds that they have overstepped boundaries. Not only have they moved against the cultural values as a rebel but transgressed the legal laws. In its simplest form the *outlaw*

constantly stays out later than their parents or guardians believe is safe. It may not be easy for a young person to be trusted having once broken the legal laws as well as the other conserved patterns of the culture. Thus the process of being accepted back into the family or home can be extremely complicated. The *outlaw* often acts arrogantly and feels guilty. They experience fearlessness and invincibility.

The Refugee:

Young people find themselves socially and biologically outside the limitations of their immediate environment, in the time and space between childhood and adulthood. They have very few rights and little resources as they look for a place of their own. They are a culture without place, a people without land. The *refugee* becomes homeless and wanders, experiencing sadness, loneliness and despair, yet searching for meaning, attempting to survive as an independent.

The Fugitive:

The role of *fugitive* comes into being as the young person runs away from their carers, not knowing how to change the course of events arising from their actions. Knowing they have gone against the cultural conserve, maybe broken laws and have nowhere of their own they lose sight of positive possibilities. The *fugitive* becomes blinded by fear, yet determined to find a place of safety.

Working with the Fragmenting Role Cluster

The fragmenting role cluster describes the already maximised nature of acting-out behaviour as the adolescent experiences a turmoil of thoughts and fantasies, unidentified feelings and unbalanced actions.

In order to enhance positive change therapeutic guides and other adults do well to provide wisdom and tolerance when faced with negative

functioning. Wisdom may be expressed through focusing the young person on developing appropriate rituals. Rituals as rights of passage within the therapeutic framework will assist the young person to understand the effects of fragmenting roles on their functioning. Tasks can be set for the young client aimed at assisting progressive functioning linked to a particular life stage that is incomplete or under developed.

A second important method for dealing with negative functioning is concretisation. Through the use of the psychodramatic technique a young person can perceive what they have been doing. Placing objects on the floor or on a white-board in individual sessions or using peers as auxiliaries in group-work sessions concretises their actions, identifies roles and provides a powerful mirroring experience. This creates opportunities for the person to gain insight into their early childhood experience making the connection with the present day way of functioning. When significant others are symbolically brought into a scene it is possible for the young person themselves to clearly identify what are the qualities of the other that give rise to a negative response in themselves. Young people are often judged as being without the capacity to develop insight, and therefore rarely given the opportunity. Psychodramatic expression and development allow young people to experience their own insight, in symbolic and actual ways.

Family members are often surprised, if not shocked to discover that their adolescent child or sibling has the capacity to think and express emotions when involved in therapy sessions and psychodramatic enactments.

Roles in a Progressive Role Cluster of an Adolescent

The term progressive role refers to the functioning that takes a person toward the fulfilment of their goals. When progressive roles are recognised a positive sense of self is built up in the individual.

Naïve Explorer:

Young people readily move outward into the world, discovering and sometimes falling into new experiences. I have named this functioning the *naive explorer*. This role is first seen as the child begins to crawl away from the safety of their symbiotic relationship with mother. The *naive explorer* wanders forth in order to discover. Without compassionate authority figures and rites of passage, the young *naive explorer* remains vulnerable and unsafe.

The responses of the primary caregiver will influence the development of the child in both positive and negative ways. If mother does not actively support the naïve exploration, cannot contain her own fears or tolerate the separation, the child will experience self doubt and will always be looking for that affirmation. On the other hand if exploration is tolerated and further explored by the therapist, the child will continue to experience the internal flow of spontaneity and creativity and can develop the central functional role of the *creative genius.*

Creative Genius:

This role is always present and often unknown and embodies the human life forces of spontaneity and creativity. The expression of drives, emotions and ideas is influenced by the development or lack of development of this role.

There are further roles included in the progressive category. These other roles cluster around this central role of *creative genius* in the service of its constant striving for spontaneous and creative expression. These roles may be absent and a young person may not be able to bring certain functions to life within himself. The absence of these roles is often associated with a

disruption to early bonding or resistance in the process of separation from mother.

Certain functioning may be present yet underdeveloped and can be enhanced through coaching. Underdeveloped functioning can also be developed further by presenting to the young person a role analysis at regular intervals in such a way that new development can be clearly recognised.

The other progressive roles that cluster around the creative genius are *self lover, creative organiser* and *lover of life.* The development of these roles assists the adolescent to form a positive self identity and to understand their childhood experiences. The individual needs conscious development of these positive roles in order that specific developmental stages and tasks be completed. Finding the potential of this inner vitality is like sifting for gold and can easily be lost if the therapist is not consistently alert and caring.

Self Lover:
The role of *self lover* is enhanced when empathic understanding, adequate mirroring and modelling are expressed by the therapist and taken in by the individual.

Creative Organiser:
Developing the role of *creative organiser* is necessary in order that the young person can reflect on their developmental phase of life. The therapist can assist this process by setting appropriate tasks. As the outer world is put into order and developmental tasks are accomplished and reflected upon, adolescents are often relieved to experience some order in the chaos of their lives.

Lover of Life:
In the role of *lover of life* the young person realises their relationship with the world and consciously connects their inner experience with their external environment. This role will come into being in the client as the therapist maintains patience and appropriate mirroring; working through growth crises in a thorough and empowering manner.

Separating Fantasy From Reality
When there is conflict in the functioning of young adults it is the responsibility of both adult and adolescent to co-create new opportunities for growth. This creates a new developmental phase of adult to adult mutuality. I have found for sure, that young people often do not know how to distinguish between fantasy and reality.

When the therapist provides adequate roles towards the adolescent and others in their social atom, the young client is able, in terms of the third stage of Moreno's "Spontaneity Theory of Childhood Development" (1946 p74), to separate out and further develop their own experience of fantasy and reality, from the reality of other individuals and society. A young person is then able to see clearly their emerging progressive qualities whilst gaining clarity and insight into their fragmenting roles. The essential roles of the therapist are the *widely focused therapeutic guide* and the *creative compassionate educator.* Diagram 2 (overleaf) sets out the role relationship between the therapist and adolescent as they work to repair the breach between fantasy and reality.

Moreno insisted that life is positive before it becomes negative. Negative functioning arises when the individual's warm up to creative and spontaneous action is not encouraged, is restricted or prevented. The implications for psychotherapy of Moreno's thinking centre on the awakening of the dormant or underdeveloped *spontaneity* factor in the client. Thus bringing into balance creative and spontaneous action when they are, or appear to be, diametrically opposed. In the diagram this is represented by the growing relationship
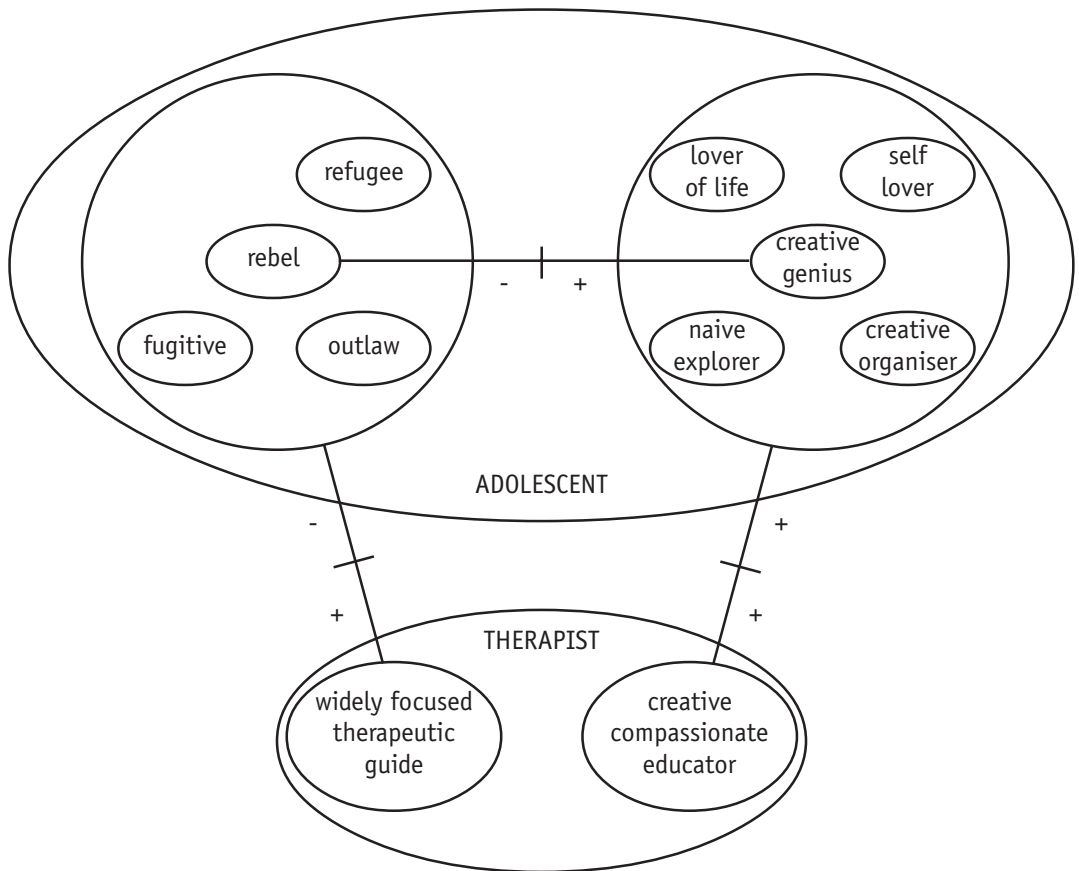
Diagram 2 - Repairing the Breach Between Fantasy and Reality

between the central roles of the *rebel* and the *creative genius.*

Adolescents are constantly marginalised and under-resourced, as the transitory nature of their condition makes them an unreliable investment. Some adults stand aside, as if waiting for this generation of young people to make their magical metamorphosis into the new body of adulthood. These observers perpetuate a neglectful mirroring that leaves developing teenagers unsatisfied, resentful and abandoned. Others may over-intervene, creating roadblocks that cause unnecessary diversion on life's road. There are those of course who do act in the role of good authority supporting and enabling growth to take its course, as need be.

I am an important figure in the lives of the young people with whom I work and remain a supporter of their expression both public and private. The role of *Broadly Focused Therapeutic Guide* is actually a cluster of roles that will differ for each carer or therapist. I find roles such as *nurturing father, advocate of positive maleness, good authority, mirror, willing double, naïve enquirer, magician* and *story teller* are all necessary with young people.

In my work I take into account what I see and hear in the first moments of an encounter and the possible range of thoughts and feelings of the young person concerned. I find that a psychodramatic view of adolescence is extremely helpful in thinking about how to work

effectively with young people.

The main point of the role schema set out in the diagrams is as a sequence of coathooks for the therapist to build on, for example, in looking how the *rebel* presents itself in the session. The therapist can then use their own imagination in naming progressive elements in those roles in order to mirror the creativity they see to the young person they are working with.

To do this we professionals have to be willing to find ways to distil the *creative genius* in the often dark rebellion of youth. And, if we are to embrace the rebellion of youth, we must develop and maintain a flexible concept of compassionate authority. This means recognising the creative potential of each individual with whom we come into contact and not letting go of this, otherwise we lose sight of that potential and their capacity for growth. I believe it is vitally important for those of us who think we do know that reality is separate from fantasy, to think carefully about how we see and respond to young people.

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Book Review
The Living Spirit of the Psychodramatic Method
by Max Clayton and Philip Carter
(2004), Resource Books, Auckland, New Zealand

Reviewed by Peter Howie

This book is a rather remarkable collaboration between Max Clayton and Philip Carter and a group of enthusiastic psychodrama trainees and practitioners. Max ran a training workshop, Philip and others videoed this. Later, on reviewing the tapes, Max and Phil chatted about the sessions and discussed various issues, observances and areas of interest. These chats are a large part of the book. These transcripts are presented 'warts and all' and are a bold expression of learning through life. This brings to the fore the humanness of learning as an imperfect art. The structure of the book, with the interweaving of the sessions and the discussions, leads to a real sense of "I can't wait to see what comes next". This is even highlighted by Max at times, *"Anyway, it'll be interesting to see how the next session starts. Will it start with expressiveness? I would predict that, yes it will. We'll see."* (p77)

What it is Like to Read
It is great to read. It is very like being in a group but from a detached point of view in that it generates a lot of reflections. Perhaps there have been times when I have been in the same detached position as a participant. Is this what makes the book so familiar? Maybe I am too hard on myself - however I believe these reflections are completely congruent with the
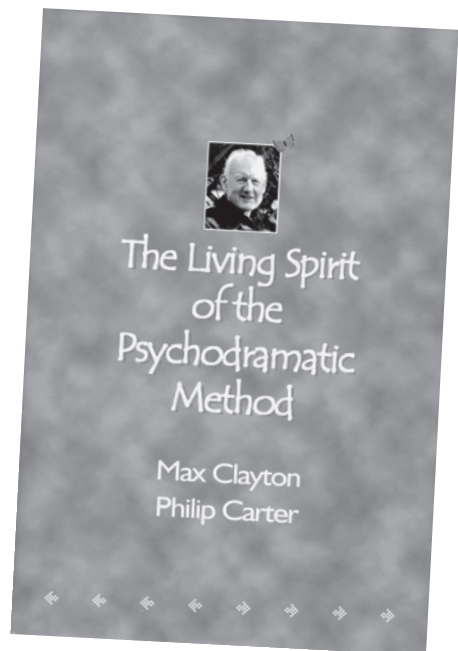
purpose of this book. As a reader I could see and feel the goings on in the group and I could get a sense of what was occurring. It was enlivening. A few times I was weeping just like some in the group. At other times I was waiting for the next bit. Sometimes it was like "Duh!!! That's obvious". At other times I was wondering where this was headed. To achieve

this in a book is no mean feat. The photos were a wonderful adjunct and allowed a further sense of the real people involved and the situations in the group.

Like any group learning process this book taps into the ability of the participant, in this case the reader, to make their own assessments of what is happening, of what is being brought forward or ignored or forgotten, of what is being taught overtly or covertly, and what they warm-up to in response. In this case the participant/reader also has the delight of listening in on the reflection of the group leader and trainer. For a book to do this is remarkable in my view.

What I Learned

I learned and at times re-learned a heap of things. It didn't occur to me to capture these things until about half way through, mostly because I was caught up by the unfolding of thoughts and understandings as the sessions were presented. The most exciting learnings this time around were:

• A reminder that psychodrama is not a repeat of shit but *"is an excursion into the surplus reality levels … there is correction of old functioning. There's a development of new perceptions … of a different warm-up … of new relationships and a new identity"* (reflecting on the session p145)

• A reminder that the life of a psychodramatist is not about changing anyone. *"So, there's still the personality. If a person's a bull, you don't want to stop them being a bull. If a person's a lamb, you don't want to stop them being a lamb. But you want it to be refined."* (during the session p170)

• As a person who has spent considerable time and energy learning to engage with life (as distinct from reflecting on life or reading about it) I am reminded that action has its place and can be as rewarding as reflection. *"He's learning that he can be affected by the things going on around him, that his experience is*

enriched and enlarged through what is happening round him, but he doesn't have to immediately reflect on that experience. In place of that he can act on it. So, I'm constantly asking him to take action immediately, instead of falling into reflection." (reflecting on the session p172)

• A reminder about the use of the word *"So…"* as a beginning to an enquiry which can easily lead to the protagonist developing an intellectualisation process.

• An articulation that psychodrama is not another method of imposition of one world view over another. *"… it's not a method whereby the producer of the drama imposes their own ideas, or imposes their own solutions, but rather works with the warm-up of the protagonist … the protagonist's own life force … values … are drawn out and enacted on the stage … no matter how shocking … they are to be produced. We are to be confronted by the reality of the protagonist's world. We are not here to judge it. We are not to be repelled by it … We are interested in the protagonist developing a good warm-up … it's not a matter of them carrying away a new solution into the world. It's a matter of them carrying a new warm-up, a new experience."* (p231)

There are numerous other learnings which I thought would all fit into this review but they won't. So read the book!

What I Enjoyed

I really enjoyed the feeling of being there in the transcripts of the groups. Because the groups were an actual training session there was adequate teaching contained therein. And then to have Max make his comments on what he noticed and what sense he was making at the time as well as the time of viewing the recordings was a great benefit. I've often wondered what he was considering and reflecting on. As time has gone on I have worked a few things out and still there is a lot left over. This book has allowed me a much greater sense of how Max approaches

a psychodrama; how he approaches people; and how he approaches life. There is a strong sense of unity in the work - like looking at the same thing from different vantage points and from different points of view - and always with a sense of humour and real caring. For example, *"So I express myself very strongly because I'm feeling very strongly about the classical psychodrama method. And I really want her to learn it and it doesn't appear to hurt her. I don't think it would be a good thing to have a rave like that too often, but every once in a while, okay. I think a person being trained wants to feel that their trainer is a real living human being with blood flowing through their veins and somebody who has real emotions and can integrate their emotional life with real thinking."* (p232)

I really enjoyed the relationship between Phil and Max. How at times there was a wonderful miscommunication and it was left for us to read. At other times I could see the influence flow one way and then the other. *"It's good to have this chat because you are stimulating me a lot to remember very difficult times for me. Certainly I've wanted to quit many times, in the middle of directing a drama, or in the middle of running a group, or a series of groups."* (p269)

I developed a greater confidence in my own practice from many of the comments Max made about his own process and conclusions. I also saw some of my own doubts, queries and cynicisms expressed in certain questions asked both by Phil and in the group. In a chat about a session they have just watched Phil says to Max, *"... and then getting your teaching about acting on experience. And so I had that - I'm acting on experience - and then you come down on me like a ton of bricks for not reflecting and being analytical. I thought"* (and haven't we all thought something similar at one time in our training or another? - PH) *"how the heck am I going to work out when to do what without reflecting?- So you're saying now, develop a feeling."* (p172) For Max's response,

which is a great one, read the book.

I also saw my own training both from Max and others echoed in the writing. Especially when discussing the old idea of 'human choice'. *"My observation is, that a warm-up suddenly appears in response to somebody."* (p321) Again read on for the further elaboration which is succinct but there is no room for it here.

What I Didn't Like
It was a book that returned the efforts applied to it. So for a superficial read it returned a superficial learning - which after all isn't so bad but it is the worst thing I could come up with. For an academic read it created a thoughtful reflection. For a deep read it returned many personal reflections and many reflections on myself as a psychodrama practitioner and trainer. *"So if you're a group leader and you can be affectively involved and also notice different things, that helps you. In my book, its called intelligence, where you combine feeling with your thinking, your analysis, combine the two."* (p290)

What Others Could Learn
This is a work suitable for early trainees who have experienced the method, or intermediate and advanced trainees. It is eminently suitable for practitioners with small or large experience. It is suitable for trainers and trainers-in-training. Damn - I guess you get the drift that I think this book is a timely, worthwhile and emancipatory work. Congratulations to Max and Phil and thanks to the crew that allowed themselves to learn in such a massively public manner. Thanks to Mogens for pointing out that the other books that Max has written over the years form great companion works for this one.

Book Review

Contemporary Psychodrama,New Approaches to Theory & Technique
## by Jose Fonseca

(2004) Brunner-Routledge, Hove

Reviewed by Don Reekie

Who would benefit by reading this book? Those who work one-to-one. Interested in psychoanalysis, object relations or attachment? You are likely to find Fonseca stimulating. Anyone who seriously wants to apply the method in group, organization or community will have much to gain because his primary focus is relationship, encounter and systems theory.

Those of us in Australia and New Zealand who take a superior attitude to psychodramatic approaches from the other continents might have to work in order to warm up positively to a Brazilian psychiatrist. However I revelled in his enthusiasm, cultural distinctiveness, conviction, openness, and 'bossa nova'. He builds from Morenian fundamentals while not being bound. He opens up his practice and thinking for the reader's consideration. He certainly writes a contemporary book. His grasp of 21st century philosophical and scientific thought is broad, inclusive and respectful.

Human Development

One fundamental that he opens up early is the *"scheme of human development"*. He attends to Jacob Moreno, Martin Buber and their interactions. Encounter and relationship are
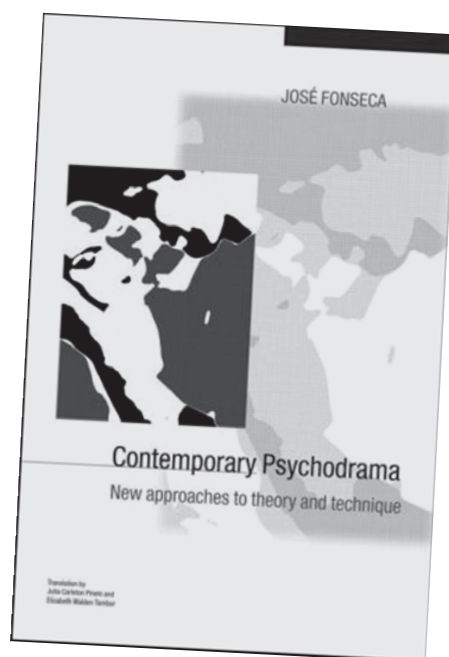
quickly recognized as the book's theme. He lays out the phases of human development in diagrammatic form, providing a base for his choice of intervention and technique. There were times when I loosened my grip on what I take for granted in order to enter his language concepts and models. His diagramming of a continuum from sanity to mental disease and

autism was more than I would follow. I responded to his layout of developmental phases appreciating his simplicity and thoroughness, but I think in adult life all phases are capable of health or, by extremity or overuse, illness. What he describes as *"cosmic identity"* and *"indifferentiation"* (i.e. all-identity) surely provides a healthy foundation of security or meditational retreat. Hence its appearance in adulthood is not usually the infantile regression or autism that he suggests. While this model has problems of linearity, his prime argument is for a circular and systemic approach. Illness is not his focus. Relationship, creativity and spontaneity and production of greater community wellbeing are. Fonseca sees illness as a tendency that can be accepted and transformed in well-directed and satisfying relationships.

Internal Psychodrama

His exploration of *"internal sociometry"* has him introduce one-to-one approaches where the enactment is in the mind. In an *"internal psychodrama"* the therapist assists production of good theatre. The client's internal interactions are easily followed by the reader and the theoretical underpinning is explored thoroughly.

Fonseca discusses memory, calling on the work of both John Bowlby and Maurice Nicoll. He applies the word *'true'* to memory as if memory is capable of being 'true'. I think that unfortunate but the advantage is that he alerts us to Bowlby's concepts of *"episodic"* and *"semantic"* memory which assist us to stay open to the value and instability of memory.

Visionary

He is appreciative and critical of Freud; recognising that his work was in the context of the cusp between the 19th and 20th centuries. He draws from Moreno as a visionary before his time who preceded the language and concepts which would permit fluent expression of his ideas for our time. In exploring psychotherapeutic approaches he takes the classical casework of Freud and narrates a dramatic portrayal. Fonseca produces an imaginative scene where a client of Freud's encounters Moreno himself. He has Moreno propose his distinctively societal and familial responses to the client's discomforts. Fonseca does not describe what follows from the session, instead he evocatively cuts the scene. He leaves the reader speculating on the systemic approach Moreno had nearly 100 years ago and the way in which he anticipated much of contemporary practice we carry into 2005.

Fonseca considers *"tele"* and *"transference"* throughout the book, again drawing on attachment theory. He makes a strong contribution to clarity and wise application in discussing tele. His placement of attachment as a dimension alongside social atom and sociometric thinking promotes a sturdy understanding and appreciation of *"tele"* and *"relational psychology"*. Fonseca frames his work in terms of the relationship of each self. Seeing each self relating to her- or him-self within the set of relationships that surround them.

Having acknowledged that Freud was extreme in making sex central to his understanding of personality Fonseca devotes a sixth of his pages to sexuality. This further extends his relational focus. He opens out developmental, telic, transferential, and societal construct influences on relationship and loving. It assists us to recognize the value of his ideas and action choices in a range of contexts.

Viewing psychotherapy from Brazil, Fonseca sees psychodrama capable of making a significant difference, not by providing useful techniques but in promoting a fundamental and healthy movement towards communal health,

relationship health, and preventative societal interventions. He recognizes powerful forces in the world's psychological health practice that exert pressures towards compromises or dominance. He sees psychodrama and group psychotherapy currently against the tide of psychological fashion. I am glad to have been invited to review a book I might not otherwise have read. It is a good book for a twenty-first century practitioner of psychodrama.

Don Reekie is a TEP, psychodramatist, role trainer and social psychologist living and practicing in Christchurch, New Zealand and in Queensland, Australia.

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J. L. Moreno, *Psychodrama Vol 2*, pg 142.

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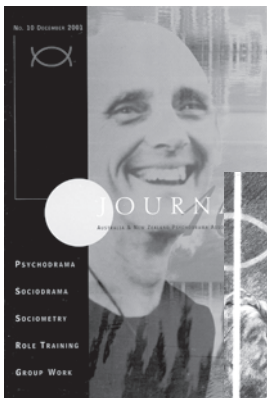**To Order - Contact:**

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