WHAT IS PSYCHODRAMA?

Developed by Psychiatrist Dr. J. L. Moreno (1889-1974) from the 1920s onwards, psychodrama was the first recognised method of group psychotherapy and is practised in more than 100 countries. Psychodrama is fully accredited as a psychotherapy by the United Kingdom Council for Psychotherapy (UKCP). It has an extensive literature of more than 6,000 publications, plus many national and regional journals and associations around the world and has contributed ideas and techniques used in many other forms of psychotherapy. (See www.pdbib.org for a comprehensive international bibliography of psychodrama).

Psychodrama is a holistic, strengths-based method of psychotherapy in which people are helped to enact and explore situations from their own life - past, present and future. The scenes enacted may be based on specific events in a person’s life, their current or past relationships, unresolved situations, desired roles or inner thoughts and conflicts. The method is typically used in group settings, with group members taking on the various roles in the drama as needed. Witnessing and participating in each others’ personal stories can generate feelings of deep understanding and trust amongst group members.

In its so-called ‘classical’ form, a psychodrama will often begin with a current problem or difficulty and trace it back to earlier life situations. Here, the participant may have the chance to experience what was missing but needed at that time. The enactment then returns to the present, where new learning can be integrated and put into practice.

Each psychodrama addresses the concerns of the person who is in focus. The range of issues may be wide. The person who shares their work is chosen sociometrically by the group, highlighting the group concern. Hence all members of the group also share in the work in a personal way.

Psychodrama can, for example, help people to better understand themselves and their history, resolve loss and trauma, overcome fears, improve their intimate and social relationships, express and integrate blocked thoughts and emotions, practise new skills or prepare for the future.

Psychodrama allows for the safe expression of strong feelings and, for those who need it, the practice of containing emotions. As participants move from ‘talking about’ into action, opportunities arise to heal the past, clarify the present and imagine the future. Psychodrama can offer a wider perspective on individual and social problems and an opportunity to try out new behaviours.

Each psychodrama includes:

a. The protagonist: The person whose story or issue is presented through guided dramatic action.
b. The auxiliary egos: Group members who assume the roles of significant others in the drama. This may include significant people, objects or even aspects of the self or a person’s internal world, e.g. ‘my optimistic self’ or ‘my internal critic.’
c. The audience: Group members who witness the drama and who may become involved in auxiliary roles.
d. The stage: The physical space in which the drama is conducted.
e. The director: The trained psychodramatist who guides participants through each phase of the session.

Some of the core techniques in psychodrama include role reversal, role taking and role play, the double, the mirror technique, surplus reality, the empty chair, scene-setting and enactment.

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SOME HISTORICAL NOTES ABOUT PSYCHODRAMA

The method of Psychodrama was created by Psychiatrist Dr. Jacob Levy Moreno (1889-1974). Psychodrama developed from Moreno’s interest in philosophy, mysticism and theatre, and his observations of group interactions and relationships. Moreno was among the first to recognise the healing power of a group, including the importance of self-help groups, where each person becomes the healing agent of the other without any special training or knowledge other than his or her own experience.

About 1912, while walking the streets of Vienna, Moreno noticed the arrests of prostitutes in the city’s red light district. A young medical student, he organised an informal group where the women could talk about their problems. They gradually moved from talking about their problems with the police to more personal issues, providing emotional support to each other. This experience contributed to Moreno’s interest in working with groups rather than individuals, as was the style set by Sigmund Freud, an older contemporary. Moreno later coined the phrase “group psychotherapy” to recognise this particular form of treatment.

In 1925, Moreno left Europe and emigrated to the United States. He brought to the USA his interest in working with children, spontaneous theatre and psychotherapy treatment with the use of theatre principles. He also was very interested in the study of relationships in groups, dating back to his work at a First World War refugee camp in Mitterndorf. He continued to refine his sociometric studies at the Hudson State Training School for Girls, Hudson, N.Y. He devised methods of matching delinquent girls according to living and work task preferences, which increased cooperation among the girls and decreased the number of runaways.

Moreno established Beacon Hospital, an alternative hospital with a therapeutic theatre, in the late 1930s, and shortly after met Zerka Toeman. She first became his assistant, then student, then trained auxiliary and finally his wife and collaborator, writing with him “Psychodrama Volume II” and “Psychodrama Volume III” as well as numerous articles. She travelled with him throughout the world to demonstrate and teach psychodrama and sociometry and helped write “The First Psychodramatic Family” to detail use of psychodrama in the family setting. In 1942, he founded the American Society of Group Psychotherapy and Psychodrama, the first group therapy organisation, which continues today.

Jacob Levy Moreno

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J.L. Moreno died in 1974, and group psychotherapy, psychodrama and sociometry have continued to grow and expand as he predicted. Those interested in J.L. Moreno’s life may seek out his psychodrama volumes and other works. Two excellent biographies include “Jacob Levy Moreno, 1889-1974” by Rene Marineau and “J.L. Moreno” by Paul Hare and June Hare.

After his death, Zerka continued to travel throughout the world to teach and demonstrate psychodrama. She has been especially noted for bringing psychodrama to interested clinicians and educators in Asia, including China, Taiwan and Japan. Zerka, now in her 90’s, continues to write and conduct training sessions from her home in Virginia. Her collected writings have recently been edited by Horvatin et al, listed in the bibliography.

(Historical notes excerpted, with permission, from unpublished work by Karen Carnabucci)
WHO CAN BENEFIT FROM PSYCHODRAMA?

Because psychodrama is highly versatile and places equal emphasis on thoughts, emotion, body and action, it can be useful in helping people with difficulties in relationships, self-management and social and emotional functioning. Psychodrama is also particularly useful for helping people experiencing unresolved loss, trauma or mood disorders such as anxiety or depression. Psychodrama has also been used to good effect with people who have been diagnosed with personality disorders and a wide range of other mental health conditions, including psychosis.

WHERE IS PSYCHODRAMA USED?

Psychodrama and its related methods - including sociodrama, sociometry and role play - are applied in diverse settings such as mental health, trauma and abuse recovery, counselling, medical training, residential children’s homes, social work, schools and universities, prisons and probation, youth and community work, addictions programmes, public and voluntary sector agencies, refugee centres, retirement homes, personal development workshops, relationship and marital counselling, community-building, professional training and development, human resources, and business and industry. Psychodrama is often used in combination with other therapies such as cognitive-behavioural therapy, creative arts therapies and group analysis, depending on the training of the therapist and the nature of the problem.

FUNDAMENTAL TECHNIQUES

The Double

Doubling occurs when a member of the group takes on the physical stance of the protagonist and attempts to enter their internal world by speaking their inner thoughts and feelings. Developmentally, the Double is meant to capture the essence of attuned interactions between a parent / caregiver and an infant.

Functions of the Double

- To support the protagonist.
- To deepen the protagonist’s feeling.
- To notice the non-verbal clues from the protagonist.
- To mirror back/reflect to the protagonist.
- To emphasise feelings, etc.
- To interpret thoughts, feelings and behaviour.
- To broaden the protagonist’s understanding and awareness of self and others.
- To guide the protagonist in their work.

*Other benefits of doubling:*

- An empathy building technique.
- A way of gently challenging, e.g. through paradoxical doubling.
- It is one of a number of techniques that keep the group members active and involved in protagonist-centred work.

The Mirror Technique

Adaline Starr (1977, p. 178) describes the mirror technique thus:

“the moment when [the child] sees his/her image in the mirror and discovers that the image is of him/herself...he/she may touch it, kiss it, or hit it. This action, immortalised in the myth of Narcissus, is translated into an action technique in which the looking-glass reflects the self as seen by another.”

The mirror technique can be used in many ways:

1. **To distance the protagonist from the emotions** - this is particularly important if the scene is traumatic or if the protagonist is often overwhelmed by negative feelings. The person is helped to feel that they have control over the action in the way they were unable to have before.

2. **To connect the protagonist to emotions** - it may be that the person has split off their feelings. Connected to this, it can also enable them to recognise the locus of control is with them and not with others.

3. **Observation of behaviour/response in a situation** - it may be that the protagonist has little or no awareness or insight into how they may have reacted in a situation.

4. **Role training** - the protagonist can see their reactions in a given situation, and then observe how others may respond. It is always important that the protagonist reflects on the input of others and then re‐does the scene themselves.

5. **To observe the dynamics within a system** - this allows the protagonist to observe not only their own responses, but also the others within the scene. They are then more able to gain some understanding of what the different dynamics are within the system.

It is very important that this technique is used carefully, as in certain circumstances it may be experienced as critical or humiliating. The facilitator must also encourage the protagonist to be ‘as if’ they are an observing ego (i.e. an external assessor) when commenting on what they see. This helps to prevent the protagonist from becoming very self-critical and/or self-effacing.

Role Reversal

Zerka Moreno describes role reversal as the ‘engine that drives the psychodrama’. In Psychodrama Volume III (Moreno and Moreno 1969/1975) she lists some ‘rules’ of psychodrama. Rule 14 (p. 238) states:

“The protagonist must learn to take the role of all those with whom he is meaningfully related, to experience those persons in his social atom, their relationship to him and to one another.”
She goes on to say: “Taking this a step further still, the [person] must learn to ‘become’ in psychodrama that which he sees, feels, hears, smells, dreams, loves, hates, fears, rejects, is rejected by, is attracted to, is wanted by, wants to avoid, wants to become, fears to become, fears not to become, etc.

The person has ‘taken unto himself’ with greater or lesser success, those persons, situations, experiences and perceptions from which he is now suffering. In order to overcome the distortions and manifestations of imbalance, he has to re-integrate them on a new level. Role reversal is one of the methods par excellence in achieving this, so that he/she can re-integrate, redealer and grow beyond those experiences which are of negative impact, free himself and become more spontaneous along positive lines.”

There are two kinds of role reversal:

- **Reciprocal** - between self and another person.
- **Representational** - between roles/objects/ parts of the self.

**Functions of Role Reversal**

**To gain information:** Once the auxiliary has been roled in, the facilitator and group can gain information concerning the significant other’s perception and view of the protagonist. This may be distorted due to the protagonist’s projection/transference onto this person, and so help the director in understanding the dynamics of the relationship. Often, the protagonist is more able to speak from another person’s/object’s role than from their own.

**To understand the role of the other:** This is important, particularly if there seems to be some distortion of the role in terms of what may be projected onto the other by the protagonist. The director needs to challenge in an appropriate way, and enable the protagonist to go fully into the role of the other to gain a deeper and more empathic view of the person. Various techniques may be used to enable this process to take place - the honesty chair; the internal voice, the insight chair etc.

**To heighten spontaneity:** When the protagonist’s energy seems to drop, it may be useful to have them reverse roles with the person, object, feeling etc, that has held the most energy. It may be needed if the auxiliary is not portraying the role correctly, causing the protagonist’s energy to drop. It can also be used to increase the intensity of the interaction.

**To see themselves/increase empathy:** It can be very powerful for a protagonist to experience him or herself from the other person’s role. This in itself can correct a distorted view of the other person and the relationship between. It also develops empathy for the other person, and this is particularly important when working with people who have patterns of abusive behaviour.

**OTHER TECHNIQUES**

There are scores of psychodramatic techniques; these are some of the more commonly used techniques. A more comprehensive list can be found in *Foundations of Psychodrama* by Adam Blatner.

**Aside** During an interaction, the protagonist makes a comment to the audience that the other person in the scene ‘cannot hear.’ This allows hidden thoughts and feelings to be expressed when they cannot be said to the other people.

**Auxiliary** The supporting people in an enactment. Usually, an auxiliary will have a particular role, and this may include the role of double.

**The Empty Chair** A chair is used to represent another person, or an abstract concept, e.g. ‘my past’, ‘my critical self’ or ‘my smoking habit.’ This is commonly used in one-to-one work. Using an empty chair to represent another person can make it more tolerable for the protagonist. It is also useful when doing monodrama.

**Future projection** A future scene is examined and / or enacted. This may be for the purposes of rehearsal, confronting fears, practising a hoped-for outcome, testing expectations, etc.

**Monodrama** When the protagonist plays all of the roles in the psychodrama, and is the only person ‘on stage.’ A common technique in one-to-one working.

**Role training** Role training is typically used to practise new skills and responses. It is particularly useful as a method for helping the protagonist to expand their role repertoire – the range of skills and responses they can call on to meet life’s challenges.

**Scene setting / Enactment** The creation and enactment of scenes from the protagonist’s life or inner world, usually with auxiliaries. The realism of the enactment promotes maximum opportunity for warming up; for expression of actions, thoughts and feelings; assessment of the protagonist’s response; working through issues; and developing and integrating new responses.

**Sharing** The phase of the group following an enactment, in which group participants share with the protagonist their own personal connections with the psychodrama.

**Soliloquy** The protagonist shares with the audience their inner thoughts and feelings. Sometimes this is done in dialogue with a *double*. Soliloquy is similar to the use of character voiceovers in film.
**Spontaneity** The quality of one’s response to a situation. With sufficient spontaneity, we can provide an adequate response to new situations and fresh responses to old situations.

**Surplus reality** A key concept in Psychodrama. Surplus reality recognises that subjective experience is an important part of actual experience. Examples of surplus reality scenes include: A ‘goodbye scene’; An encounter with a future imagined partner/child/friend; A conversation that in reality ‘could never happen’; A conversation with someone who is no longer living; An encounter with a spiritual entity such as Buddha, God, etc; A scene where one is rescued and protected from a childhood abuser; A scene from the future looking back over one’s life; A forgiveness scene, or a scene in which one can make reparations to others for one’s own wrongdoing.

**Warm up** The early phase of a group or session. This can include a wide range of techniques and exercises aimed at creating group cohesion, a safe and containing atmosphere, and a focus for the session.
RELEVANCE OF PSYCHODRAMA TO ATTACHMENT THEORY AND THE DYNAMIC-MATURATIONAL MODEL

Psychodrama is a just as much a method for encouraging emotional containment as it is a method for emotional expression. It is often misinterpreted as a method that focuses on emotional catharsis – which may be very useful for people with an insecure ‘A’ strategy - neglecting the very important function of emotional containment – which may be useful for people with an insecure ‘C’ strategy. Crittenden (2005) and others have supported the notion of ‘purposeful eclecticism’ for psychotherapy; that is, the purposeful adaptation and combination of psychotherapeutic interventions to best meet the needs and learning style of each client. With this in mind, we can make a number of observations about the purposeful application of psychodrama techniques for people with ‘A’ and ‘C’ strategies of self-protection.

Therapeutic implications for ‘A’

When implementing psychodrama-based interventions with clients who have a prominent ‘A’ strategy for self-protection, the psychodramatist would emphasise:

- Building trust to overcome suspicion.
- Contracting to ‘stay in it for the long haul,’ as therapy may be prolonged.
- Being aware of the client’s tendency to want a ‘quick fix’.
- Encouraging ‘I’ statements, i.e. to own feelings. The technique of Doubling may be very useful here.
- Expression of true negative affect, e.g. fear, sadness, disgust, shame, guilt, anger.
- Accurate distribution of responsibility, especially in relation to experiences of abuse from attachment figures.
- Honouring the story whilst eliciting more balanced stories, including painful and difficult emotions.
- Not ‘attacking’ the idealised attachment figure, but instead allowing gradual reappraisal of episodes and relationships.
- Unpicking assumptions and cognitive errors / ‘rules’.
- Developing intimacy skills such as communication, talking about emotions, asking for care / comfort.
- Developing understanding and skills of reciprocity in relationships.
- Identifying strengths and building self esteem.
- Encouraging client to appraise self from own rather than parents’ perspective.
- Giving permission for ‘shadow’ side to be given a voice and developed, e.g. ‘forbidden’ or ‘unacceptable’ emotions or roles.

Therapeutic implications for ‘C’

When implementing psychodrama-based interventions with clients who have a prominent ‘C’ strategy for self-protection, the psychodramatist would emphasise:

- Creating a coherent story from uncontained emotion and unstructured narrative.
- Separating one’s own feeling from those of other people.
- Making and accurate link between one’s affect and the event provoking the response. This is to address fundamental questions such as ‘Why do I feel like this?’ and ‘Do I still want to respond this way to an event that happened years ago?’
- Creating structures and clear boundaries.
- Developing skills of accurate perspective taking. Role reversal and the Mirror technique may be very useful here.
- Revisiting avoided areas of life or ‘unspeakable’ emotions. The technique of Doubling may be useful here.
- Providing an accurate and full factual account of episodes from the past, including accurate temporal order, cause and effect, person, place, time, who did what in what sequence, who was responsible for what, etc.
- Completed and clear episodes which provide an antidote to the C strategy.
- Accurate distribution of responsibility, including self-responsibility where it may be all too easily avoided with the C strategy.
- Externalisation: Using objects, chairs, writing, drawing and any of a variety of methods to concretise and ‘make real’ what can often seem chaotic and overwhelming when the C strategy is functioning.

For both A and C

- Role training and repetition/rehearsal of new strategies helps to anchor them. The DMM shows the importance of repetition in neurobiological growth. Role training can help participants move towards B strategies in appropriate situations.
- Sharing helps with integration and reflective functioning.
- Careful summarising to help increase the likelihood that new learning is understood and taken in.
- Identifying exceptions, for example when mother was caring / uncaring.
- Teaching problem-solving skills.
- Developing a balanced view of people and events. For example, most people are not ‘all bad’ or ‘all good.’
READING LIST: PSYCHODRAMA and RELATED TITLES


WEBSITES

- Federation of European Psychodrama Training Organisations: www.fepto.eu
- British Psychodrama Association: www.psychodrama.org.uk
- International Association for Group Psychotherapy and Group Processes: www.iagp.com
- American Society of Group Psychotherapy and Psychodrama: www.asgpp.org
- Birmingham Institute for Psychodrama: www.birminghampspsychodrama.co.uk
- Comprehensive international bibliography of psychodrama: www.pdbib.org
- Dr. Adam Blatner’s website (a very valuable and extensive website with many further links and reading on the subject of psychodrama) www.blatner.com/adam/