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december 2005



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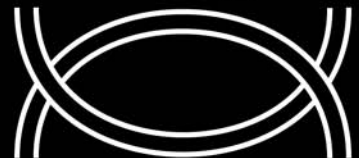
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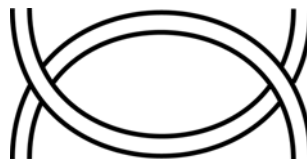
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All correspondence, editorial and advertising submissions for the ANZPA Journal should be addressed to:

Rollo Browne
Editor, ANZPA Journal
PO Box 1042
Rozelle NSW Australia 2039

Telephone: 61 2 9555 8424
E-mail: rollo.browne@bigpond.com

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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 conference, through regular bulletins and this journal.

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Contents

Awakening Creativity With Brief Enactment by Vivienne Pender	page 5
Greenfoods Organic Enterprise and The Ethics of Selling Alcohol by Carolyn Simon	page 13
Effie Best: Life of a Sociodramatist by Cher Williscroft	page 21
The Humble Continuum Revalued by Rosemary North	page 27
Sociodrama with Juvenile Offenders by Rollo Browne	page 35
Jumping The Berlin Wall: Social And Cultural Atom Repair With An Individual Adult by Craig Whisker	page 43
The Practical Science of Sociatry: A Progressive Path by Dr Kevin Franklin	page 53
Spontaneity Made Explicit by Phil Carter	page 61
Resistance: A Thrust Towards Autonomy A Case Study of Radix Body-Oriented Therapy seen from a Psychodrama Perspective by Narelle McKenzie	page 71
The Psychodramatist Mike Consedine	page 79
book review by Judy Broom	page 80
"A General Theory of Love" & "The Neuroscience of Psychotherapy" by Lewis, Amini, Lannon & Cozolino	page 83
book review by Phillip Corbett	page 83
"Trauma and Addiction: Ending the Cycle of Pain Through Emotional Literacy" by Tian Dayton	page 87
book review by Kate Hill	page 87
"Psychodrama in the 21 st Century" edited by J Gershoni	page 90
Invitation to ANZPA Conference 2006	page 91
Back Copies of the ANZPA Journal	page 91
Call for Papers: Guidelines for Contributors	page 92



Awakening Creativity With Brief Enactment

Vivienne Pender

*Vivienne is a psychodramatist, psychotherapist and teacher in private practice in Wellington. Her thesis, *Vignettes: Brief Enactments of Psychodrama*, explores the value of brief enactment in counselling, psychotherapy, supervision and teaching. In this article she presents some of her thinking regarding this subject, illustrating her ideas with excerpts from a psychotherapy journey.*

In my work I have found that all aspects of the psychodrama method can be employed to bring about a short dramatic enactment, often referred to as a vignette. Creativity can be awakened, systems can be explored, and role development can occur. The vignette opens up the possibility of spontaneous, artistic exploration and enables personal change. I have come to value its contribution to my work with individual psychotherapy clients.

The Vignette Defined

In defining the vignette, I differentiate from a classical psychodrama session that includes group warm up, enactment and sharing in a process involving an hour or more. Such sessions rest on the assumption that participants have some knowledge of psychodrama and are willing participants. The vignette, whilst structured with warm up, enactment and sharing, may vary from a few moments of concretisation to an enactment of one or two scenes of up to thirty minutes. It is thus applicable in diverse contexts with groups and individuals where there is little previous knowledge of psychodrama.

The Vignette Applied in Psychotherapy

Recovering Spontaneity

I meet many people in my psychotherapy practice who have experienced a traumatic event that has dramatically changed their lives. They have struggled to cope with everyday life. They often express a desire to confront the effects of trauma and reconnect with their spontaneity. I actively listen as the protagonist expresses for the first time to another human being what they may consider unspeakable and unnameable. Often a person will begin, “*You will probably think I’m crazy, stupid, weird, horrible.*” At these times I silently recall moments when I have felt vulnerable in speaking for the first time of difficulties in my own life. I remember how I have worried that the other might think less of me, and found to my surprise that this was not the case. It is in these moments of honest, vulnerable expression that the universal human experience is most deeply felt and new life is seeded.

Writing about the principles of spontaneity,

Moreno (1946:91) differentiates between a dramatic person who is not necessarily spontaneous, and a spontaneous, ordinary person who is willing to create something new in her/his life.

"The extreme opposite of a person who is a genius at dramatising the self but totally unproductive, is the person who is totally productive and creative although perhaps undramatic and insignificant as an individual. If we would empty their mind we would find it in a permanent 'status nascendi', full of creative seeds always in the temper of breaking up existing conserves and germinating new forms, new ideas, and new inventions".

Healing Past Trauma

There is a wide literature addressing various aspects of traumatic stress disorder. For example, Hudgins (1998:2) maintains that, in the experiencing of catastrophe the ego may become overwhelmed and spontaneity no longer accessible to the victim. Dalenberg (1999) describes three distinct biological messages of complex post traumatic stress - "*remember this moment*" where the person is flooded with traumatic thoughts, images, and nightmares in day to day life, "*never go this way again*" where there is an instinctive avoidance of people and situations, and "*be prepared*" where the body maintains vigilance and hyper arousal.

A number of theorists discuss the place of the vignette in treating post traumatic stress disorder. Hudgins (2000:237) recommends concretising positive restorative roles to develop safe containment. Schutzenberger (2000:294) uses psychodrama vignettes of three to ten minutes duration to assist clients to relive historic family events and dramatic death, express grief and loss and bring closure to past trauma. Van Der Kolk (1996:195) emphasises that knowledge of trauma may leave a person without words to express the enormity of their

experience. There is disruption of narrative. He describes the value of using drawing and brief psychodramatic interventions in trauma recovery to help develop a language for effective communication, and for the symbolic transformation that can occur in psychotherapy. Raimundo (2002:49) cites current neurological research in highlighting the efficacy of psychodrama in engaging the triune brain, that primitive reptilian structure which registers instinctual response, the limbic brain that imprints images and symbols, and the cortex where rational thinking and linear narrative are activated. He emphasises the integration of thinking, feeling and behaviour that can result from brief enactment. Both Van Der Kolk and Raimundo affirm the psychodramatic vignette because it facilitates a 'show and tell' that is effective in healing traumatic memory.

Safety and Expression

The vignette lends itself very well to situations where there is a high degree of concern for safety and a limited tolerance of intense feeling. The shorter enactment allows for a manageable amount of expression. Furthermore, a vignette can reveal the essence of a role system or facilitate an expanded display of a wide range of somatic, social and psychodramatic roles. Progressive, fragmenting and coping roles can be examined in an atmosphere of ease and creativity.

Planning, Practise and the Future

The vignette is an excellent vehicle for stimulating thought about the next steps a person might need to take. New roles can be practiced in the form of future projection or as part of a role training session. The focus on a selected area may often produce a reassuring feeling that '*things are manageable*'. In this sense, the vignette shares a common purpose with role training, where one aspect of the personality is focussed on at any one time.

Illustrating the Value of the Vignette: John's Journey

Courageous Integration

In the therapeutic relationship with John, I meet a man of determination and generosity who is ready to confront dark and vicious memories of childhood abuse, loss and grief. Through vignette enactment over time, John emerges with a new sense of integration and, in his words, with '*joie de vivre*'.

First Meeting: The Moment of Crisis

John is a tall, well-built, friendly-faced and open man. He is more mystified than anxious about the circumstances of his counselling appointment. He says "*I feel very embarrassed. I was in a supermarket and wandered out and then I was searched and I had absentmindedly put a packet of biscuits in my bag. I've never done anything like that before. I lost it. I've been having panic attacks.*"

At this stage he has been arrested and advised to attend counselling. I invite John to tell me about his life during the past six months. John describes falling deeply in love and impulsively selling all his possessions. He has travelled with his lover to live in an unknown European country. John cannot speak the language or work. He feels isolated and the new relationship quickly founders. In desperation, John returns to New Zealand and faces life in his mid-forties without money, home or work. He stays with friends and feels dazed and depressed. When I ask John how he has sustained himself during this difficult time, he maintains that he is used to "*keeping on going*". He describes how he nursed his mother for two years before she died. He talks about friends who have died of AIDS, about the beauty of colour and landscape, about his appreciation of art and conversation. He speaks about graduating from university and describes the responsible management job he has previously held. When I ask him if he has ever

attended counselling before, he replies "*Briefly when I dealt with some abuse that happened when I was young, but that's all dealt with now*". John quickly goes on to describe times in his life when he has looked at the sea and wondered if he might drown himself. Then his humour bubbles forth and he says "*That only ever lasts for a moment and then I notice the colour and beauty of the water and I don't want to detract from that*".

During these sessions, I have built up a picture of a person who wants to live more than he wants to die. John's emerging role system includes progressive roles such as *generous open relator, dedicated companion, compassionate caregiver, responsible manager* and *appreciator of beauty*. There are coping roles as well, such as *impulsive risk taker, confused shopper* and *dismitter of past events*. In the fragmenting role cluster we meet the *destitute traveller, panicked shaker, despairing contemplator of suicide* and *absent griever*.

Safety and Resources

Over time, John and I establish a relationship of respectful trust and safe, creative freedom. I offer a variety of warm ups to vignette enactment, including interactive drawing therapy (Withers, 2000). Using John's words, images and use of colour and artistic expression, scenes emerge which are then set out in action. John chooses to make use of artwork and collage in his time outside the therapy room, especially when he is deep in grief. He creates a collage of autumn leaves, each a memory of loss. John experiments with chairs to concretise roles in enactments at home. He keeps a journal.

Confronting Childhood Trauma

John decides to live alone, finds a low cost flat and some part-time work. One day he says, "*You'll probably think I'm weird but I thought I would talk about my past today. I've had nightmares again*". I notice John's body shuddering involuntarily. He discloses adolescent years of

violent, sadistic abuse by a male neighbour. He narrates his experience as a teenager living with this secret, feeling isolated and terribly alone. The abuse ceases when the neighbour becomes terminally ill, and nobody else knows that it occurred.

During these years, John had lived in a chaotic home with four generations of women - his grandmother, mother, sister and niece - and an uncle. In his early years John believed his grandmother was his mother. He was told his father was dead. A man, a friend of the family, was an occasional visitor to the house. When John was twelve he was told this man was his father. From an early age he was responsible for the running of the home while his mother worked to maintain the family. Living in emotional isolation, John cooked, cleaned and gardened. When the abuse began he found it impossible to tell his family. The neighbour was violent on numerous occasions and John was frozen in terror. The neighbour held John psychologically captive by threatening to harm his own family. As his son was John's only neighbourhood playmate, this compounded John's terror. John travelled miles to a school that was chosen for its status rather than the provision of a supportive environment. This added to John's isolation because school friends lived too far away for regular play and friendship.

John has reported many physical symptoms, thoughts, feelings and behaviours that indicate early traumatic stress. He decides to work through these disabling memories and create a meaningful life for himself. He wants to be free of panic and bulimia, his body free of involuntary tremors and the frozen state of inertness that often overcome him, and his mind free of nightmares, daytime dissociated fantasies and thoughts of suicide.

Vignette One: Metaphors for the Unspeakable

John presents a flow of images and metaphors for the unspeakable. We begin a session with drawing. When words fail images often speak for us. A picture emerges of an axe-wielding adult chasing a terrified child. John, refusing the neighbour's seductive approaches when he was fourteen, had witnessed the man chasing his son with an axe. Eventually John acquiesced, in terror of the consequences if he continued to resist. John goes on to describe a dream about a badly wounded cat fighting for its life. He draws the image of the dream and we then set it out in action. We put the drawing of the wounded cat on the psychodramatic stage. Through this action and the use of artistic expression, John is able to move into progressive roles. The *spontaneous actor* and the *compassionate observer* emerge. I double John, standing alongside him and reinforcing his clear desire to be free of the traumatic effects of these past events.

Director, "What does this cat need?"

John in the role of *compassionate observer*, "Shelter, comfort, tenderness".

As an *active nurturer*, John places cushions and soft toys to create a nurturing environment. He brings the cat to this safe place of hibernation where it will have plenty of time to heal. Then John is surprised by another image that spontaneously emerges in his mind. Trusting himself, he enters the new scene. A sun lion appears, a magnificent, strong and powerful being. John contemplates this image for a significant amount of time. The sun lion contains the seeds of progressive roles, the *powerful protector*, *proud energetic being*, and *wise guide*. John begins to express these roles through interaction with the wounded cat. The cat responds with cautious acceptance. Eventually, it relaxes in the knowledge that the *powerful protector* is alongside. Through John's creative expression and life force we have co-created

scenes of sheltered nurturing and tender protection to address early traumatic pain. In this vignette, therefore, we have created the beginnings of powerful life transformation.

Vignette Two: Joy of Childhood

In a later session, John makes a tentative request to go to a nearby park. He expresses a wish to relive some of the joy of his childhood, maintaining that he has good as well as bad memories. It is autumn. Leaves are everywhere on the ground, brown, russet, red and gold. The sun is shining. John expresses the joy of being free in the fresh air and in the presence of trees. He and I stomp through the layers of leaves on the ground, remembering childhood delights and laughing with the sounds of the leaves. I am doubling John. He grieves deeply for lost relationships, lost friendships, lost meaningful work. He appreciates my companionship as we walk together. He realises that he does not have to live inconsolably alone in grief. John becomes aware of the timelessness of the surrounding trees. He feels comforted by them, and I direct him to reverse roles. He becomes the timeless spirit of the trees and expresses himself with renewed hope. However, John is also aware of something unsatisfied in himself. He says that he wants to eventually attain a level of indifference to the trauma of the past.

Vignette Three: Meeting the Cast. Do they want to meet each other?

Some weeks later in the therapy room John says *"There's something I want to talk about. I feel like several different people inside my head when I'm walking down the road. I'm not sure who I am. The best way I can describe it is, it's like living in an abandoned mansion in a war zone and these different parts of me are all living there together. There's a presence of pure evil, some authority figure that threatens all of us, and there is a young boy silently playing the piano. There is a little girl in a party dress and another boy, a rebel who likes to party. He likes a*

good time. He is frenetic all the time. There is a small child alone with a dog and a strong, tall watcher called Patsy who can't be touched. They all live there and none of them talk to each other".

As a clinician I register Dissociated Identity Disorder. John watches a television documentary and reads books about this disorder. These experiences assist him to feel validated and make sense of his past and present world. In vignette form, we set out the devastated mansion and gardens. John looks around the room and chooses chairs and cushions, rocks and plants to concretise the elements and characters, each of whom has a solitary place somewhere in the scene. John briefly role reverses with each character. At this time it is enough for him to simply experience each role and the connection between them in the one scene.

Vignette Four: Emerging Voices

In the next vignette, John gives voice to each cast member in the mansion with the exception of the silent piano player. He is lost in the music, cut off from everything and everybody. He is not ready to speak. He hears that it is safe for him to give voice to his experience, but he is cautious. John, in the role of knowledgeable compassionate liberator, announces to the group that the war is over and that they are all safe now. He brings in a green sports car to transport them to safety. They drive to a beach where emerald water laps peacefully at the edges of the sand. As we share at the conclusion of the vignette, John describes how he used to play the piano at home while the neighbour watched him from the garden. He says, *"I stopped playing the piano. I have not played since"*. Dalenberg's message resonates, *'never go this way again'*. I feel immense sadness.

Vignette Five: John's Inviolable Spirit

Over the following weeks and months, John reverses roles more and more fully with each of

the young cast members in the mansion. They increasingly communicate with one other. However, the piano player, rendered silent by all the hate and pain of violation, maintains his stance. Then one day John sets out the roles of Allan, a *gentle inviolate observer*, David, the *rebellious reveller* and Patsy, a *strong humorous survivor*. These three characters join forces and approach John *the silent one*. The scene develops as David, Allan and Patsy move closer. They say *"We will look after you. We will teach you to speak"*. Silent John betrays a spark of interest and his body moves slightly towards them. The three protectors, for this is what they are, continue. *"We will give you karate lessons. You can join us when you're ready"*.

Director, *"Show him karate"*.

The protectors demonstrate karate punches and kicks. Their voices express a sound *"HAAAAA"*. And something new emerges as John warms up. Silent John utters a sound *"haa"* and moves a little closer. John feels something of a sacred spirit present within him. He knows that in this moment he is inviolable. Throughout the horrific events that he has experienced, some part of him has remained innocent, pure and sacred.

Vignette Six: I am John:

The Integration of a Role System

Some weeks later, John describes his inner world. He has noticed that he is calmer inside. He says *"It's as if they're coming home. All the different parts want to talk all at once. I can hear the whispers of their voices, ghosts past"*. He sets out a scene of the young boys and girl coming home together. A wizard appears on the psychodramatic stage. It is Merlin in a chamber full of old books. John takes up the role of the wizard, saying to young John *"I have one last spell to cast"*. Merlin invites John to create joyfully, to create with light and colour. He says *"Use the magic carefully. Live with a generous spirit"*. John completes the session by saying *"I feel as if I can now say I am John. I feel more as one, as myself. There is only John. I am John"*.

The Results of Vignette Work:

A Strengthening Progressive Role System

As we approach the completion of our therapeutic relationship, John has acquired a new job as a café/bar manager. He is proving himself a competent worker much valued by his employer. He is enjoying music again, as well as eating nourishing food. He no longer experiences involuntary tremors in his body. Although the nightmares still occur, John has noticed that he has more control over these. He has developed several strategies to help himself relax during the times that he becomes overwhelmed with stress and tiredness. He spends much time grieving, writing, rearranging his life and decorating his flat. He works long hours and frequently walks home alone in the moonlight, alive to the beauty of the world. He is beginning to spend more time with old and new friends, and has started making plans for the future.

Implications for Counsellors and Psychotherapists

In this article I hope that I have conveyed to practitioners the value of the vignette. The briefest concretisation of images and words may bring fresh understanding and the emergence of a new, enabling response. Lively conversation about role descriptions assists clients, as they consciously become authors of their life narrative. Brief enactments invite instinctual, emotional, and imaginative expression with or without the spoken word. Possibilities are gently explored within safe boundaries. The sharing in conversation upon completion of enactments encourages development of roles that can become a cohesive, enabling narrative for the client.

In my experience, other methods integrate well with psychodrama vignettes. Descriptive and diagrammatic role analysis, and the visual record of roles in artistic images adds value as a

meaningful summary of role development. These visual displays are important tools in teaching, counselling and supervision, and, as well, have proved highly effective in psychotherapy closure.

Most importantly, however, from my point of view, is the potential for the release of spontaneity when clients know that they have many safe and effective choices in therapy. Vignettes used for trauma recovery, where the purpose is recovery of spontaneity and creativity, promote safety and the development of roles that strengthen the protagonist.

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Greenfoods Organic Enterprise

and The Ethics of Selling Alcohol

Carolyn Simon

Carolyn is an advanced sociodrama trainee from Golden Bay, New Zealand. This article was drawn from her paper on Open and Closed Systems, completed in 2004.

Greenfoods Organic Enterprise (GOE) was formed in 1999 by people in my local community who share a vision of co-creating an enterprise founded on biodynamic principles. Their common goals are:

- ensuring an ongoing supply and variety of good quality organic food for the local market;
- providing a retail outlet in the township for local organic growers;
- promoting the benefits of an organic food supply to the general public; and
- providing employment opportunities in the local community.

The vehicle for achieving these goals is the retail organics shop. The umbrella organisation overseeing the enterprise is a Trust.

I was elected as a Trustee of GOE in July 2001, attending monthly Trust meetings and being active in committee work for the Trust until my resignation at the July 2002 AGM. My observations and experience within GOE as a closed system during that year form the basis of this paper.

I describe GOE as a closed system because

members are governed by rules and codes of behaviour restricting membership and controlling movement in and out of the system. There are many closed systems in our society such as sports clubs, professional organisations, schools, prisons, board meetings and psychodrama workshops. For instance, to belong to a political party there is a rule that members pay an annual subscription fee. Only paid up members have the right to vote on party policies. Members are expected to uphold and promote party policies and oppose the policies of other parties. The behavioural norm is to 'toe the party line' and a member who challenges this norm risks having membership revoked by the party.

There are usually consequences for anyone breaking a closed system's rules or code of behaviour. Consequences may include withdrawal of membership rights (sports clubs, professional organisations) or punishment administered by the system (schools, prisons).

The rules of GOE are an expression of the values held by the membership. GOE is made up of subgroups that include

- alternative lifestyles

- Green Party supporters and activists
- people who are ill due to chemical toxins or nutritional deficiency
- new immigrants from Europe and USA
- small scale growers of organic produce

Values common to all of these subgroups can be expressed as follows:

- *Organic food is the only safe food*
- *It's important to give people the choice to shop organically*
- *It's up to us to create and promote sustainable alternatives*
- *We value an environment free of genetic modification or engineering (GE)*
- *We must try and save the world, or at least this part of it.*

At Greenfoods Organic Enterprise the following rules and operating norms governing Members and Trustees:

- *The world works best when people who support the Shop (and Trust) have membership status.* Anyone may become a Member of the Trust by signing a membership form (no fee). Members are drawn from a pool of people who actively support the Shop (regular customers, volunteer workers, paid workers, fundraisers, advocates).
- *Active support and advocacy of organic principles is important.* Members are expected to value and advocate for organic food production methods and a GE free agricultural environment.
- *The world works best when people's personal lifestyle choices reflect a national and global political viewpoint.* It is assumed that all members support a GE free policy for NZ and the planet.
- *The guiding principles of GOE Membership are closely aligned with Green politics. Other political viewpoints do not accurately represent GOE principles or Members' views.* Members are assumed to either be a member and/or

supporter of the Green Party or at least demonstrate an alignment with Green politics and principles.

- *Power and responsibility are best shared amongst the membership. Trustees are working on behalf of all Members.* Trustees are appointed at the AGM by Members present, or interim appointments are made at the discretion of existing Trustees (up to a maximum of 12 Trustees) in accordance with the Trust deed.
- *A Trustee has a position of responsibility and accountability.* All Trustees are required to attend regular meetings and undertake committee work and other assigned tasks. Trustees can end their appointment by written resignation or by standing down at the AGM, or they may be asked to resign by the Trust in certain circumstances. All of these rules and operating norms reflect the intention of the Trust Members to promote and protect the biodynamic principles and organisational goals upon which the GOE was founded.

A Restrictive Operating Norm

GOE Trust meetings begin with a handholding circle of silent communion. The intention is to reflect on the goodwill and common purpose shared by everyone present. The value expressed here is 'only the positive energy in the group should be acknowledged'. I describe this as a restrictive group norm because my observation of this convention is that expression of the negative tele often present in various relationships within the group is discouraged.

As a Trustee participating in the circle I experienced discomfort because my actions were not congruent with my thoughts and feelings. I re-enacted my coping role of *halfhearted handholder* and fragmenting roles of *disconnected imposter* and *resentful hypocrite*. Other members also experienced discomfort in participating in

the circle. This discomfort remained unspoken within the group meetings and the operating norm continued. As a result I became aware of that a focal conflict had emerged in the system.

A focal conflict involves two opposing forces present in the group and in each group member. These are the disturbing motive and the reactive fear. The need for expression of each opposing force creates a tension within the group. The group then searches for a solution to the conflict which will reduce the tension. The solution may be either enabling or restrictive.

Restrictive Solutions

The disturbing motive present in the GOE closed system is a desire to create an innovative, sustainable and dynamic model for successful enterprise based on values of responsibility and truthfulness. The reactive fear in the system is a desire to avoid conflict and exclude any fragmenting behaviour.

The handholding circle is a restrictive solution to this focal conflict because it does not allow the disturbing motive to have adequate expression. Bringing out discomfort or challenging norms is not catered for in this convention. The impetus to grow and develop as a group conflicts with a fear of the disharmony new challenges will bring.

On a few occasions the values expressed by an outspoken subgroup have been challenged during a meeting. One member of that subgroup then spoke in a loud, aggressive manner to silence the opposition. Members of other groups withdrew into silence. In this instance the disturbing motive is the desire to have the value systems of different subgroups expressed or upheld. The reactive fear is the need to preserve personal safety and dignity. The solution the group comes up with is to leave contentious issues off the agenda in subsequent meetings so

that conflict is avoided. This is also a restrictive solution, as it does not allow the disturbing motive expression.

One consequence of restrictive solutions to a focal conflict is that difficulties and conflicts are discussed in small subgroups outside the Trust meetings. Another consequence is that subgroups with polarised values tend to develop and common ground is forgotten.

Developing Enabling Solutions

An example of developing enabling solutions to conflict in the GOE closed system occurred during a sociodrama on the expression of difference over the sale of alcohol. I initiated and directed a group centred sociodramatic enactment involving 14 trustees and shop workers. Our purpose was to develop a decision-making process to deal with the contentious issue of whether to stock and sell alcohol in the shop.

Previously the issue of selling organic alcohol had divided trustees into polarised subgroups. Discussion had deteriorated into personal attack, with no resolution. The issue had been omitted from the meeting agenda for several months. It had simmered unacknowledged on the 'back burner' while trustees and staff discussed less contentious business.

I put the alcohol issue back on the agenda and proposed that we arrange a time and place in which I would direct the group using an action method. This would be an opportunity to explore all points of view and look for a way forward. Framed as a sociodramatic question, the group's dilemma was: *How can we honour other points of view while maintaining our own strongly held beliefs?* There was agreement and a general indication of support and enthusiasm for my proposal. I felt pleased, purposeful and nervous.

Warming Up as Director

I wanted to meet the challenge of extending my directing experience to a new arena. Directing a group in the real world was new and directing a sociodramatic enactment was new.

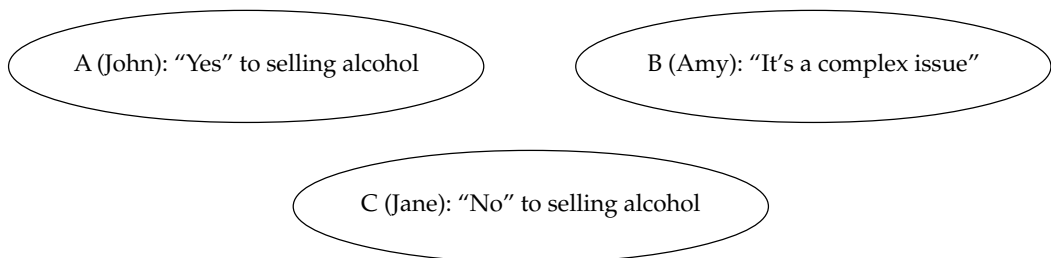
In supervision prior to the meeting, I asked Cher Williscroft to help me take up the role of *sociodrama director* more fully. We explored ideas for warming the group up to me as director and to our purpose, identifying subgroups, identifying a statement or slogan representing the views of each subgroup, producing interaction and role reversals between subgroups. Prior to meeting with the group I concretised these ideas further by writing them down, drawing diagrams and visualising myself directing different stages of the enactment.

I warmed up to my purpose as director. This was 'to encourage new roles to emerge from within subgroups and to produce spontaneity, creativity and stronger relationships'.

Group Warm-up

The enactment took place during a meeting of trustees, management and staff of the GOE. None were experienced in psychodrama. I began by asking the group for their cooperation in two specific ways. I asked that everyone participate, and that they agree to follow my directions. I got a positive and enlivened response from the group and felt encouraged to proceed.

Diagram 1. Subgroups



I identified 3 subgroups in relation to the sale of alcohol and brought a representative of each onto the stage (see diagram 1).

All participants were directed to join the subgroup they felt most aligned with. Subgroup A had 6 people, B had 5 people and C had 3 people.

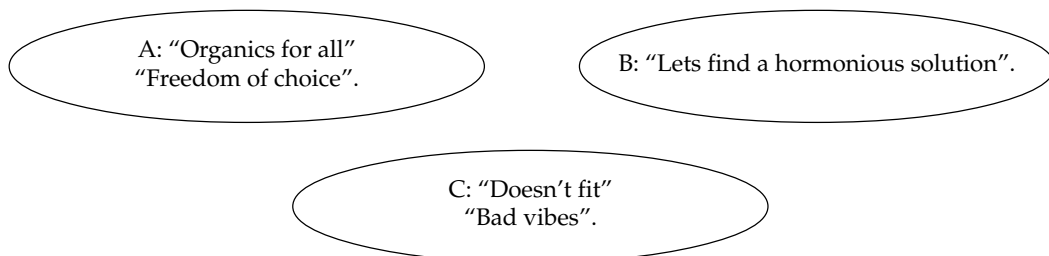
Members of each subgroup were directed to express their views within their subgroup and to produce a slogan representing their common value. These slogans (shown in diagram 2 overleaf) emerged:

- A: "Organics for all" "Freedom of choice".
- B: "Lets find a harmonious solution".
- C: "Doesn't fit" "Bad vibes".

Each group in turn was directed to express their values to the other groups. Subgroup C (No to Alcohol) expressed fear, unease and a belief that alcohol is unhealthy. Subgroup A (Yes to Alcohol) expressed values of freedom of choice and consistency with providing any organic goods marketable. Subgroup B (It's a Complex Issue) said timing, finances and harmony among the entire group are important issues.

Role reversals were directed between all subgroups, so all experienced the values of the other subgroups. During this process some new responses emerged and relationships deepened.

Diagram 2 Subgroup Slogans



Each subgroup was then directed to take up their original role and bring out a new, creative response towards another subgroup.

Role Development

Jane (Subgroup C) moved towards John (Subgroup A). She said she appreciated his views were different to hers and suggested they agree to disagree. Jane was in the role of *conciliatory peace seeker*. John's response was to make a speech about his values. He raised his voice and made himself big physically, taking up more space. John was in the overdeveloped coping role of *self-righteous soapbox orator*.

The focal conflict in the group was being expressed by John and Jane. Jane was expressing the reactive fear, wanting the group to remain harmonious and peaceful. John was expressing the disturbing motive in an overbearing self righteous manner. His response had the effect of sociometrically increasing the distance between himself and Jane. The old fragmenting role system of polarized subgroups and personal attack was again manifesting in the group. I saw an opportunity in this moment to encourage a new response from John that would strengthen his relationship with Jane and others.

I intervened with a metacommunication to John, telling him we would slow the action down. I directed Jane to express herself again to John. I directed John to listen to her, pause before

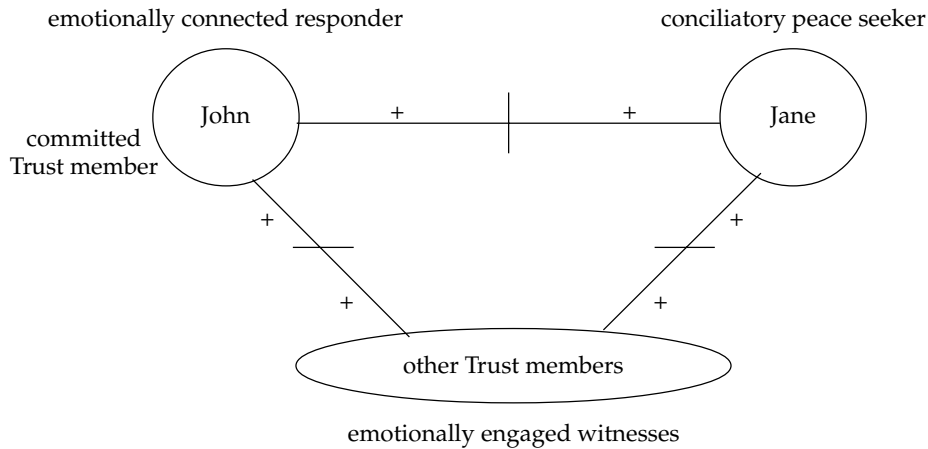
responding and stay in relationship with her.

John warmed up to being more present with Jane. I doubled him in feeling a lot of emotions coming up. He responded in a way that showed he was more connected with Jane and other people as he spoke. He had moved into the progressive role of *emotionally connected responder*. His body language softened and he moderated his tone of voice to Jane's. This is an underdeveloped role in John. He began talking in general terms about people society makes judgements about. I encouraged him to talk about his own feelings and make a personal statement. As he did he became more aware of his own emotional response, and the role of *emotionally connected responder* strengthened.

I noticed other people responding to John's deepening experience in this role. They became more emotionally present with each other and moved into deeper relationship with people in other subgroups.

John expressed his continued regard for all Subgroup C members, and all others in the Trust, whatever the outcome. He said that he would be disappointed if the decision was made not to sell alcohol, however it wouldn't change his wanting to be part of this group (the Trust). His role was *committed Trust member*. These role relationships are set out (overleaf) in diagram 3.

Diagram 3 Role Relationships



Further Movement

Two Subgroup A (Yes to Alcohol) members were determined to influence other groups to their way of thinking and didn't show a willingness to listen and appreciate others' concerns. They expressed frustration at the delay in making a decision. They did not make an emotional connection with people in other subgroups and they stood their ground. Their role was *intransigent sufferer*.

Amy (Subgroup B: It's A Complex Issue) moved into a new position between subgroups A and C. She stated she was taking up a more definite position between the two and expressed the value of 'finding harmonious consensus in an inclusive way'. Amy's role was *clear-minded initiator*. One by one each other member of Subgroup B moved to join her, expressing a similar intention of finding an inclusive outcome.

Jane (originally Subgroup C) moved towards Subgroup B, stating her willingness also to find an inclusive solution.

Betty from Subgroup C also moved closer to Subgroup B, leaving Lara alone in Subgroup C. Three Subgroup A members moved towards

Subgroup B and stated a desire to find a common solution.

As people moved out of their original subgroups to stand in a new place a circle organically formed, inclusive of everyone. Amy drew everyone's attention to the circle they had created. Many people responded warmly to this development. Amy proposed that the decision on selling alcohol, and any conditions, be made by consensus. There was a general murmur of agreement from most people and nobody spoke against it.

This was the moment when the group's purpose was met: all points of view had been experienced, movement in the system had occurred and a new way forward emerged. My purpose as director was also met: spontaneity and creativity within the group had produced new roles, and relationships had strengthened.

In the sharing phase the group responses indicated the process had been worthwhile and purpose met. Relationships had deepened and creative ideas were emerging and being considered. Several people expressed their intention to keep the issue alive and work towards a consensus decision.

Epilogue

In the weeks following the enactment much casual discussion on the subject of alcohol sales continued between various members as they met in the Shop or around town. Some time later a decision was made by Trustees to agree in principle to the sale of alcohol in the Shop. Decisions on timing and implementation were handed over to the Shop management committee. In due course a select range of organic wines and beer appeared for sale in the Shop.

Conclusion

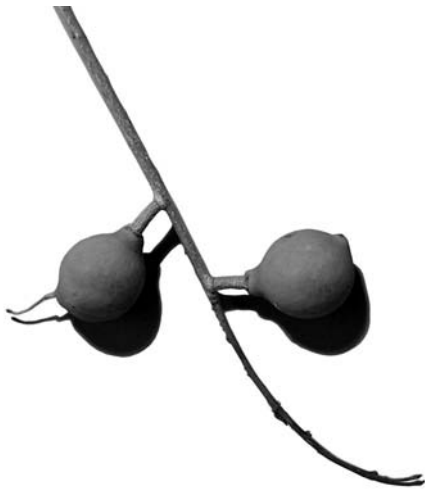
In a closed system there is a defined set of rules governing membership. The restriction of closed system membership makes it exclusive by nature.

Roles are more clearly defined in a closed system. Role relationships are constrained by members being required to focus on the common purpose for which the system exists. Within these

constraints individual personalities can express themselves in a variety of roles, and relationships can develop between members. Conflicted relationships develop as a normal consequence of individuals having differing ideas and opinions within a larger system of common values. Resolution of conflicts must be achieved in a way that is consistent with these common values.

In the Greenfoods Organic Enterprise closed system the attitudes expressed by each different subgroup of members are consistent with the values of promoting organic food and sustainable choices, supporting Green politics and assuming responsibility for the health of our planet. These are bold and innovative values within the cultural conserve of the wider population. Expression of differing ideas about how to achieve these goals creates conflict between members. The membership collectively acts in a bold and innovative way in choosing to address the conflict by using sociodrama.





Effie Best

-the life of a sociodramatist.

Cher Williscroft

Cher is a sociodramatist and TEP living in Nelson NZ. Currently she works with managers to develop personal and professional effectiveness, teaches sociodrama and psychodrama for various training institutes in NZ, and conducts Management Seminars on all aspects of leading people. She is Managing Director of her own company specialising in conflict management.

At the ANZPA Inc. conference in Adelaide, in April 2005, I caught up with Effie Best, who is a role trainer and sociodramatist. Since the early days of my training as a sociodramatist, Effie has been a supportive colleague and I have been interested in her life as a sociodramatist, and curious about what experiences led her to becoming a sociodramatist. At Hahndorf, I had the perfect opportunity to interview her.

What was the first time you recall using action methods?

I was always a hands-on teacher. I was originally a biology teacher, and then I taught teachers in Teachers' College. I was even one of the writers of a famous biology text book that was used in schools for many years. That book included practical work and group learning as basic methodologies. Concretising concepts and learning in groups have been recurrent themes since I started teaching. I taught teachers to sit children in groups so they could learn from one another. That would be in the late 60s and early 70s.

In the 70s I was working in the Research Centre

of the Education Department, doing in-service education with teachers - Rob Brodie was part of the team. In 1975, at Rob's suggestion, I went to a workshop with Dale Herron called a Gestalt and Psychodrama Personal Growth Group - Reuben Sandler was also a leader. It was in the days of self development. I went because I was unhappy with my life. I was in a rut and felt starved of intimacy and I was painfully aware of all my faults. I thought I was sexually unattractive and too brainy etc. I was looking for integration and I came away from that workshop accepting that I was a fine person. From then on, I had a new identity - that I was lovable in all senses. More to the point, I thought '*wow that's a powerful way of teaching*', and being an inveterate teacher I wanted to know how to include it in my work and share it with others. Therefore, I immediately started to learn and apply what I had experienced.

What were your earliest applications?

I grasped the efficacy of role reversal early on. At that time we were assisting teachers to do evaluations of projects in a School Commission Programme, and it was important for them to



Effie Best

relate to the person in charge of the program being evaluated. I would warm up a group of to the social role of 'evaluators' and Rob Brodie would warm up another group to the social role of 'the evaluated'. We would put them in pairs and ask them to interact and then to reverse roles. In another situation, I had the front desk people of a social agency reverse roles with the clients and with the social workers. The method was fun and effective. Those I worked with could feel something working - it was a hugely different experience for them from someone trying to tell them what to do in the situation.

At what point did you decide to become a trainee?

I went to one or two more workshops when Max started running psychodrama workshops. To be honest, some of my motivation came from being in love with another participant. I wasn't thinking of training but Tina Lee (Hucker) came across to South Australia and ran a workshop. It was lovely - she had us doing simple things like setting a scene and it was then I realised I could become a sociodrama director. I thought '*I can do this!*' In my mind, sociodrama was about teaching and educating. At that point, I started seriously doing training and worked with Zerka Moreno, Max Clayton, Tom Wilson, Warren Parry, Tina Lee-Hucker and Lynette Clayton. I traveled to Victoria, ACT, WA, and even did a week's sociometry workshop overseas with Ann Hale. In those days, a role trainer was a stepping stone to the next qualification. It took 400 hours plus a practical assessment. So I was initially assessed as a role trainer then later Tina Lee-Hucker became my primary trainer as a sociodramatist.

Was there Training Institute in SA at that stage?

There was no Training Institute in South Australia at that point. The South Australia Psychodrama Group was going already and I

joined it. We were all trainees: Rob Brodie, Ken Choularton, and Keith George - we trained each other, meeting one evening per week for practice. In my day job, Rob Brodie was influential and we used to concoct things with action methods to do with the teachers I was working with.

What was happening to you professionally during this time?

By the late 1970's I was working in the Education Dept with groups of teachers, and building up a reputation as '*Effie, who does all that interesting drama stuff*'. I recall setting out my first full system's drama in a workshop being run for the staff of an institution for crippled children at a professional development day. It was a communications workshop involving teachers, physiotherapists, social workers and care givers. I had been to a sociodrama workshop with Warren Parry in Victoria and I was a bit disappointed that when I finished the workshop with him I still didn't know how to work with the staff of an organisation. Then I thought of a basic principle - *start by setting out the system*. So, I just set out the system - with all the different groups, finding out as I went about how they interacted. I recall at one point in the drama there was a kid stuck in a swimming pool because one of her care givers had moved her wheelchair. We noticed how the different groups responsible for her care were acting independently and not communicating with each other. In setting out a system in a drama, you simply set it out according to how things are in real life. In doing so everyone can see themselves in the system and see each other at the same time. Everyone involved saw their own behaviour reflected in the drama and they went '*ah ha is that how I fit in?*' Setting out the system is a very powerful intervention, and a great starting point for almost any sociodrama. It is the mirroring that I love - people see how they fit in and relate - its like inter- group sociometry - and it helps groups understand themselves and each other.

When were you assessed as a sociodramatist?

It was after a conference of the Australia and NZ Science Education Research Association (ASERA), a very 'unstuffy' group but with no experience of psychodrama. I needed a group to work with so I invited those who were curious to come to a sociodrama session, which I would run. Tina Lee-Hucker and Max Clayton were the assessors. I did an off-the-cuff drama about teaching science. I completed the thesis later. It was about warming people up to learn in groups and it pulled together my early love of using learning groups with my newer understanding of the principles of sociometry and warm-up. I wrote about the importance of warming up learners to each other and to the learning task, and assisting them to make connections with each other in the context of the learning task. My answer to the old question of "Do you teach the student or the subject?" is "both, of course, simultaneously".

Were you ever involved as a trainer?

When a training institute was set up in South Australia, we called it the Psychodrama and Sociodrama Training Institute of South Australia, PASTISA. Rob Brodie, Keith George and I were staff and all contributed to planning and training. This later became PTISA in the same way as ANZPSSRT became ASERA. I particularly enjoyed working with people who wanted to use action in their workplace - I guess I was putting them in the kind of position that I was in when I first discovered psychodrama.

What have been some of the highlights for you?

In the mid 80's, I was in the research section of the Dept of Education and by then my reputation as an 'interesting producer' led me to run a workshop that was a highpoint of my life. The new Executive group of the Education Dept was supposed to be working co-operatively, and I was invited to lead a 3 day workshop to help these people become a team. Right near the

beginning, we put everything out on the stage - the students, the teachers, the school administration, the parents and the Education Department staff, administrators, advisers and, of course, the politicians. Then we noticed that the child, who had started out being central to the drama, had gone home and was doing school work by correspondence because no-one was interested in him. The group saw the point and they began to think about how they could work differently. It was a very good workshop and it was a turning point for me. I get delighted when I am working with a production and we all reach a point where the spontaneity flows and everyone goes 'ah ha' and you all know exactly what's happening now and it's new.

Another highlight was working with Aboriginal people at a conference of about 80 people. My main job was to organise them into working groups. We had a great time forming different groupings - we started by setting out a map of Australia, with people gathering according to 'where they came from'. This was a concretisation of an important element of the personal identity of most Aboriginal people and allowed participants to meet each other in ways that were both familiar and surprising. This led to a session where we played with different groupings including groups with similar work roles and groups of those who were now geographically close. We ended up using these as two sets of working groups; ideas that were generated in the 'similar work' groups were shared and refined in the 'now live near' groups. The result was resolutions from the conference that were practical and were later implemented.

What are your reflections on ANZPA Inc?

I have built friendships through ANZPA. I now have very old friends who visit me, and I love having people to share meals and reflect on our lives. I was briefly the Secretary of ANZPA Inc and I was very good at it. The Executive was

forming and Max Clayton had finished his term as President. We installed the two year term for executive members so they would stay on for longer and give more continuity. We also changed the voting system from a mail system to one where the voting occurred at the AGM.

I have seen huge shifts in ANZPA over time - the Association has grown and the culture is much easier. It used to be uncomfortable with a lot of criticism. In those days, there were a lot of trainees and a few practitioners and trainers, and so it was rife with authority issues. It took a long time for the first TEPs to come through. Francis Batten was the first practitioner (not a TEP) elected President.

The conference in Geelong was a turning point for the Association - it was a process of learning and maturing. I think the members started to take responsibility for developing the culture of the Association instead of complaining about it.

What are your reflections on sociodrama now?

It has expanded, become more diverse and has moved so it involves a lot more people and their own styles. When I started there was only Lynette Clayton, Warren Parry and Trish Williams doing sociodrama. Some of the initial sociodrama work was done by John Radecki (Woodcock) and Lynette Clayton who worked together to develop early Australian sociodrama.

We now have the notion of a sociodramatic question - it is a useful way of formulating the session in shared way. Sociodrama is now pleasing to me in that the purpose is shared, there is magic in what the director does but it's not a mystery. Participants aren't going home asking 'what is all this for and why are we doing this anyway?' The purpose is much clearer now.

What are your hopes for the future of sociodrama?

There are so many possibilities for applying psychodramatic methods in learning at all levels. I am particularly interested in the possibilities for professional training and development. Sociodrama and role training are wonderful means of both experiential learning and collaborative learning, including learning from each other. I hope that more teachers and educators learn to use these methods - I am not convinced that every educator should be a certified sociodramatist, but just imagine what the world would be like if there were one or two involved in the training of every teacher, medico, social worker, lawyer, psychologist...

Effie is now officially retired and working on a housing development which is an eco city concept - a small inner city housing development with apartments, town houses and straw bale cottages. She is involved with ANZPA Inc. doing some examination of theses and assessment, and is on the newly formed Ethics Committee.





The Humble Continuum Revalued

Rosemary Nourse

Rosemary is a counsellor who works for the Oasis Centre for Problem Gambling and Relationship Services in Wellington, New Zealand. She is an advanced trainee at the Wellington Psychodrama Training Institute.

The continuum is a potent action intervention which is applicable in a range of settings with individuals and groups.

The focus of this article is on the application of the continuum in my clinical practice. It includes individual sessions with problem gamblers, couples where one partner gambles, relationship counseling, and work with an education group for women in a prison alcohol and drug treatment unit. I present descriptions of sessions, make general clinical observations and discuss some of the impacts of its use. I trust it will refresh the reader's appreciation of this 'humble' psychodramatic technique.

Goal Setting with a Problem Gambler

In the first hour long session with a problem gambler, I assess the client's gambling and suicidality, give them feedback on this assessment, provide some education about gambling and addiction, attend to crisis management, complete the necessary agency administration and create some safeguards to

help control the gambling. Furthermore, I aim to agree on treatment goals so that safeguards are consistent with the client's aims. In all of this, I am conscious of the importance of establishing a working relationship with the client.

Typically I push our chairs back, map a line on the floor and, standing on different points of the gambling continuum (see below), I state what each point represents.

Current: Gambling the way I am at present.

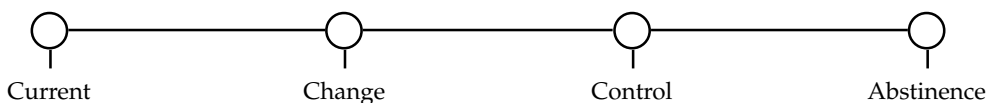
Change: I know I need to change my gambling but I don't know what I want.

Control: I set myself a limit and stop when I reach it.

Abstinence: I stop gambling altogether .

I then ask the client to stand in at least those four places and express what happens for them. When they have done this, I ask them to move to where they want to be. The person's relationship with gambling comes alive for

Gambling Continuum.



both of us, sometimes surprising the gambler.

John¹

John stands at the 'current' end of the continuum looking bemused and says "I don't know why I'm here". He is frowning, his arms are folded and he's hunched forward. He looks increasingly puzzled and edges towards the middle of the continuum. I mirror his body posture and encourage him to put words to his gesture. He smiles, stands taller in the 'control' position and says "I'd like to do this, I'd feel good". His smile fades, his frown returns and he slumps, "But I know I can't, that's why I've come to counselling. He moves into the 'abstinence' position and leans into the corner of the room, then turns, his back still propped up by the walls. "I'd feel safe here". He stands, his arms at his side, his body softer, with a slight frown, "But I'm not sure I can do this either". He moves between these two positions several times, looking thoughtful, his steps becoming firmer and then he faces me and says quietly, "This (abstinence) is where I want to be. I don't know how." In these few minutes he has shifted from being a dependent casualty to a diffident asylum seeker.

Action in the first session helps establish a norm that movement can be part of counselling. I think this can be particularly useful for three sub-groups of clients:

- a, 'Action gamblers' hooked on the adrenalin rush from gambling. Being active is often an important aspect of their functioning and as one client said to me, "I was expecting mumbo jumbo counselling but we're doing something"! 'Action gamblers' are seldom aware of their feelings and in my experience, movement facilitates their awareness of their bodies and to a lesser extent their feelings.
- b, Kinaesthetic learners.
- c, Depressed clients for whom movement can facilitate a shift in energy. Briefly experiencing a different relationship with gambling may also offer a glimpse of hope that things can be different.

Murray

Describing himself as a caged lion when he's at home on a wet weekend, Murray prowls at the 'current' end of the gambling continuum. He says his urge to gamble is sky high. He moves briefly to 'change' before declaring "Not for me" and subsequently places himself at the 'control' position saying "I'm good here. This is where I'm staying". His feet are planted squarely on the floor, he looks directly at me, his upper chest is tight and his jaw thrust slightly forward. He is defiantly resolute. I encourage him to move to the 'abstinence' position before he decides on his goal. He stands there briefly and it's as though his feet get burnt. Within a second he's back to his previous position, unaware of, but clearly expressing his anxiety.

Often when clients subsequently talk about their goal, they move to or look at 'their spot' in the room and may recall their feeling in that position to strengthen their resolve. Matt, for instance, spoke of being in a pub with friends for a celebration, hearing the pokies, feeling pulled to gamble and losing his power. He turned his back on the pokie room and imagined himself at the 'abstinence' position. He told me, "I breathed easy and knew I could do it."

The continuum can also lead naturally into further action.

Mere

Mere stood uncertainly at the 'abstinence' position. "For definite. This is where I need to be." Pause. "But there are so many things that make it hard." I ask her to choose items to be these things and soon she is addressing each one in turn.

Additional doubling of clients on a continuum can assist them in developing greater self expression and self acceptance. Problem gamblers are often very *whakama* or ashamed and doubling provides acceptance of them and their experience, often for the first time.

This particular continuum can be used for other kinds of problematic behaviour. I have for instance used it in working with men who have been compulsively viewing pornography or using prostitutes.

Couples Where One Partner Gambles

I encourage partners of gamblers to attend the first or another early counselling session. Gambling affects family members financially and emotionally and partners often value the opportunity to have counselling themselves. These impacts have often been minimised by the gambler who may consequently be unrealistic about the damage to the relationship and the support s/he will receive in recovery. Counselling provides a safe framework to address these issues directly, especially the breakdown of trust, and for the partner to learn about and understand gambling as an addiction. At a purely practical level, the couple's financial position starts to become transparent and the partner can make an informed decision about protecting his/her assets, managing couple finances and assisting with safeguards. Any buy-in by the partner decreases the gambler's - and the partner's - isolation.

Directing the gambler on a continuum with their partner present, often reveals aspects of the gambling that surprise the partner. The couple has frequently been stuck in a narrowed down role relationship. So when the gambler expresses other roles, both parties are freer to respond to each other about the gambling (and other things) in new ways. Their discussions about the impact of the gambling and "where to from here" can then begin to include acknowledgement of the complexities of addressing the feelings, behaviours and impacts associated with it.

Peter & Sue

Pete's answers to me about his gambling have been evasive and I feel he's not ready to 'come clean' with

Sue, his partner. She is an angry accuser, exasperated that he has gambled again and reluctant to 'give him another go'. As he stands up, his wiry body is tense, his jaw clenched, knuckles white and breathing shallow. Standing at the 'current' position, his body slowly crumples and tears stream silently down his face. He talks of being powerless, of his profound sense of failure and shame, "I hate being here, I hate myself". Sue has known only the belligerent battler. Her face softens. Later Pete hesitantly chooses abstinence as his goal, saying this is what he wants but that he's never lasted more than a week so he has no idea how he could do it. In the past Sue has responded to talk of abstinence as a critical doubter. Now she functions as a sympathetic supporter and they both warm up to a wider range of roles as they start to address some practical first steps for Pete.

Ann & Dave

Ann confessed to Dave six weeks ago that she had gambled their savings, that several bills were in arrears and they were seriously in debt. I have seen her once. They are members of a fundamentalist church that considers gambling a sin and he had no idea that she has been gambling for nearly three years. She has been a cringing confessor for six weeks, fearful of a wrathful judge. When she moves to abstinence, she expresses her relief that she has told Dave, that the deceit is over. For the first time she looks directly at him and speaks clearly. He is not ready for her apology or her resolve, but the sincerity of both are palpable and he starts to express his feelings of betrayal and hurt. Later in the session there is further progressive development in the role relationship as Dave expresses his admiration for the way in which Ann cared for her dying mother. He is warm, positive and respectful.

Using continuums with a partner present needs to be done with some care and I almost never do so when the partner has only recently become aware of the gambling and is still in shock.

I may also ask a partner to use the same

continuum and invite them to relate to the positions from their perspective. I do so mainly when the gambler has a limited understanding of the effects of the gambling on his/her family or when the partner appears to disagree with the goal set by the gambler. After expressing themselves at different points on the continuum, the partner chooses the goal they want the gambler to adopt. This allows the impact of the gambling to be fully expressed without blame (and without assertiveness coaching for the partner who is frequently co-dependent).

Mary & Alan

From the 'current' position, Mary expresses her sadness that Alan has lost the respect of their adult children and her sense that their 35 year marriage is a hollow husk due to her loss of trust. Later, when she moves to abstinence, she recalls his playfulness with the children when they were younger and his rock solid support for her and their youngest son, John, as he died of cancer. She shares her dream of "growing old disgracefully together" and her determination to be rock solid for him if he is willing to commit to gambling abstinence. Alan cries for the second time in their marriage. He begins to talk of his distress as John "shrank and hollowed out", feelings he has held at bay (with the help of gambling) for twelve years.

I am awed by their grief and tenderness. Mary has identified some of Alan's progressive roles and helped him warm up to them; touched on the key function of the gambling and given him a motive to move into recovery.

Increasingly I appreciate the value of partners having this structured opportunity to express how the gambling affects them, regardless of the gambler's level of awareness.

Relationship Counselling

When I work with couples who have come for relationship counselling, I seldom do formal assessments. The partners talk about the issues

that have prompted them to seek help and set goals for the counselling. As they talk to each other and me, one of the things I notice is personality differences which are regularly contributing to misunderstandings. Following are the continuums I work with in such situations. They are based on the Myers-Briggs Type Indicator (MBTI)² which enables us to expect specific personality differences in particular people and to cope with the people and the differences constructively." (Myers Briggs 1980)

Introversion (I) — — — Extraversion (E)

Intuition (N) — — — Sensing (S)

Thinking (T) — — — Feeling (F)

Perceiving (P) — — — Judging (J)

Michelle & Simon

Michelle and Simon come to counselling to improve their communication which they both consider a problem in a marriage to which they are both committed and which works well in many ways. Michelle frequently feels criticised by Simon. They reached a crisis when Simon returned home alone early from a family holiday with members of Michelle's family. As they discuss this in the counselling session they listen to each other but nevertheless 'talk past' each other. I set out aspects of introversion and extraversion on a continuum and ask them to place themselves on it. Michelle identifies strongly as an extravert. Simon stands a little short of half way on the introvert side. We then discuss each of their needs for connection, space and time and subsequently they readily develop several strategies. When we set out a feeling-thinking continuum, they are well apart. Michelle is on the feeling and Simon on the thinking side. In a brief exploration of their needs, Simon becomes enthusiastic, engaging his thinking to strategise for the relationship. He asks

for reading material on MBTI and subsequently actively develops ways he can comfortably participate in a week-long extended family event which he's been dreading and on which Michelle places high value. Michelle had taken his disquiet as lack of care for her but as Simon beavers away, his commitment is obvious and she now suggests that he comes for part of the time only.

When relationships are considerably more strained than this, a continuum can still provide a useful starting point and sometimes much needed light relief.

Hector & Annika

Crisis management was the focus of Hector and Annika's first appointment. Both were actively suicidal (though neither had previously disclosed this to the other) and lethargic from extremely limited food intake for three weeks. There was no food in the house. Their rent and power were several weeks in arrears, their savings gambled away by Hector. Yet they found the energy to disagree doggedly, and without looking at each other, about whether they would accept a food parcel! They return the following morning having eaten and feeling more "human". Early in this session I start setting out a perception-judging continuum. They place themselves at opposite ends of the large room. As Annika starts to talk about how she feels here, Hector catches her eye, they smile and then start laughing and are soon convulsed. Hector says "I knew that we're different but this is ridiculous!" They laugh at how absurd they are wanting their relationship to work. They move towards each other, gazes locked, and then hold each other for several seconds before sitting down. They discuss how it is to live with such difference. We start to address the gambling and they now listen to each other.

Groups

I run an education session on problem gambling in the alcohol and drug treatment unit of a women's prison. During the first session, which

is attended by all the women in the unit, I present information about problem gambling and cross addiction. Participants complete the 8-screen which is a gambling screen designed for use in community settings. Eight gambling behaviours are listed and people who identify with 4 or more may have a gambling problem and a full gambling assessment is recommended. At the end of this session women choose whether to join an ongoing group for both problem gamblers and their 'significant others' In order to assist them in making their decision, I direct four continuums, (see overleaf).

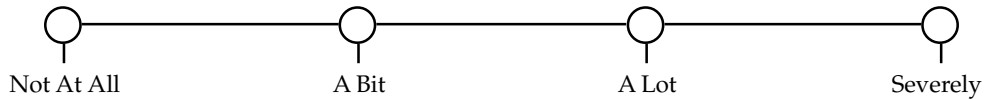
There is invariably quite a bit of chatting and exclaiming as women move quickly to positions on the first continuum. Despite some knowing each other well, those who stand together at 'severely affected by a family member's gambling' have often not known this about each other and there is nearly always spontaneous discussion. Those most affected tend to identify who in their families gamble and comments such as "I always know where to look for her" and "He never has money" are common. Their warm up to the work of the ongoing group increases. Those unaffected by gambling frequently make comments about not knowing any gamblers and start to talk about not needing to be in a group.

As I ask people to stand on the second continuum, based on their self score on the gambling 8-screen, there is usually some light hearted banter. Because gambling is often part of prison culture, women already have a fair idea of who gambles frequently. Invariably many of the same people who have problem gamblers in their families have scored 6 - 8 on the screen and the energy rises in the group at this end of the continuum.

In planning for these groups I designed the first two continuums to concretise the key factors naturally leading to a decision to join the group.

Group Continuum 1:

Affected by family members' gambling;

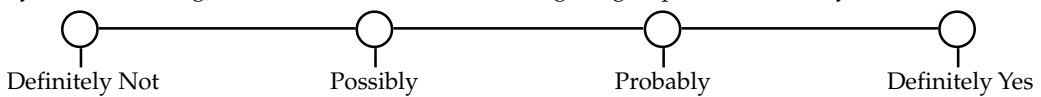


Group Continuum 2:

A continuum based on the person's self score on the gambling 8-screen, the scale is 0-8.

Group Continuum 3:

"If you were making the decision now about attending the group, where would you stand?"



Group Continuum 4:

"If your higher power were advising you, where would you stand?"³

(Using the same scale as in 3)

I assumed that women would generally be aware of their gambling issues. In fact, this is not the case, even for those who gamble heavily. For example, of the 7 women who recently elected to join the group, only one had previously thought she had a gambling problem. Yet all subsequently scored 6 or more on the DSM IV for pathological gambling (people who are currently behaving or have behaved in 5 or more of the 10 ways listed in the DSM IV are considered probable pathological gamblers). They had thought of their gambling as harmless fun compared with their drug and/or alcohol addictions and consequently were not considering any behavioural changes.

I work with some of the women who choose not to attend the group in subsequent sessions.

Karla

Karla stands on 'severely affected' and a score of 6, hesitates about joining the group and finally moves to 'definitely not'. As the group ends I tell her that, unless she objects, I will put her name on the list of people to have gambling assessments and assure her this does not commit her to joining the group. She

nods, "That's OK". When we meet she says her mother's gambling is so bad there is nothing she could possibly learn in a group that would help. She believes she can control her own gambling because she hasn't gambled for money in prison, but scores 9 on the DSM IV pathological gambling scale. She decides to join the group and subsequently sets a goal of abstinence and starts to plan how she will achieve this.

Ngairé

Ngairé stands on 'severely affected' and a score of 4 then 'definitely not' for joining the continuing group. After we finish she drifts around at one end the room, glancing at me, so I join her. She is working on several other issues in therapy, feeling overwhelmed and at risk of selfharm. We agree to work together 1:1 when this is appropriate.

In allocating time to give to discussion on the continuums, I aim to balance two things. The first is the desire of those discovering common cause wanting to talk. The second is the overt reluctance of those with no issues around gambling to spend further time on the subject. Because of this I tend to direct the third and fourth continuums very crisply, not usually

asking women to discuss their decision about joining the group with those around them.

The fourth continuum occasionally prompts someone into joining the group.

Chrissy

Chrissy stands in a group of 'definitely not' for the third continuum. When I give directions "If your higher power were advising you, where would you stand?" she looks confused, clarifies what I've said with the person beside her and then runs like a startled rabbit to 'definitely yes' to some amusement in the group.

In using Twelve Step language, with which the women are familiar as part of Alcoholics Anonymous, Narcotics Anonymous and the drug and alcohol treatment programme in the prison, this continuum signals that the group is about gambling recovery.

I initially used these four continuums to facilitate women's decisions about continuing in a problem gambling group. But I now retain them for their added value in

- raising awareness;
- clearly giving control to the women about their decision, an important signal in a prison;
- warming up prospective members to the purpose of the ongoing group;
- developing the sociometry of this group;
- alerting me to those women who might benefit from joining the group but haven't chosen to do so;
- establishing some of the norms of the group - action, personal responsibility, recovery.

Conclusion

The continuum is a versatile, non-threatening and accessible action intervention. I have illustrated how I use it for goal setting, working

with personality differences and to assist in decision making. Used in a group setting it offers a non-judgemental way of bringing out subgroups and can therefore be used to heighten awareness and expression of differences and similarities. When used in conjunction with doubling, the continuum increases the clients' warm-up and a greater degree of spontaneity invariably emerges. This enables conserved patterns to change.

As I use continuums in increasingly mindful ways, they greatly enhance my work.

Footnotes

1. All client names and identifying characteristics have been changed, except the fact that group sessions were held in a women's prison
2. The MBTI identifies 16 different personality types based on four different preferences in how we function:
 - Introversions or extraversion is our relative interest in the inner or outer world and where we derive our energy.
 - How we perceive or become aware of ideas, people, events, using our intuitive or sensing preference;
 - When we judge or decide we use thinking, a logical process, or feeling, based on our values;
 - Whether we are more comfortable perceiving or judging.
3. Thanks to John Faisandier for suggesting this fourth continuum.

References

- Briggs Myers I with Myers P (1980), *Gifts Differing* (page 1), Consulting Psychologists Press Inc., Palo Alto, CA.
- Kroeger O and Thuesen J M (1988), *Type Talk*, Bantam Doubleday, New York.





Sociodrama with Juvenile Offenders

Rollo Browne

Rollo Browne is an organisational consultant based in Sydney. He has worked with boys and masculinity issues for a number of years.

This article focuses on the lead up to and the enactment of a sociodrama with juvenile offenders who have committed serious crimes. It highlights the need for flexibility in managing the group warm up, finding the appropriate structure and recognizing the underlying theme of the group. One clear conclusion is that keeping the sociodramatic question in mind is an effective way of grounding the learning for the participants.

They Won't Work On Their Personal Situations

In a secure room in a juvenile detention centre, five boys, aged between 12 and 16, and four adults - the unit psychologist, two youth workers and me as visiting director - are working in twos and threes. The large number of adults present is to prevent possible violence. This is the second of six voluntary 60 - 75 minute sessions. There is nothing breakable in the room, no sharp edges and the chairs are plastic. The walls are a grubby pastel green. There is nothing to tear, no posters, no carpet. Nothing comfortable. Nothing homely. There is a television set high in a corner. All doors, windows and peepholes are security locked at all times. All the adults, except me, have keys. The single external window

overlooks some grass and a brick wall. Despite this, the mood is purposeful.

Psychodrama is one of a sequence of alternate therapies being trialled to see what might prove effective. I have been asked to work with the boys on the understanding that they are not able or not prepared to discuss their internal worlds. The preliminary briefing with the psychologist clearly indicated that the boys would get aggressive or just walk out if expected to enact their personal situations. I learn that their self-appointed leader and spokesperson is Nod, that all the boys are afraid of Steve and that they all aspire to be successful 'crims'. These boys are all from the unit for the emotionally disturbed. They have done some awful things that I am not told about as it is not directly relevant to the program.

"Russell would do it"

The previous program used drama therapy where the underlying purpose was to expand the boys' social empathy to include those who are were affected by their crimes. The centerpiece of the work was the scripting and acting out of a courtroom drama in costume. In a stroke of brilliance the drama therapist had

invited the boys to get involved because they would learn how to act. The boys were well aware that some crims had achieved notoriety and a career in film. In their sessions the boys accepted participating in warm ups when told that *"It's exactly what Russell Crowe would do before acting in a scene."*

Taking this warm up into account, I have thought carefully about how to present myself and the purpose of the sessions to the boys.

Session 1

For the first session I set up a circle of chairs. The boys file in, alert, curious, with some displaying defensive bravado. They are checking out the newcomer. I introduce myself and make a brief statement about our work, comparing it to playing the game of life. I say, *"I am the head coach in the game of life and I do this all the time for a living. You do not play the game very well or you wouldn't be here. As well, there is the game of surviving in jail because that is also your life now"*.

I ask everyone to stand in a circle. All the adults participate but two boys sit watching from a corner. I begin the circle game 'Find the Leader' without instructions. This involves the group mirroring the movements of a designated leader. The person in the middle doesn't know who the leader is and has to figure out who is actually leading the gestures and movement in the group.

Director, *"Everyone stand like Steve is standing"*.

We all take up his posture.

Steve, immediately ... *"I don't like this"* ... looking around tensely.

Director, to everyone ... *"Do what Steve just did"*.

Steve, *"Why are you copying me?"* ... more tense.

Director, *"Let's copy Jack (youth worker) now"*.

I realise that I have begun the mirroring playfully and with good humour but without setting out the structure of the game. These boys need more

safety in order to play well. This is a classic example of spontaneity dissipating when there is no adequate structure. I explain the rules further and the game progresses more easily. I begin to feel more solid as the leader. The boys involved focus on enjoying the game.

A couple of turns later I link the game to our work.

Director, *"This is important because when you walk into a room and see things going on you need to work out who the leader is"*.

Nod responds immediately.

Nod, *"I'm the leader"*.

Director, *"Then the next thing is to learn how to pass the leadership over."*

Nod looks thoughtful

The boys must be feeling safer because at the next activity two more join in. Shortly afterwards one is removed for being disruptive. He has continually sniped at Nod to the point of upstaging him. Nod is cool about it as it reinforces his status. So the issue of power between the boys is present although unspoken.

The session closes with a good feeling in the room. I realise that the boys mainly want to be taken seriously and be treated with respect.

My experience of the first session taught me a lot. I know that the boys are not a unified group except in opposition to authority. Their level of trust and personal responsibility is low. A central theme of the group is focused on who has power and how it is exerted.

Session 2

A week later there are six boys and four adults in attendance. I have decided to work sociodramatically with the issue of power, setting out scenes that involve people like the participants.

After the warm up games, I use photos to focus the boys on what it means to be powerful¹. They select and briefly speak about the photos they have chosen. Three of them co-operate in sorting these photos into themes and give them titles to name the kind of power that is represented.

We then move to a team tag game called 'Cat and Mouse'. This requires one team to select a controller who issues instructions to their blindfolded cat about how to catch the other team's blindfolded mouse. The controller of the second team meanwhile directs the mouse to escape. The game involves developing trust - trusting someone to keep you safe and tell you what to do when you cannot see - and the ability to cope with change. This activity thus involves the transfer of power between participants.

Both teams keep to the rules and a sense of childlike delight emerges, although no-one remarks upon this. The boys' ability to enter the role of trusting participant is limited, but they do respond positively when the controller roles are changed at short notice. One participant who has not spoken at all, and whose strategy is to get others to do his thinking for him, is suddenly given the task of controller and participates satisfactorily. I link this game to real life situations where we all need to know that we can trust others so that we can participate in the game of life.

Thus far we have focused on participation, trust and the experience of power. The group has warmed up to action, to thoughtfulness, to playfulness, to my leadership and to the idea that the games do mirror life in some way. It seems to me that the boys are not concerned with the purpose of the group, as long as they are not expected to play 'baby games'. After this game they are watchful and curious.

The Move to Action

I form the group into adult-adolescent pairs and

ask them to draw comparative pictures of 'a good youth worker and 'a bad youth worker'. The emphasis here is on a structured warm up with explicit instructions, as I realise that the boys do not have adequate roles for a discussion group. Safety is enhanced with strong structure.

This session is drawing more on the boys' life experience but from the safe distance of the social role of the youth worker. The boys have strong opinions about the youth workers who have power over their lives, and thus the issue of power is being carried forward into the sociodrama. I have inferred a sociodramatic question which I do not share with the group, as I consider my articulation overly conceptual. The sociodramatic question is "*How can we have a healthy relationship with power in a detention centre?*"

After completing the drawings, the participants sit in a semi circle and I announce that we are going to create a scene. Each group shares their thinking about the actions of a bad youth worker. I make an assessment of the sociometry in the group and choose the boy most likely to respond positively. Nod is the self-appointed leader and he is well warmed up to drama. I judge that his participation will be essential to involving the other boys in the group.

Director, "*What did you come up with Nod?*"

Nod, "*Runnin' boys into the lock up. Bang, whooshka ... really bad eh!*" ... looks gleefully around at others.

Setting out the System: Scene 1

Director, "*Let's set out where they are and what the bad youth worker does. You come out and be one of the youth workers. Set the scene. What's in front of you?*"

Nod, "*Metal door ... a concrete step you sort of trip over and the wall in front*".

Director, *"Now pick someone to be another bad youth worker"*. Pat is chosen and comes out.
"OK, get someone to be the kid in trouble". Nod looks around. The other boys shake their heads.
Nod, *"What about you Col?"* Col, the psychologist, comes out.

Unsurprisingly no-one wants to be the victim. This is too much like real life. The psychologist has the strongest relationship with the boys and will hold his ground without losing his temper. I ask Nod to select an auxiliary to play the role of another bad youth worker. Adolescents frequently become self-consciousness, isolated and resistant when a spotlight is trained on them. I thus get multiple auxiliaries to represent a single role.

Director, *"We are going to do this in slow motion so that nobody gets hurt"*.

Slow motion is a device to ensure the safety of the group. The potential for violence is present in the room. Firm direction helps contain it.

Director, *"Okay. Act out what happens"*.
The three auxiliaries slowly enact the throwing of a boy into the lock up. They trip him and run him into the step 'by accident'. A lot of energy in the scene, delight and laughter.

Director, *"Freeze there. Now, as the youth worker, what's the important thing here?"*

Nod as bad YW, *"This little bastard needs teaching a lesson. He's not going to learn any other way"*.

Pat as bad YW, *"Yeah" ... big smile ... "We'll show him who's boss"*.

Director, *"OK. Thanks. That's the first scene. You guys sit down for a while"*.

I end the first scene there. I realise I have made a mistake. The boys' refusal to take on the role of the victim has distracted me from the sociodramatic question. I need to link this scene

to our purpose by asking: *"What is the effect on this boy of this form of power? What is he learning about power?"* With Col in the role of victim, it would have been an opportune time to pose this question to the boys.

As I end the scene I am aware that the youth workers have not said anything yet. However, they are not my main concern even though they are an important influence in the boys' lives and can make or break much of the progress made. My purpose is to create a functioning group and to keep broadening the conversation through enactment. There is a sense in the room that something 'real' has been created. The boys are being taken seriously. This is positive.

The roles that have been enacted thus far are somewhat stereotypical. The boys have not personally involved themselves in the characters, although Nod's image of a bad youth worker is probably drawn from his experience. I note that playfulness, although still somewhat sadistic, is high, and cooperation and willingness to participate is good. I could introduce a new element here by setting up a panel of lawyers. I could bring the bad youth worker's own children onto the stage, or even the boy's parents. My instinct tells me that it will be better to stay with the boys' existing stories. Without further role development in the group, these scenes are likely to produce further stereotyped roles. I drop these possibilities and simply choose to bring the next scene onto the stage.

Scene 2

Director, *"Now let's see a good youth worker"*. Pat looks at Steve and points at him. Pat knows something might be on. *"What did you have Steve?"*

Steve, *"There was this youth worker lady who gave the guys head-jobs" ...greasy grin ... "Before I came"*.
Pol, YW, sharply ... *"You're in fantasyland"*.

Director, *"We're working on what you think a good*

youth worker is from your experience”.

Steve *“Oh ... OK” ... thinks ...*

This direction makes the warm up more directly personal to Steve and at the same time he is not required to put himself on stage.

Director, *“In your experience what does a good youth worker do?”*

Steve, takes breath, quietly to self ... *“I can do this” ... to group ... “I’ve got one ... it’s about you Nod” ... sees suspicious look from Nod ... “It’s a good one” ... defensively.*

This is unusual. The group becomes alert, interested. Steve has chosen to create a scene involving someone else in the group. It is no longer at arms length.

Director, *“OK. Set the scene. You be a typical good youth worker. Where are you?”*

Steve as good YW, *“I’m coming to work. I’ve got something for Nod”.*

Director, *“Put something under your arm. Where’s Nod?”*

Steve as good YW, *“In his room”.*

Director, *“Set up the room over here”.* Steve does so methodically. *“Now you be Nod. Are you sitting on the bed? At the desk with your head on your arms. What’s going on Nod? Turn your head to the side and say what’s happening”.*

Steve as Nod, *“I feel pissed off and sorry. That computer program is stuffed and I can’t get it working”.*

Director, *“Now you pick someone to be Nod” ...picks Pat ... “and you become the good youth worker again. Pick up what you had under your arm and stand outside the door. Pat, you sit at the table like you saw. Go ahead youth worker. Do what you do”.*

Steve as good YW, *“Hey there. I got something for ya”.*

Director, *“Reverse roles”.* Auxiliary enacts youth worker.

Steve as Nod, ... lifts head blearily ... *“What?”*

Director, *“Reverse roles”.* Auxiliary enacts Nod. Steve as good YW, *“A computer loaded with that program you wanted”.*

Director, *“Reverse roles”.* Pat as auxiliary refuses. *“Too much moving about”.* He sits down.

Steve as Nod, ... turns his head away, feeling is heightened, mutters to himself ... *“How can I ever repay you?” ... poignant silence.*

Director, after a longish pause. *“Okay. Let’s hold it there”.*

This is a critical moment in the drama. Steve has taken up the role of scene creator very well. The concretisation has assisted him to warm up to the story he has in mind. Through role reversal he has warmed up to the experience of being treated with kindness.

Steve has warmed up to something in himself and he is probably surprised by this. This is also the first moment of deep feeling in the group and, although some may not have noticed it, I want to allow room for it. The warm up to the personal and to the social are running hand in hand. I know that this depth of feeling is not yet discussable. I do the next best thing and value the moment in an unhurried, warm silence. The group is not impatient to move on. Steve has time to gather himself. I know that the warm up to feeling is important to the psychologist. One of his goals is to assist Steve to build his capacity for empathy. Without engendering self-pity, the enactment has highlighted the deeply affecting nature of kindness. Steve is enacting a progressive role that can be normalized over time. Deep feeling, no matter how quickly covered up, is a part of sociodrama.

In retrospect, I realise that this key moment presented another opportunity to link the work back to the sociodramatic question. *“What effect does this use of power have on this boy? What is he learning about power in this scene?”*

As I pause the action, I am conscious that the session must end soon. Good time boundaries are part of the leadership contract. I move to a final scene where two systems are enacted. I aim to assist the boys to make meaningful sense of what they have created so far.

Looking At the System as a Whole

Director, *"Now let's have the bad youth workers back here with Col as the boy"*. They reassemble. *"Look over at the good youth worker. What do you reckon is happening there?"*

Nod as bad YW, *"Load of bullshit"*.

Pat as bad YW, *"Doesn't matter"*.

Director, *"Don't you like what he's doing?"*

Nod as bad YW, *"S'alright"*.

Director, *"Now you two go over there and be the good youth worker. Look back over here at what is happening to this boy. What do you have to say to these youth workers"*.

Nod as good YW, to director ... *"What can you say?"* ... thoughtful pause.

Both scenes are portrayed on stage. I am struck by the maturity of the role Nod takes up in accepting that there are times when nothing can be said. He is being himself as the youth worker. Pat, playing the role of the good youth worker, is unable to mirror Nod's thoughtfulness. It would be a significant spontaneity challenge for Pat to speak in role. I decide not to 'push the river' and instead make a systemic statement about the work, linking it back to real life. I am pressured by time and I trust that the experience has affected them. For the moment the group is focused and coherent. Role development is progressive. There will be another session next week. I want to value the progress made and wrap it up for now.

Closing

Director, *"Look around at the whole scene. Notice what we have created. Sometimes there is nothing you can say but it doesn't stop you doing what you*

can. Thank you. We'll stop there".

In a final scene such as this, I would normally let my curiosity loose and investigate how two opposing groups of youth workers co-exist, how it is that some workers belong in both groups and what effects this scenario has on the boys. However, I know that the boys must develop a stronger sense of self and be capable of personal reflection to address such questions. As well, they would need to have developed trust in me over time. Trust must be earned in a detention centre. We are not yet at this stage.

On reflection, I realise that it would have been more effective to link the boys' experience back to the sociodramatic question again. "What makes the difference between good and bad uses of power?" However, in the event there is no time to consciously integrate the work. The group moves directly into 'milk and milo' and we hang out for five minutes before I leave for the post-session debrief with the unit psychologist.

Conclusion

The boys are learning about the nature of power and how it shapes their responses to their own situations. The issue of power is always to the fore in a detention centre, and therefore a significant factor in my directorship of the group. I realise that a more conscious use of the sociodramatic question would have assisted the boys' learning. I do not expect them to analyse and intervene in their own social system. They do not yet have the personal and social roles to do this.

In the role of Nod, Steve experienced some 'action-insight' but I do not know how well he is able to learn from this experience. The boys, particularly Nod, took pleasure in depicting the 'bad youth workers' and warmed up to a greater level of spontaneity. Although this is their world,

they are not yet in a position to reconfigure their responses. This is, after all, why they are in detention.

I cannot be sure that the boys have a clearer picture of the social system in the detention center as a result of the enactments. But I do know that the focus on the value of kindness, shared by all the participants in the group, is new, even though it is not normally admitted. Kindness is a form of power. The group has been

more playful and the enactments have engendered spontaneity. From my perspective, the most significant thing is the ongoing development of this group. Through the warm up and the sociodrama the boys, the attendant professionals and I have managed the power issues so that a workable group has emerged. We have been working on real issues from the boys' collective experience. Our next task is to build on this development.





Jumping The Berlin Wall

Social And Cultural Atom Repair With An Individual Adult

Craig Whisker

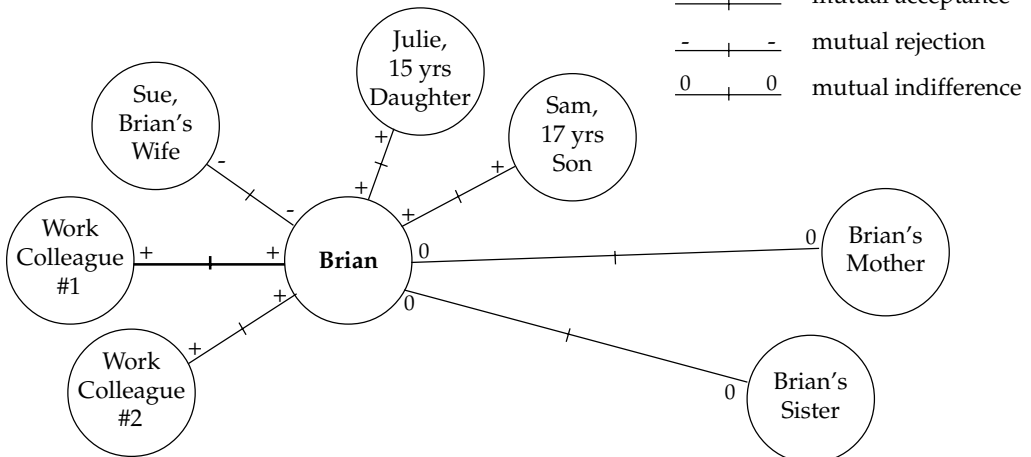
Craig is a family psychotherapist in private practice and an advanced psychodrama trainee who lives on the Kapiti Coast, NZ. This article is an abridged version of a Social and Cultural Atom paper he submitted to the Wellington Psychodrama Training Institute in 2005.

This article presents my work with 'Brian', a client seeking to develop adequate functioning in familial relationships. The work is informed by Bowen's family systems theory (Bowen 1978) and role theory from psychodrama (Clayton 1993). A detailed account of my first session with Brian is followed by abbreviated accounts of the second and third sessions. In the reflections and role analyses which follow each session emerging progressive roles and role conflicts in Brian's functioning are examined. This leads to the development of recommendations for further work.

Session One

Brian is a 44 year old professional man referred by his GP following the prescription of anti-depressants for about one year. At the beginning of our first session he sits comfortably and talks confidently about his life. He has been married to Sue for 19 years and they have two children, Sam aged 17 and Julie aged 15. From his descriptions of personal and professional life a picture of his current social atom emerges.

Brian's Social Atom



Social Atom Analysis

Brian's social atom comprises close and mutually accepting relationships with his children, and distant though mutually accepting relationships with two work colleagues. His relationship with Sue is mutually rejecting and relatively distant. Other familial connections with his mother and sister are very distant and mutually indifferent.

Brian appears to be isolated from other adults both within and outside his family. If he has come to rely on strong links with his children for social and emotional affirmation, the strength of these links may lessen in the near future as they move into adulthood. Seeking counselling now may be a sign of progressive functioning to redress isolation and avert crisis.

Session One Continued

Three weeks ago Brian told Sue he wanted to end their marriage. It is the first time he has voiced this, however, he has thought about it for many years. He has recently had the vision of himself as an essentially happy person trapped in a depressing marriage. He wants to be able to look back at the end of his life knowing he broke the 'old cycle' with Sue and tried something new, for better or worse.

Brian hopes Sue will embrace his plan as an opportunity for her own personal growth. This is in keeping with the 'old cycle'. Instead, she is shocked and devastated. She quickly warms up to not surviving alone and withdraws into suicidal ideation.

Brian presents as the depressed victim of an unfulfilling marriage. His overdeveloped coping roles as *critical commentator* and *desperate fixer* of Sue fail to bring satisfactory meaning to his life. They fuel his lifeless dependence on waiting for her to change. The emerging progressive roles of *creative self-lover* and *visionary trailblazer* are evident in his actions when he discusses his vision with Sue and later seeks counselling. However, these embryonic roles are in conflict with his powerful coping role of *benevolent lifesaver*, expecting Sue's gratitude for his initiatives. Her rejection of his proposal reinforces his functioning as a *depressed victim*. These roles comprise part of Brian's cultural atom and are tabulated below.

Preliminary Diagnosis and Clinical Plan

Brian appears to be resolving a major depressive episode which has lasted over one year. The onset follows a chronic pattern of disaffected life for many years. His current solutions, namely, to end his marriage and win his wife's approval, are in conflict. The development of new progressive roles, such as independent thinker and enlivened actor, are likely to lessen this conflict. The use of doubling, concretisation and role reversal in our session may assist Brian to resist the existing coping roles and allow embryonic progressive roles to expand.

Session One Continued

Twenty minutes into our session Brian stops talking and a pensive look settles onto his face.

Initial Assessment of Roles in Brian's Cultural Atom

Progressive Roles	Coping Roles	Fragmenting Roles
Visionary Trailblazer Creative Self-Lover (both embryonic)	Critical Commentator Desperate Fixer Benevolent Lifesaver	Depressed Victim

After about 10 seconds of silence the following enactment is produced.

Craig, *What is emerging in you now ?*

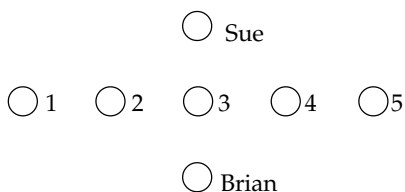
Brian, *I don't know. I feel like I'm stuck too close to Sue to get a good fix on things. The view is too hazy.*

Craig (rising to stand), *Please stand up with me. Imagine that this chair is Sue. Place it relative to yourself to illustrate this close proximity.*

(Brian places the chair one metre away from himself).

Craig, *Now place objects between Sue and yourself to represent the things that stick the two of you together in this relative proximity and which stop you from stepping back to have a less hazy view.*

Brian places objects on the floor in positions as illustrated below.



- Key; 1 = financial responsibilities
 2 = family home
 3 = Julie (15 year old daughter)
 4 = Sam (17 year old son)
 5 = day-to-day domestic routines

Craig, *Take up the role of each object in turn and let us know how that object keeps you stuck too close to Sue.*

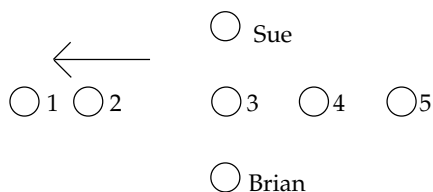
Brian as financial responsibilities (facing Brian), *I'm financial liabilities and debt. You can't ignore me because the consequences for the next 20 years are too great. Get it wrong with me and I'll be a millstone around your neck for the rest of your life.*

Craig, *Reverse roles.*

Brian as himself, *Yes, I need to treat you carefully and talk to Sue to make sure we deal with you*

properly. The house is the same really. It is only one house and there are 4 people to be housed. It provides security for us so we need to deal with these two (financial responsibility and the family home) together and properly.

Brian flows into action as he speaks, lifting up objects 1 & 2 and placing them together away from objects 3-5, as illustrated below.



Craig, *Take up the role of Julie. What does she say to keep you stuck in close proximity to Sue?*

Brian as Julie (facing Brian), *Don't do it !*

Craig, *Reverse roles.*

Brian as himself, *I have to.*

Craig, *Reverse roles.*

Brian as Julie, *But I don't want you to. I feel insecure and I don't like the change.*

Craig, *Reverse roles.*

Brian as himself, *I know you have physical, emotional and mental needs and I want to talk to you and give you what you need to feel secure. And I want you to understand why I need to do this.*

Craig, *Reverse roles.*

Brian as Julie, *I don't want change. I don't like change. Don't do this to me !*

Craig, *Reverse roles.*

Brian shrugs, grimaces and looks over at Craig.

Craig, *Looks like you'd like her to understand you and change her outlook to take you in, just when at 15 her developmental task is to separate from you on her terms, not yours.*

Brian, *Yeah, she doesn't want my change. In fact, she's the one most like me, most likely to let you know what she doesn't like and so seeing me change must be pretty unsettling for her.*

Craig, *How about Sam ?*

Brian as Sam, *Oh, it's alright Dad. I'm flexible and doing my own thing anyway and I can move between you and Mum OK.*

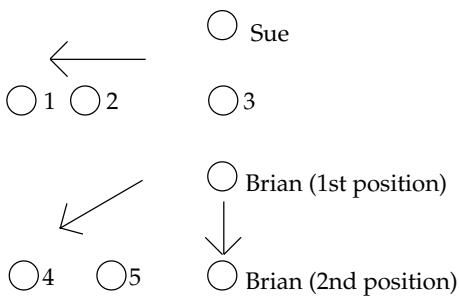
Craig, *Reverse roles.*

Brian as himself, *Yeah, he's not a problem. He doesn't really belong there. He's over here (places object 4 on a chair beside himself). And this one's the same (picking up object 5). That's flexible and can be sorted out.*

Craig, *You can come up with ways of running your home life day to day and have that reflect your desire to separate too?*

Brian, *Yeah. It's just a matter of sorting it all out. That's not a problem (referring to object 5). It can be sorted.*

Craig, *So take a step back now Brian to a position where you have created more distance between you and Sue (Brian steps back to 2nd position). What's it like having this increased distance between you and her?*



Brian (inhales deeply, eyes momentarily skyward). *I feel more myself. I'm freer to be myself (his whole body expands as he stands up fully and looks Craig in the eye). I'm happier here and I know being here is the right decision for me.*

Craig, *What do you see from here?*

Brian, *I'm not going to lose contact with Julie. I'll give her what she needs to feel secure even though she doesn't want me to go. And the finance and the house I'll sort out with Sue.*

Craig, *Now, come back to the first position. That's*

where you've placed yourself today. Where you're stuck in close proximity (Brian moves to first position). Make a statement to Sue from here.

Brian, *I really hope that you can see this (marriage separation) as a good thing in the long run to stop me from being unhappy all the time. I want you to get counselling so you can face the emotional stuff and let us get on with discussing how we are going to do it and what Julie needs.*

Craig (standing beside Brian facing Sue, doubling Brian's stance and demeanour), *So when you are in close here and things are hazy you get drawn back to old hopes, eh? Of Sue changing or her being something different to what she is. That's the old stuff coming up again, keeping you trapped in the 'old cycle' with her.*

Brian, *Yeah, I can't really change her. I can't change anyone. They have to want to change themselves.*

Craig, *Hmm, so you're susceptible to falling into that old way here, eh? And losing the freedom of back there (referring to Brian's 2nd position).*

Brian, *Yeah, I like it back there much more. That's where I want to be.*

Reflections on Session One

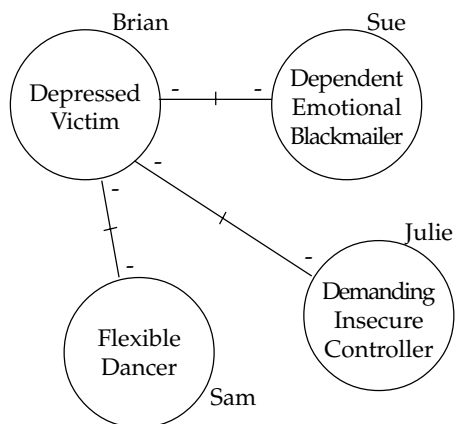
The family is nearing a major transition point in their life-cycle as the children enter young adulthood and develop independence from their parents in preparation for leaving home. Brian and Sue face the prospect of developing a new relationship with one another after nearly 20 years of child rearing. If they have retained their marriage over recent years because they are the parents of dependent children then successful completion of this stage in the family's life cycle may make marriage redundant. If this is not accepted by all concerned, as it is apparently not by Sue and Julie, then the family may become stuck in this stage and experience crisis (Hayley 1976).

Roles and Role Relationships Represented by Brian in Session One

Evidence of family life cycle stuckness will be

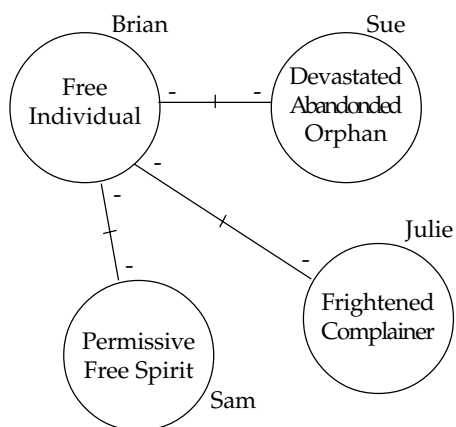
seen in the over-development of coping or fragmenting roles by family members. The main roles or role elements represented by Brian during session one are presented below.

Role Relationships with Brian as a Depressed Victim



When Brian feels depressed and victimised in his marriage he is rejected by every family member. Sue rejects him by requiring more from him. Julie rejects him by promoting her own needs first. Sam rejects him by not being drawn in. Evidently, Brian is now also rejecting depression by seeking therapy to develop a better life for himself.

Role Relationships with Brian as a Free Individual



Sue and Julie are potential coalition partners against Brian's emerging sense of freedom. Sam's support for his father creates a benevolent alliance between the men. If the females join forces to oppose either man, or if the males jointly oppose either female, the differentiation of self of those involved will lessen. Bowen (1978) referred to these scenarios as triangling. Remaining detriangulated will assist Brian's individuation.

Sam is accepting of Brian in a warm-neutral individuated way, whereas Julie is highly reactive. Whether this is simply rebellion against her parents in order to progress her own individuation is uncertain. If her parents have successfully projected onto her their undifferentiated selves she may be emotionally fused with their responses to anxiety. Bowen refers this as a family projection process (Bowen 1978) resulting in the 'favoured' child being the least differentiated one. Her inclusion in triangling when the family is under stress would be evidence of the latter.

Implications for Future Sessions

Brian contributes to the family's stuckness when in the over-developed roles of depressed victim and desperate fixer. Conversely, in fledgling progressive roles of free individual and creative self-lover he differentiates himself from his current family, and ultimately, from his family of origin where many of his over-developed roles will have arisen (Bowen 1978).

Bowen's directives for the enhancement of progressive roles may be useful in subsequent therapy sessions with Brian. They involve developing person to person relationships between Brian and his family members, and assisting Brian to become a better observer and controller of his own emotional reactivity so

as to remain detriangulated from emotional situations in his family. New roles, such as dispassionate thinker, unhurried guide, lover of light and space, and strong willed believer in self, will assist him in these differentiation tasks.

Summary of Session Two

As Brian sits down for our second session he is smiling and has a lively look on his face.

Craig, *You look relaxed today.*

Brian, *Do I? That's funny, because I just got off the phone from my mother and she's given me a good tuning up just 15 minutes ago.*

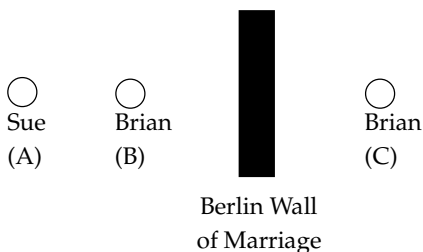
Craig, *You seem pretty pleased about that.*

Brian, *Well, when I got a chance to speak I just said, "Thanks for that Mum. Goodbye." and put the phone down.*

Brian reflects that in the face of his mother's verbal onslaught against his decision to end his marriage he would normally have tried to convince her what he was doing was correct.

Brian, *That's something I learnt from the exercise we did last time. That I can't make someone feel what I want them to feel, or think what I want them to think. I've noticed that I've been getting then losing then getting again that distance we talked about last time. I have the distance and I feel great and free. Then I lose it again and I'm trying to make Sue feel better again and wanting to avoid her pain because I really feel her pain and I don't want her to be distressed.*

Brian concretises the situation below.



He describes moving back and forth between position B, where he tries to make Sue feel better, and position C, where he feels 'free' having jumped over the Berlin Wall of Marriage. I propose the analogy of a parent leaving their pre-school child at a daycare centre. Position A is the child at the daycare centre. Position B is the parent looking into the daycare centre every fifteen minutes to check up on the child. The parent is anxious and seeks reassurance from the child. This is disturbing for them both. Position C is the parent staying away from the daycare centre until the appointed time to collect their child. The child learns to be at the daycare centre without the parent. The analogy strikes a chord in Brian. He realises his occupation of position B is an attempt to control Sue's experience of the marital separation so as to reduce his own anxiety.

Reflections and Role Analysis Following Session Two

Brian resists triangling with his mother and the effect is immediately apparent in his body and mind. There is new experience as a dispassionate thinker and strong willed believer in self. This assists Brian to avoid fusion with his family's emotional system. He is a *visionary trailblazer* differentiating himself from the norms of his family of origin.

However, fusion comes and goes in relation to Sue. Brian struggles to let Sue have her own experience of their separation and wants to write the script for her. He does this to avoid her expressions of pain and fear so as to shield himself from his own separation anxiety. Towards the end of the session he resolves to strengthen his ability to be a *creative self-lover* as a counter role to being an anxious parent.

Brian is experiencing conflict between old coping roles and emerging progressive roles, namely, *anxious parent* versus *creative self-lover*, and

Assessment of Roles in Brian’s Cultural Atom following Session Two

Progressive Roles (Emerging)	Coping Roles			Fragmenting Roles (Diminishing)
	(Moving Towards)	(Moving Away)	(Moving Against)	
Dispassionate Thinker, Strong Willed Believer in Self, Visionary Trailblazer, Creative Self-Lover	Desperate Fixer, Benevolent Lifesaver, Anxious Parent		Critical Commentator	Depressed Victim

desperate fixer versus dispassionate thinker. Subsequent therapy sessions will seek to strengthen the emerging progressive roles.

Summary of Session Three

Brian begins by expressing his confusion about feeling attracted to Sue during a recent occasion when they spent time together talking about their separation. She listened empathically, took onboard his experiences and wanted to improve their marriage. He felt drawn to her new response toward him and warmed up to wanting more of this. He is aware of the individuation he has enjoyed recently, yet now experiences himself collapsing towards her in the hope she will make everything better by understanding him more, being more other-centred, and affirming him. This is the old cycle in their relationship being repeated. Brian demands change and Sue appears to agree. Brian projects his relationship expectations onto that agreement, while Sue is unaware of his many assumptions.

Following discussion between Brian and myself about his developing self-sustaining qualities and discernment the following interaction takes place.

Craig, Think of a child with natural talents. This is like Sue having a new response towards Brian. Can the parent of the child appreciate the child’s talents without imposing their own values and opinions

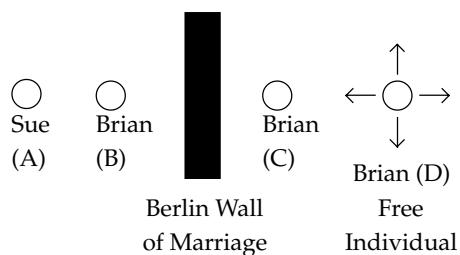
about what is a worthy talent or pursuit and what is not? Can Brian appreciate what Sue is doing without having to impose the old marriage map on her?

Brian, I had that happen to me as a child. Not seen for what I was. Pressured to do what my parents thought were the right things.

This is a significant moment for Brian. He is suddenly in the midst of cultural atom repair again and further differentiation from his family of origin.

Brian (after silence), I feel freer now than ever before. I understand how relationships have worked in my family and I now feel more capable of sustaining myself. My world feels larger.

Brian concretises this as follows.



Brian takes up position D and experiences the exhilaration of his expanding world. He holds his arms out wide and rotates through 360°. He feels dynamic power and peace. He is not fearful and does not retreat to familiar territory near the Berlin Wall of Marriage. Nor does he ‘shoot over

Assessment of Roles in Brian’s Cultural Atom following Session Three

Progressive Roles (Emerging)	Coping Roles			Fragmenting Roles (Diminishing)
	(Moving Towards)	(Moving Away)	(Moving Against)	
Free Individual, Dispassionate Thinker, Visionary Trailblazer, Creative Self-Lover	Desperate Bargainer, Benevolent Lifesaver, Anxious Parent		Critical Commentator	Depressed Victim, Needy Non-Recipient

the horizon to get further away from Sue. He is whole and congruent relating to the world in every direction. Literally taking in the full breadth of life.

Reflections and Role Analysis following Session Three

Brian experiences significant pleasure as a free individual. This comes about through his discernment of patterns of dependency and manipulation that exist in his family of origin and which he perpetuates in his marriage. He experiences these patterns first-hand when Sue relates to him empathically, triggering his fragmenting roles related to neediness and coping roles related to bargaining. These are tabulated above.

Recommendations for Further Work

The emerging progressive roles form an appropriate foundation for further work to increase Brian’s differentiation of self. At this stage there has not been an expansion and diversification of Brian’s restricted social atom. His current expressions of spontaneous creativity in the world are likely to see this situation change and supporting him in this endeavour would likely bear fruit.

Brian’s cultural atom repair work has seen the growth of discerning, self-believing and creative

roles in his personality. Further refinement of these roles may be achieved through the enactment of key relationships in Brian’s life, including psychodramatic role reversal. These in-session role tests serve as rehearsals for the role testing Brian will face in his day to day life with critical family members and others.

The inclusion of Sue in future sessions would give them both the opportunity to develop control over their emotional reactivity towards one another. With adequate coaching and development in this area they will both be better equipped to function more effectively in the present.

Concluding Remarks

In these first three therapy sessions Brian develops new progressive functioning by increasing his differentiation of self. This is an emerging quality in his life. Further work was undertaken in both individual and couple sessions with Brian and Sue over several months following the work described in this article. During that period the couple separated and successfully shared the parenting of their teenage children. In my final individual session with Brian he was happy with himself and described feelings of ‘newness’ and ‘movement’ in his life.

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The Practical Science of Sociatry

A Progressive Path

Dr Kevin Franklin

Dr Kevin Franklin, Psychodramatist & TEP, Clinical Psychologist, is based in Perth, WA. He is passionate about Morenian philosophy and examining the theories that we live by. By agreement this excerpt is edited by Rollo Browne from a paper by the same name.

Introduction

My purpose is to expand appreciation of the practical science of Sociatry¹. This is relevant because sociatry is a plank of a forthcoming revolution. This revolution is not a military, economic, informational or similarly a technological revolution; it is a social revolution in the art² of being human. Our personal journey there - to that *oasis in the labyrinth* of our self - is Psychodramatic. Our journey together to that oasis in the labyrinth that is human culture is Sociatry.

The sociatry-seed of this foreseen social renaissance is lived and living, a Practical Science (Moreno et al, 1960). This quality distinguishes it from current *inert* social sciences such as economics and psychology and their application in health and education. Moreno envisaged a creative revolution where people invest in the art² of being. A society where people are:

- motivated by those twin-factors of creativity and spontaneity in human nature,
- are thereby enabled to create a better functioning self and society, and
- based on existential order of healing and

health; not humanism's contrary *dis-ease* model (eg Carroll, 2004) of social dis-order and its inevitable conflict.

Based on its Theory of Role, the same used in psychodrama, sociatry implies a sense of unity.

Theory of Role

In Dr Moreno's extensive written work on *role theory* there is another and incomplete text, his *theory of role*, a general systems theory of psychodrama. It is useful to distinguish his role theory and his theory of role. Psychodrama is a wonderful example of experiential learning using living action methods and group work, having role as its unit of meaning and its measurement. Psychodrama is a modern-day competent role theory, because it is embedded in a systemic theory of role; it is capable of subsuming singularity (one right way of being); and it has scientific validity and empirical proof (Franklin, 1988).

Moreno identified a string of role functions within the systemic unity of person and personality. He wrote in *Who Shall Survive?* (1978: 3rd Ed) the following string having increasing depth and freedom:

It may be useful to differentiate between *role-taking* - which is the taking of a finished, fully established role which does not permit the individual any variation, any degree of freedom - *role playing* - which permits the individual some degree of freedom - and *role creating* - which permits the individual a high degree of freedom, as for instance, the spontaneity player.

In this way Moreno identified a unified theory of role with depth and complexity.

The Integrating Concept

In our psychodramatic work at whatever level of social organisation - individual, couple, family, organisation or larger - it is important to know the ideal, purpose or goal; the integrating overarching concept of the work-group. When cooperation and collaboration are invoked contrary assumptions about unity and compromise can produce potentially catastrophic consequences.

Dr J L Moreno (1889-1974) and Professor G H Mead (1863-1931) were social philosophers who initiated science into modern role theory (Franklin, 2004). Mead (1934, p.xxi) asserted that *Man is a role taking animal*. An animal that mimics and copies hand me down gestures and other perfunctorily superficial social skills whose effect is to defend his traditional social unity - the jealous him & his - from personal accountability and cultural progress. The dynamic of role taking is to secure and protect safety.

On the other hand Moreno observed that *Man is a role player*. Role playing is of a different universal order and creates a different sense of psychological and societal unity.

Role and therefore unity is used in profoundly different ways that belonged to different orders

of different cultural universes. Professor Mead did not identify his theory of role. In default he used singularity, accepting that there is one right way to live, as his model. His role taking is a social conditioning. He draws our attention to the collective social role, to the singularity of role taking and to the human desire for social cohesion and safety. Role taking addresses the lower levels of a hierarchal need-scale such as Maslow's (1972).

Stages and Gestalts

Moreno's three stages of role taking, role playing and role creating apply to societal development and sociatry as they do to individual human development and psychodrama.

A child is born and identity as boy or girl is given. The child takes up his or her role by default. There is no freedom or choice here. And initially there is no personal conflict with this assigned singular identity. The child grows, becoming more aware of this identity given and reinforced socially. Alongside this role taking, the child has their own emerging experience of self, playing different roles, trying alternatives, finding what fits for them in their social world. From there the child slowly develops a deeper knowing of his or her self and begins acting to express it, creating the roles that are truly their own. This is the path to individuation. However the move to individuation is not certain. The child may simply fit in with conditioning social expectation and remain in coping roles.

Here we link to the three subsystems identifiable in the maturing personality. These are the progressive, coping and dysfunctional gestalts. There is a unique mix of these in a person. Usually one comes to dominate personality. Normally, coping rather than progressive or dysfunction dominates individual functioning. Again this applies to society.

Three Universes

Moreno's theory of role comprises three universes:

- 1st universe: Unconflicted state. We accept that there is one right way to live (singularity).
- 2nd universe: Transitional state. We know there is no one right way to live. We sense there is a deeper possibility of alignment with our fundamental human nature. We begin to experiment (role playing) but we are fearful and mostly play it safe. Denial of our human nature leads to confusion, depression and alienation. This is characterised in the dysfunctional or, at best, coping.
- 3rd universe: Progressive state. We act in accordance with our deep identity, originating in the creative spontaneity of our human nature. Characterised by role playing and role creating and the birth of an inclusive and diverse social unity.

Psychodrama alerts us to the individuating journey that each must take personally: *Who Shall Survive?* A personal journey through three broad stages of ageing: wild infancy; learning social ability in childhood and beyond; and wise-ripening of mature adulthood. Sociatry wakes us to the collaborative journey that society must also take if *society shall survive*.

Society is now transitional in the 2nd universe. We can identify problems *in society*, eg terrorism and response to natural disaster, on various local and world stages. Here society is confounded, and consequent profound confusion caused by contrary universal orders. Mankind stretched between old & new: desire for safety via social cohesion and loyalty and desire to create unity in diversity with its systemic stability and potential of peace.

Moreno elaborated his theory of role describing

1st and 2nd universes and hinting at a 3rd. He subsequently developed a unified general systems theory that we in ANZPA Inc know as psychodrama or simply as role theory. Moreno identified singular and plural elements - with their roots in psyche & socius - in the unity of role and integrating both secular and divine in one. He draws our attention to role as integrative and integrated, to a unity subsuming the singularity identified by Mead. His unified role taking - role playing worldview addresses our human desire for safe nurture and also for our natural expression in creative spontaneity. This bipolarity transforms Maslow's hierarchy of needs scale. Like holistic yin & yang it holds the focal conflict of contrary desires.

Sociatry is holistic, creating and living a 3rd universe ideal in a Society of Mankind. The three gestalts, stages and universes describe a cycle of life where there is beginning, middle and ending. Humanity has been through the stage where there was one right way to live (1st universe). Currently, the world is fallen into a 2nd universe cultural malaise.

In his study of child development Dr Moreno observed the differentiation of psychodramatic and social role function from earlier unified psychosomatic roles. He observed the social norm to differentiate & segregate those personal and interpersonal realms in unhealthy personal development. With creative spontaneity a person develops progressive functioning, differentiating and integrating subject-object functioning in identity formation. When creative spontaneity is stultified through differentiation-segregation, coping and dysfunction is the normal outcome. The 2nd universe in cultural history correlates with this event in individual development. This is the familiar 2nd universe path of alienation resulting in a profound confusion, suffering, misery, spiritual failure, mental illness, addiction and criminality.

At society systems level the 1st universe of singularity is contrary with a newly emerging and evocative 3rd universe. Moreno developed psychodrama in and for now, for these interesting times of this 2nd universe, of cultural transition between old and new unity.

New order requires new metaphor such as *loving of self and other as oneself*. Such a metaphor is implicit in Dr Moreno's role reversal. Progressive order invokes adulthood, whether man or woman, loving and individuated, having become deeply social. Progressive behaviour is ethical, and not simply perfunctory, subserviently obedient or contrarily oppositional to society's moral³ order.

The Problem that is Society

It is important to distinguish the problem that *is society* from groups that are problems of *society*.

The first is the problem that is society. Or rather, that scientific theory - why *society is problematic* - which is in the grip of older and unresolved theory and whose assumption of oneness is misinforming social unity. The second refers to the problems of society, those groups of people disordered and disorderly in a society that is fallen, failing to evolve. And that group work is the bailiwick of psychodrama.

Through our governing mechanisms we can arrange to quarantine mental illness, delinquency, terrorism, criminality and other problematic groups from mainstream society to avoid the problem that *is society*. For example, psychological disorder in adult gay men is predicated, not because they are gay, but by an old theory whose grip on social order pre-empted their proper identity formation and causing loss of spontaneity and consequent mental illness (Franklin, 1988). This theory is a problem that emerges from what is society rather than a problem for the group of gay men that are part

of society. To further scapegoat life's disturbances exacerbates society dis-ease.

A society that is ill has members who are sick: a social system with groups of individuals having disorder isomorphic⁴ with the whole. In a disturbed social system expect disturbed members. Similarly, in a disturbed Unity of Nations expect disturbed, and disturbing, nation states. In a school assuming social control function, expect disturbance.

Australians are realising that health is a subset of the mind-set of society. That anxiety, depression, youth suicide etcetera, are outcomes, symptoms of a more general sickness, *the absence of health* in society. Aboriginal ill health is increasing seen as an Australian socio-cultural problem of paternalism and not justly a problem of Aboriginals. The *problem is society* where a malign mindset is at work. It is seldom met direct, except in role reversal to see our self as others see us.

Prof Mead and Dr Moreno each developed modern role theory, invoking contrary worldviews with different universal orders. Their worldview - *theory of role* - and their contrary universal orders - *order & disorder* - is old.

To understand Moreno's sociatry requires we appreciate that he is speaking to a vision of a new world order of *freedom* and not simply *freedom from* tyranny. He defines positively rather than in the negative using *presence of* rather than *absence of*. Healing & health are positive aspirations while coping in the absence of illness is laudatory but negative.

That a Health Department for example using medicine's disease model is primarily concerned with sickness and not with health is generally accepted. Ironically health construed as absence

of sickness is normally ignored and even prevents progress to *discover healing* that is primary. Likewise, that an Education Department steeped in teaching's nurture is primarily concerned with education is accepted as convention. In practice that irony of equating transmitted hand-me-down knowledge with education is generally ignored. Neglecting knowing for knowledge's sake denies spiritual progress by neglecting to *discover knowing* with its deep learning implications.

In The Grip

John Maynard Keynes, the parent of modern economics, maintained that if you don't know what theory you are using then you are simply in the grip of an older theory. Colloquially it is said that assumptions are the mother of all stuff-ups. Keynes' view speaks to scientific principle.

From media accounts, modern day terrorists believe that they are fundamentally good acting to defend their society in the eyes of their god. Their theory of role informs their action in the name of the society they would create. Is psychodrama fundamentally flawed and are we spreading its error? This is a question that must be asked and answered without fear or favour.

Unless we know our theory of role we may simply be in the grip of an older and inappropriate theory. We may espouse a theory but in practice assume some other. Instead, *acting-in* - living Moreno's theory of role through psychodrama for instance - is essential to healing in this 2nd universe and to progress into health in 3rd universe re-unification.

Conclusion

Psychodrama and sociatry are practical sciences; they are alive social sciences. They use the psychodramatic paradigm whereas current social sciences use the psychosocial paradigm. It is psychodrama's practical, developmental

and socially unifying ethic in this healing science that makes its young cousin sociatry a progressive cultural path of best practice. This is a path from society's current confounding, its confusion and its induction of dis-order in the populace. Sociatry is a way to systemic social unity and the stability of valued socio-diversity.

Psychodrama role theory uses integrated systemic theory of role. In practice it promotes healing of group and of its members. In sociatry Moreno anticipates in social healing a 3rd universe of social unity and health.

The notion of sociatry evokes a future society, a developing culture which values the bringing forward of roles aligned with our deep identity. These originate deep in our creative spontaneity of our human nature. Sociatry, like psychodrama, defines health to include role creating and role playing.

If we do not trust our process of creative spontaneity learning then we are instead producing what Moreno called *sociosis*. That is where role taking mentalities dominate spontaneity learning and identity formation to a living-death. And that end-state singularity is in service of a reductionist worldview where there is one right way to live.

Health can include conflict and is not merely an absence of conflict. Health does however mean that we will engage with each other without resorting to coping or to fragmenting roles. Instead, creating, learning and developing individuated roles, progressive roles integrative of both the personal and the collective elements in personality.

The practice of sociatry involves trusting and valuing a deeper knowing involved with individuation. The implication for practitioners is that they can *better* trust the client's

imaginative and intuitive world, and not be prematurely compromised by pre-empting assumption. They can be less conflicted with what a client brings forward from their deeper knowing.

Footnotes

- 1 Dr J L Moreno pronounced it so-sigh-a-tree.
- 2 Art; Oxford Dictionary, archaic 2nd person singular, present tense of be.
- 3 Moral, Oxford Dictionary: conforming to accepted standards of general conduct.
- 4 Isomorphic, Oxford Dictionary: 1 exactly corresponding in form and relations. 2 Crystallog. having the same form.

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Spontaneity Made Explicit

Philip Carter

Phil Carter is a psychodramatist, TEPIT, and Director of the Computer Usability Research Centre at the Auckland University of Technology, New Zealand. He thrives on applying his psychodramatic sensibilities to the world.

The classical description of spontaneity - *an adequate response to a new situation or a new response to an old situation* - has endured. Perhaps we like it because it is in everyday language; it relates spontaneity to our everyday lives. There's a suggestion in it that change is possible. It situates spontaneity as response and so differentiates it from impulsiveness. And the description can easily be expressed and investigated using role theory. No wonder it's become a classic and people continue to infuse it with life and relevance.

I have come at describing spontaneity from another perspective; hopefully one that is complementary and also encouraging of others to construct their own descriptions. I have taken video footage of psychodramas and together with a number of trainers we have carefully considered what is actually occurring and how that fits with our conceptualisations (Carter et. al, 2001; Clayton and Carter, 2004). Spontaneity has been a key focus. It appears that spontaneity can not be seen directly, but it can be seen in its effects. It is these effects that I have gathered up and arranged and

re-arranged and finally sculptured into a design - a diagram and a description - which I present as Figure 1 (overleaf).

Warm-up

How is that as a warm-up? My editors suggest that it's probably not sufficient especially since the style of this paper is somewhat unconventional and therefore requires some indication of what's to come. Perhaps this fits with Moreno's (1983) conclusion that the thing human beings are least ready for is surprise. So do I prepare you for this or not? Some would call that a choice; I prefer to see the possibilities as attractions or warm-ups.

The structure is that every italicised concept (given in the description under the diagram) will be written about, one by one; and the first one is warm-up; always warm-up first. Right now, we are warming up and that is the style of writing I'm aiming for; one in which you the reader get an experience of the thing we're talking about. So, usually I'm going to lead in with more of a poetic feel for a concept. Then there'll be a boxed description of how it lives and works in practice. Hopefully, together

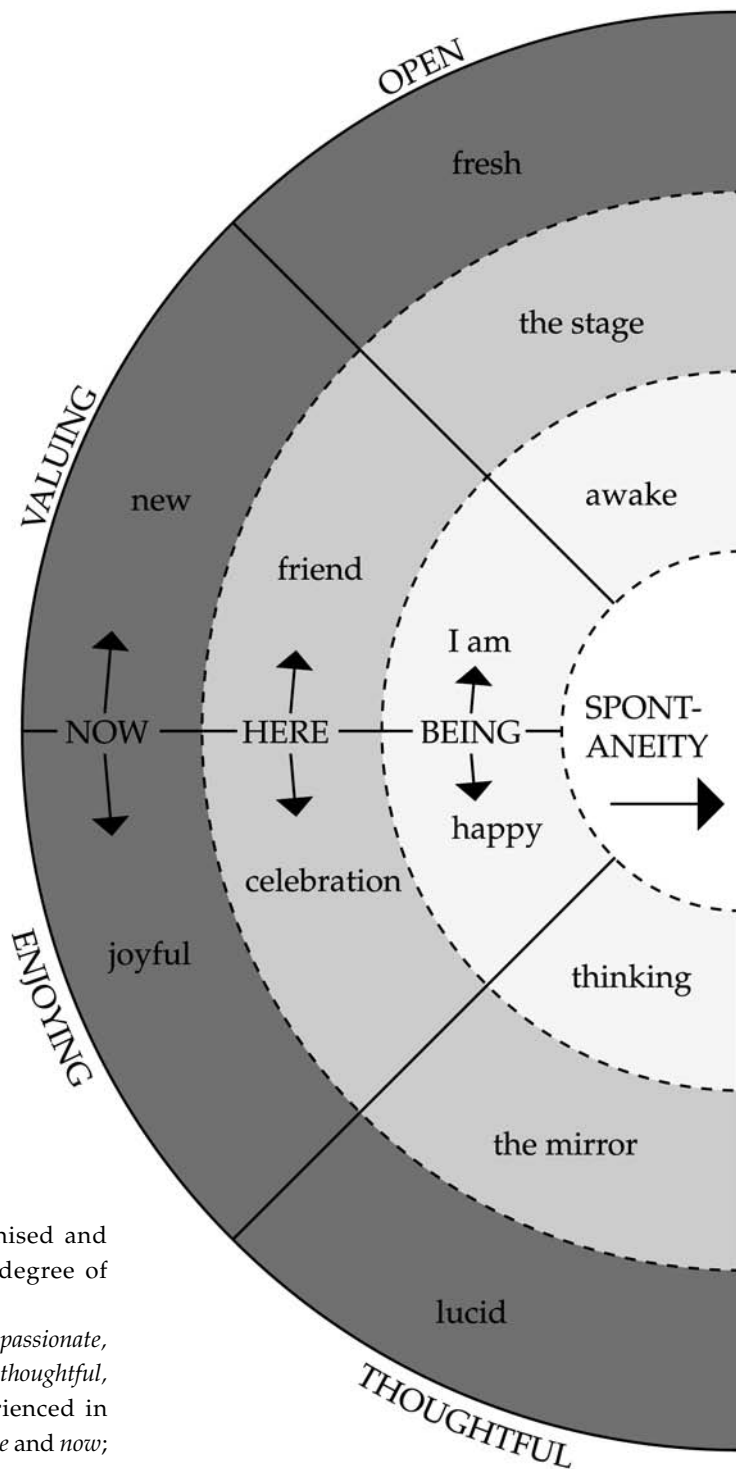
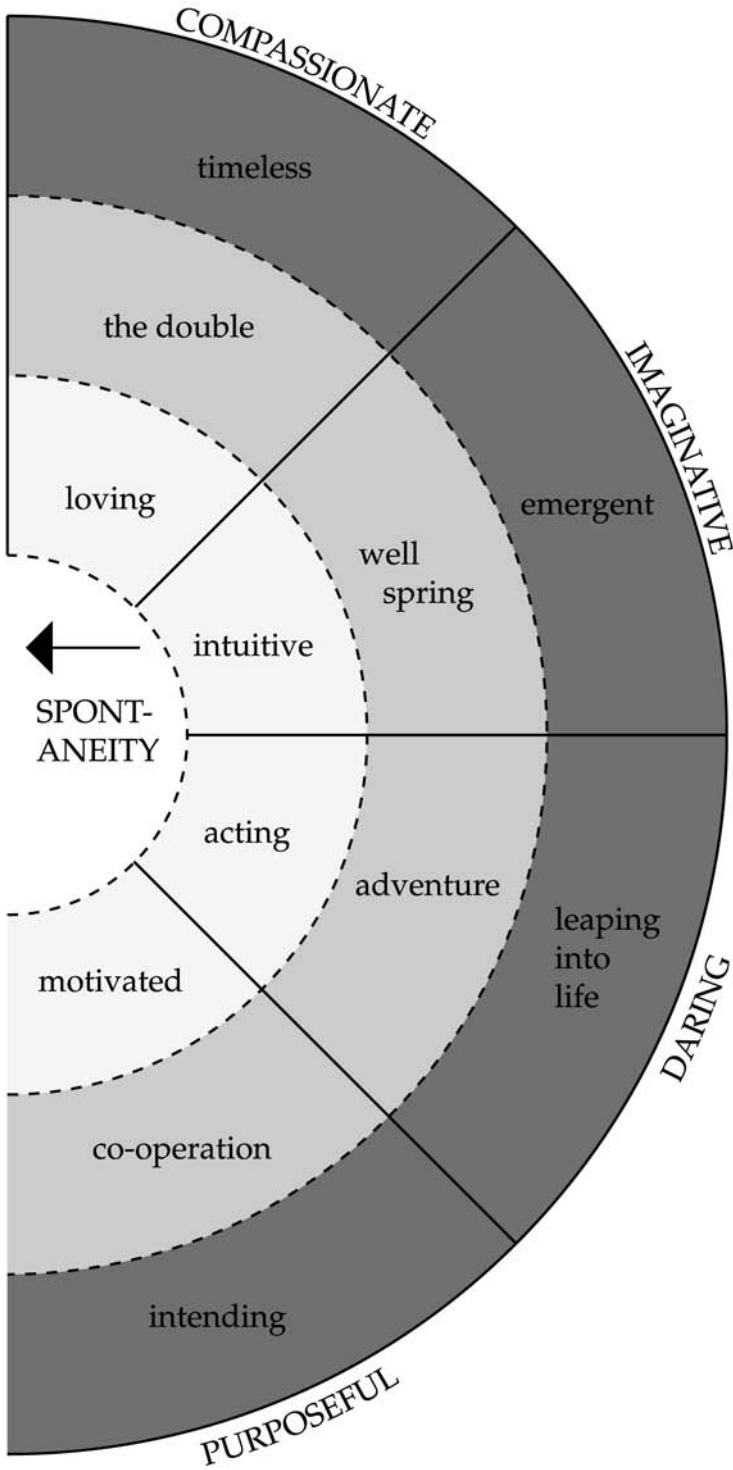


Figure 1.
Signs of Spontaneity

Spontaneity may be recognised and assessed according to the degree of warm-up to:

1. the qualities of *open, compassionate, imaginative, daring, purposeful, thoughtful, enjoying, and valuing* experienced in *being* and expressed in the *here and now*; and,
2. the *flow* between.



these two approaches will help the qualities in the diagram come alive and you will see how they have become embodied in your practice, or how they might.

I know psychodramatists love the term 'warm-up'. When I did a frequency count of terms used by trainers, I found 'warm-up' was used more than any other term except 'role' (Carter, 1997). Warm-up is a central organising concept to most psychodramatists. They attune to the group warm-up, they follow the protagonist's warm-up, they use role reversal to roll the warm-up of one role through the system, and so on. Moreno (1953) saw that *"the warming up process is the operational expression of spontaneity"* (p. 14). I am proposing that an assessment of spontaneity can be made by looking at the warm-up to each of the eight qualities in the diagram; the first one is *open*.

Open

"Openness is the most insignificant thing in the whole world. It is completely insignificant, truly ordinary, absolutely nothing...the absence of any kind of collection or evaluation." (Trungpa, 1973: 59). There is nothing to be done or not done. Like A. A. Milne when he was six, his face against a window on a rainy day.

We sit in a semi-circle that opens out onto a stage - a psychodrama group - and we can't help but be drawn to that open space. The director invites you onto the stage and the director is open too, tuning in with you, ready to follow your warm-up...

Compassionate

The sky takes into itself every shape and movement like the ultimate double for the universe. Perhaps the sky is a manifestation of compassion because compassion does not differentiate out the deserved from the undeserved. There is nothing you have done or

no place you are, that is not held in compassion. There is no membership fee or admission approval. Compassion has no agenda and so it can not be caught or defeated. There is no threat to it. It is not watching out for its end and so it is never too busy to wrap its heart around you.

The group leader has done her work well; group members know the protagonist holds the group theme, the motivating force and the reactive fear. They are committed to being auxiliaries. There is a co-operative effort of friends. There is no problem and nothing to fix. They throw their whole being into the protagonist's world. And the protagonist does not wait until his last out-breath to travel his life's journey. He embraces the goodness he is now. He is already forgiven.

Imaginative

Happiness is not always a friend of will, nor are laughter or freedom mates of pursuit, but imagination...that is a friend to all. Chance a look into that wellspring where all things can be held and refreshed; where the past is a treasure house and the future is a plaything. The imagination is a womb for the becoming into being. See how fertile it is when there is human warmth...

The director is intrigued. His imagination comes into play. *'Choose all the different people who have acted this way with you?'* he invites the protagonist. What will come next? The director lets the picture play upon him. No habit, no rule, the psychodrama is *"a creative process brought about by the coming together of the free flowing intuition of the director and the commitment of the protagonist to spontaneously entering the theatre of truth"* (Clayton, 1991: 55). On and on, the drama is right in front of us.

Daring

The protagonist knows there is no blank cheque from God. She knows from sharp experience that being alive means more ways for pain. Still, our

existential hero concentrates all her energy and throws herself into life not knowing what will come next. She doesn't wait for a safe place. Will she make it? Acting and failing; and, then more precise acting. She's not giving up on herself or anyone else. She won't say the world is falling to pieces because it is up to her, and you and me, no spectators.

There has been a projection of the protagonist's inner world into the psychodramatic stage. *'Try now to act what's in you.'* The director is insistent. *'Don't talk, just act what's immediately coming up in you.'* Time and time and time again. And there comes a time when the protagonist withdraws and says, *'He'll never understand'*. Yet the director says, *'There he is. Doesn't look like he's going to do it. This is your chance. You may not get another one. Tell him what your experience is.'*

Purposeful

The fertilised human egg drops into a placenta nest and grows there into a baby, ready and now travelling the birthing canal out into his mother's waiting arms. The boy becomes a man, the girl a woman, and they are attracted to become one, on and on...a seed contains the tree, a tadpole the frog; there is a motivating force from within out into the new. Even from the crucible of evil, Victor Frankl discovered the power of a 'why' to bear almost any 'how'.

The psychodrama group leader identifies our group theme, the motivating force towards having and sustaining intimacy. Psychodramatic groupwork methods are used so we are conscious as we thoughtfully build each other up. Difficulties are expected but we are not dominated by a desire for safety because we are in it together now. We commit to working co-operatively. Our friendship is a work. Yes, we are purposeful.

Thoughtful

Dogmatic ideas, trying to prove something, desperately desiring to know all the time; it looks like the mind is a runaway train that rides roughshod over our humanity. We are mandated to think and so we think we can train the thinking. We invent language that gives purpose and dignity to what we do. We work to maintain intelligence on a journey into the unknown. We discern fantasy from fact; achievable goals from impossible ones. We want to use clear thinking to get well organised. Yes, it is fortunate that thinking is not emotionally determined. Could it be that the mind that looks at the wonder of the Milky Way is the Milky Way finding a way to know itself? So many questions for this self-reflective being at the frontier of evolution.

The director generates ideas; lucid and alert, she makes interpretations based on the actions not just the content of what people are saying. She knows a new role may emerge at any moment. The group members see there is something worth having here and they wake up and become more present too; they cease to interrupt one another. There is much more room for experience and thinking to be integrated and expressed. Respect for one another in the group grows.

Enjoying

The dog has to be walked, but it won't do the circuit; it has to go off and sniff everything, play with everything.

The director and the group have worked well and so in the fifth session the group members are taking initiative with one another and are easy and light hearted; there is a lot of intimacy. But one group member says, *'I don't enjoy being with other people very much.'* And the director responds: *'Well you mightn't enjoy it but get with them and do things with them, act like a person who wants to eventually learn to enjoy life. You can't enjoy*

life unless you get involved with people and eventually you suddenly find you're enjoying it.'

Valuing

"We are born to make manifest the glory of God that is within us," Nelson Mandela tells us, "It is not just in some of us; it is in everyone. And as we let our own light shine, we unconsciously give other people permission to do the same. As we are liberated from our own fear, our presence automatically liberates others."

The director is interested in the whole group living in the here and now, valuing each thing as it emerges. You become the protagonist. The objects and people you choose do not represent elements of your world, they are them. You do not play a role, you are the role. Not as if, not role-play, and not "a very lifelike situation" the Penguin Dictionary of Psychology (1985: 722) describes psychodrama as, but *the* life situation; you encountering yourself in the world.

The director does not assist anybody. She is not relating to authority. The director is not doing what Bohart and Greenberg (1997) describe as psychotherapeutic empathy - "trying to communicate" in a "struggle to understand" (p. 14). The psychodrama director is not a fix-it therapist doing all the work, tiring herself out. No, it is the director's psychodramatic belief that we are all creative geniuses. There is a co-operation in the expressions of experience as it expands. Not just a shaping of "it into words and concepts" (p. 14), but a co-action, psychodramatist and protagonist in being, letting the experience impact on them, awakened imagination engaged, creating new life between them.

Being

Being is represented as a circle in the diagram. It is intimate with self, but what is self? The 21 grams of soul that exists after mind and body have gone? Our daimon? The thing that emerges

from role playing? Yes, says Moreno (1983), and I have invented the psychodrama method so you can rule and integrate the total universe into your self. I want you to experience the primordial and ongoing moment where chaos births into being. Not megalomaniac, but micromaniac; God coming into creative being in its humblest form.

We have lost our dignity, provoked J. L. Moreno. Starting with Copernicus knocking us out from the centre of the universe, then Darwin having us descended from apes, to Mandel's lottery, and then the final purge of genius by psychoanalysis, we have made the awful mistake of therefore thinking we are not divine; "it was the revenge of the mediocre mind to bring everything down to its lowest common denominator." (Moreno, 1946: 6). Enough, he said, God could not be born without being its own creator, you and me, an 'I to I' God in the status nascendi, everything in process, even God; the evolution of the creator being more important than the evolution of creation.

Ramana Maharshi (2000) makes a connection between experience and self too: "People would not understand the simple and bare truth - the truth of their everyday, ever-present, and eternal experience...They love mystery and not the bare truth, religions pamper them...why not abide in the self, right here and now?" (p. 99).

The director knows that empathy for another is not created through orientating to an external idea or a strategy; but it is about the place inside yourself where you are conscious of the living connection with another human being. 'Fill yourself up with your experience,' commands the psychodrama director. 'Become conscious of your experience, and when you have it, express it.' There does not appear to be any need to identify an intermediate agent called self or not self.

Still, differentiation does seem a principle intent in the universe; apparently each one of the 100 billion galaxies is different from any other. Even two particles can not occupy the same quantum state. Perhaps this was the necessary pre-conditions for the mirror to be born and true communion to develop? Otherwise, mightn't all things gravitate toward a safe and predictable unity, devoid of creativity and birthday surprises?

Here

The here is the stage where I encounter you; where expressions of sociometry, tele and role theory have meaning. And there is a mystery. Picture the Hubble eye sitting in space just beyond earth's breathing and it sees far distant galaxies and clouds of galaxies, not only out there, but hitting its reflective eye right here and now, the ancient past with us now. It seems there is no end to perception, only the precision of the eye. And the eye, what is that? The infant's eye first sees a flat world and then depth and objects are experienced. There is a creation within the child of the without. In the moving into a new space, that space must be taken in. Like a rock breathes in the sun and the sun breathes the rock. Like Swimme and Berry (1992) urge us to see that the universe is not a collection of objects but a mutually evocative reality. Even with this computer, there is a kind of mutual taking in of symbols and patterns of symbols; although if I had to be a rock or a computer, I'd be going for the rock.

Siegel (1999) would have us believe that neuroscience can now show us that the infant's brain is structured according to her beginning social experiences; "*human connections shape the neural connections from which the mind emerges*" (p. 2). Perhaps in the right parietal lobe, in the landscape the psycho-neurologists call the social self, lives our social and cultural atom. What happens when that structure is concretised on

the stage, so it is seen, experienced, and acted with? Evidence mounts. Like the first successful amputation of a phantom limb by Ramachandran (1998) using a simple mirroring device, the reflecting back of an externalisation that was accurate to the internally experienced reality, engaged and updated the brain in ways that had not been achievable with surgery, creative visualisation or will.

Now

If I had eternal life, I'd probably never finish writing this paper; there'd always be some little change I could make. And *now* seems a harsh deadline. No more changes? Accept the everlasting present? Bring it into sharp focus. But I like to plan and fantasise; expecting my future happiness gives me more happiness than the actual thing. Regrets, nostalgia and memories are my old buddies. I know - and neuroscience also tells me - that the brain is most integrated when it is doing novel tasks, but this isn't novel anymore. I just want to finish this paper. Can this 'now' actually serve me now? I still haven't found a home for Rumi's phrase, "*the way you make love is the way God will be with you.*" Oh...! I see it now; it's all in the warm-up and my commitment to that...

The director focuses his purpose and energy into this moment; the protagonist on the stage. The protagonist brings his mother and father onto the stage with him. In the psychodrama, he experiences the value of the emotional link with his mother and the wisdom and guidance of his father. There is a catharsis of integration. His spontaneity adds to the spontaneity of the others and that in turn stimulates his creativity. The freedom of the individual has not been set in conflict with the need of the group. His personal freedom is in tune with his social responsibility. Casting his eyes, heart and mind to the others in his social world sets him free from loneliness and self-absorption; sets them all free.

Flow

"An inherent spontaneity in the life of nature has once again been recognized by science, after a denial lasting over 300 years. The future is not fully determined in advance; it is open." (Sheldrake, 1990: 71). And the scientists have gone further and told a story of the universe from the big bang, still expanding at every point, to supernovas and second and third generation stars, the first cell and the emergence of memory, and feeding and sex, right on up to self-reflexive consciousness in the human being; and they stand in awe at the astounding ongoing emergence of new life.

The protagonist is encountering his favourite teacher on the stage. The director moves this to the side of the stage and works with the protagonist to produce the disturbing motive, a traumatic event that has been sending its dull waves into the present future. The protagonist moves into that event and gets to know it, and then he moves to the edge of the action space and then to the other scene with his favourite teacher. He accepts a double too. He is dipped into different landscapes and pulled out, he experiences pain and the double at the same time, fear and the breath of spontaneity; the cognition, the will and the emotions are moved between, the protagonist becomes less rigid and flexibility and movement are generated. There is a new future now.

The director values his own flow and the movement of his warm-up. He touches self-doubt but is not rooted by it. He moves between knowing nothing to seeing someone he doesn't want to be with and he remembers his conviction - built from repeated experiences - that it is worthwhile to hang in there. He stays in tune with his own experience and there is a protagonist. He produces the protagonist's script and there is a scene and they reflect and make a clinical assessment, on and on, as in life, different

times and places requiring different things but always a readiness.

Spontaneity

Spontaneity is the breath of the soul; new life in, waste out. It makes intelligence available and mobilises the enlightened emotions. It breathes life into the self and strengthens our communion with the earth. It *"appears to be the oldest phylogenetic factor which enters human behaviour. Certainly older than memory, intelligence or sexuality. It is in an embryonic stage of development but it has unlimited potentialities for training."* (Moreno, 1983: 7). And what training is that? High culture and technical sophistication alone aren't helping us sustain ourselves in the face of surprises.

We enter the psychodrama and cry out. No denial in a crisis. We hold and encourage each other. We value human experience and friendship more than anything. We generate respect and learn how to individuate because we must. We identify the emergence of intimacy and we work to sustain it. In our theatre of truth *"there is a creation of a social system within which we are all bound together as one human group dedicated to being sensitive to one another no matter what happens and to continue that whether there's a solution or not."* (Clayton & Carter, 2004: 115).

Wrap up

I don't see we have reached any solution to the 'problem' of clearly describing spontaneity. Hopefully we have made spontaneity more explicit by grounding the discussion in the experiences of the living psychodramatic stage. The diagram itself shows division; but being, here and now are not divided; nor is heart separated from thinking, nor joy from daring, but some measure of everything is present in everything else. There are some omissions in the diagram too; encounter is not expressed clearly. The connections between spontaneity and the

other constructs of tele, sociometry and role theory are not explicit. Warm-up and the various mechanisms of the dramatic stage are not represented. But such a diagram would then become inclusive of all the main psychodramatic constructs. I wonder if that could be done in a clear and aesthetically pleasing design. It could make an outstanding training and clinical tool. Perhaps this diagram and description of spontaneity will offer some inspiration for that endeavour.

*What use understanding,
if we lose the magic of possibilities?
What use technology,
if we become redundant?
What use control,
if we become lonely?
What use security,
if we lose surprise?
What use beautiful things,
if we forget how to create?
What use knowledge,
if we fail to experience?
What use clever words,
if we don't laugh?*

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Resistance - A Thrust Towards Autonomy

A Case Study of Radix Body-Oriented Therapy seen from a Psychodrama Perspective

Narelle McKenzie

Narelle is an internationally acclaimed Radix body-oriented therapist, based in Adelaide. After some early training in psychodrama she turned her focus to working with the body, training with the Radix Institute, USA. In 2005 she presented a workshop on Radix and psychodrama at the ANZPA Conference.

This case study describes my work with a client from both a Radix ¹ and psychodrama perspective. The initial assessment of the client's functioning and the choice of interventions were based on Radix body centered concepts however there is considerable overlap with psychodrama concepts of role analysis and development, mirroring, warm up and spontaneity.

Initial Impressions

Joseph was 50 years old, 6 foot tall, slim and fit. He exercised regularly and his body was well proportioned. He had an open angular and friendly face. His eyes were soft but would not engage. He had a slightly furrowed brow with a fixed expression of bewilderment. His lips were full and his chin quite tense. His head was tilted back which brought his jaw forward. When engaged in conversation, he would often get a fixed grin on his face. It was difficult in the early sessions to work out if this was pleasure or tension. He appeared to have a firm wiry body but when touched his muscles were quite soft except for his shoulders and neck. When standing, he locked his knees and he found it difficult to trust that his legs could support him. His toes were curled very tightly

to try and hold him up. His neck and jaw were very tense. When speaking, he hardly moved his mouth. His arms hung by his side limply giving the impression that they were not attached to his chest.

Joseph's energy overall was very contained. I had the impression that his life force and spontaneity were very stuck. He blocked both the inhale and the exhale of his breath. He found it difficult to breathe into his chest and the concept of breathing into his belly was completely foreign to him. Later I saw that neither his inhale nor his exhale, deepened even with vigorous activity.

Clearly Joseph was not in his body, did not allow his energy to move easily and was robotic in his movements. In psychodramatic terms the congruence between his thoughts, feelings and body was low. He was over developed in his thoughts and appeared to use his body to protect himself from feelings that were unacceptable.

"A Hard Nut To Crack"

Joseph was referred to me by a fellow psychotherapist. He had sought counselling

with her for his lack of emotional experience and expression especially with his wife. After several months of verbal counselling with limited progress, his therapist had made the suggestion that some body psychotherapy might help.

In his initial interview, Joseph, a professional man in his late forties, reported that he had a reputation, professionally and personally of being very cool, calm and collected. He seldom lost his temper, he hadn't cried since early primary school, he couldn't recall feeling whole hearted joy about anything in his life for a long time. When asked about fear, he struggled to get a grip on what this might feel like. He said he could recall feeling anxious and having thoughts that centered around frightening things happening but no direct experience of fear that he could recall. One of his worrying fears was that if he didn't improve his relationships he would end up becoming a hopeless street bum.

Despite his reputation of calmness, he reported that he found it almost impossible to relax. He said that his wife would become very angry but he seldom expressed anger or felt it. He would just wait for her to calm down and then withdraw.

He had been married for thirty years. He felt that he was not emotionally close to his wife and hadn't been for a long time. She thought he was emotionally cold and most of their interactions focused on her telling him about his inadequacies. Their sexual relationship was virtually non-existent. He had three children. The two eldest had left home. The youngest was about to. He couldn't recall anything significant about his childhood. He had three siblings and was the youngest. His father worked to support the family and also wasn't very emotionally contactable or expressive. His mother was emotionally remote especially with him. At the same time she was "histrionic" in the expression

of her own emotions.

Joseph enjoyed his work and in fact spent long hours working to avoid being at home and at the demands of his wife. He was curious about the body oriented work and fairly convinced that it would not assist him in any way. He said "*I am a hard nut to crack*" and there was a sense of pleasure as well as pain in this statement.

Working With Resistance

Despite Joseph's presenting problem, the early sessions did not directly focus on his experience or expression of emotions. Joseph had reported spending a lot of time and energy resisting his wife who wanted just this form of expression. Dick Olney, a bioenergetic therapist, used to say that "*Resistance is the client's best thrust towards autonomy*", (Olney 1987). This seemed very true for Joseph. I chose as a first step to work directly with this resistance as it was expressed in his body.

In Morenian role theory we would say that Joseph's role in resisting his wife is a form of coping. Clearly it had once served him in some fundamental way to preserve his autonomy in the face of unreasonable demands. At that time it would have been progressive and expressed his spontaneity rather than what was now appearing as a stuck habit. If he got to know the nature of his resistance there would be the possibility of reclaiming the spontaneity that was originally there.

Early Sessions - Mirroring

Joseph had so little sense of self and such resistance that doubling was not effective. He had no idea if what I was saying and doing connected to him or not. To be obliging he would accept it but did not relate it to any internal experience. Joseph's behaviour had often been subject to interpretation. Firstly by his mother and later by his wife. Often he experienced this

interpretation as negative - they provided a negative mirror for him. The only way he knew how to oppose this interpretation and assert his autonomy was to go stupid, not know what he felt, become over accommodating. This reinforced his disengagement from his body.

So in early sessions, I began working with his resistance by mirroring what he was doing with different parts of his body, non judgmentally bringing it to his awareness. I drew his attention to lots of physical aspects about his body. How his jaw didn't move much when he talked, that his toes curled up when he tried to hold himself upright, that his chest didn't move when he breathed, that his head felt heavy when he relaxed, that his hands felt warm, that he ran out of steam when he ran and later that he spoke of emotional things with little affect.

Being largely unaware of his body sensations, posture and experience made Joseph acutely anxious. He thought if he relaxed some disaster would happen so he had to keep it restricted and tight. His body armoring was restricting his potential for spontaneity. In Morenian terms spontaneity and anxiety are inversely related - the more of one means the less of the other. In Radix terms limited self awareness often begins with limited body awareness. This left him open to others imposing their interpretation of him, as he had no information to counteract this.

No Sense It Should Be Different

There was no sense that the extent of his body awareness should be different. Rather it was an observation of 'what is'. This therapeutic stance is important in my practice. Radix is closely aligned with the fundamental Morenian principle that the protagonist writes the script for the work. It is process oriented.

From observing 'what is' the client can then get to know the nature of his or her own warm up.

In Joseph's case he had never had permission to do this.

Focusing on the body in this way gave Joseph simple insights into his own functioning and gave him some easy and concrete ways of changing his experience of himself when alone and in interaction with others. He found focusing on his body in this way intrinsically fascinating and non threatening and yet it enabled moments of spontaneity. For example, he discovered that if he dropped his chin a little, he felt emotionally more present and he noted that others responded back with more warmth. The simplicity of this delighted him. He felt in charge. He was getting to know his own warm up and bypassing old habitual patterns that kept him stuck and alone.

Getting To Know His Own Warm Up - Eye Contact

As sessions progressed, it became obvious that Joseph found making eye contact very difficult at any distance. He would look at me but he reported that he wasn't in the present. Rather he would be ruminating over events of the day or the last week or anticipating what he might say or do next. Sometimes he would simply focus on the mechanics of his breathing.

I would encourage him to keep his eyes closed and only open them when he really wanted to make eye contact. At first he struggled with this notion. He didn't know how to judge when he wanted contact or not. He was used to having others dictate when and how to do this. Gradually over sessions, he began to sense what it felt like to have this impulse come from an internal rather than external source. Mostly he indicated this by reporting events at work where he had felt he really wanted to look and engage with someone. When he did this he found that nothing bad happened to him.

A Moment of Spontaneity

In the middle of a session, eight months after he started seeing me, he spontaneously said, “*I want to make eye contact with you.*” His whole face, including his eyes, were soft and present. He shared that there had been several moments in an increasing number of sessions where he had wanted to make this contact but had stopped himself. His eyes teared a little. He shared that he wanted to have contact and cry when he wanted to, not when I wanted him too. I agreed that it was important that the impulse came from him and encouraged him not so much to focus on crying but to get to know how he resists doing so and to enjoy the resistance. Again he would get to know his own warm up before focusing on his goal.

He then said that his relationship with me mattered to him and that he realised that I was not his wife or mother and that I really didn't seem invested in how he responded. That all his life he felt he could only be loved if he achieved or did what others wanted from him. That he was getting a glimpse that this may not be so. He was in the role of *insightful self revealer*. Bringing this role into relationship with a trusted other meant that Joseph was beginning to repair his social atom.

Working with the body also strengthened his trust in his body to support him and therefore his autonomy. This was a significant element of our work.

Trusting His Legs

As I continued to actively focus on his entrenched stance of resistance, it seemed important to build his capacity to support himself better with his legs and feet. This would enable him to let go of the tension in his neck and in turn would bring more life to his eyes and possible engagement with the world. Joseph has a surplus amount of energy in his head. He

would often try and spend sessions asking somewhat interesting questions which would on the surface appear to be building our relationship but which in practice would shift the focus from his ongoing process and ‘real’ relating. He had an overdeveloped coping role of the *quizzical enquirer*. Later in sessions when he was disclosing more, he would joke about how frustrated he felt that I wouldn't be seduced by this role.

Redistributing the energy in his body from his head to his feet seemed a good way to get him ‘out of his head’. Initially he did lots of curls and uncurls. Basically this meant having him stand with his knees bent and his weight distributed evenly on his feet. Then as he breathed out he would slowly drop forward letting the weight of his head stretch and curl his back till his wrists were level with his knees. He would hang there for a few breaths and then uncurl letting his inbreath slowly uncurl his back up to an upright position.

When he first started doing this exercise he would fall over. His toes would tense as if clutching the floor, his ankles tighten and he would lock his knees to try and feel support. Instead of his head hanging loose like an apple on a string, his neck would be parallel to the floor. To assist him to let his neck relax, I began to hold his head and encouraged him to give me the its weight whilst still holding himself up with his legs and feet. He took this exercise home and would practice it at work and home. Gradually he was able to trust his legs to hold him up and at the same time let go of his neck.

Whenever he did the exercise at home his wife would say that he looked younger. He also noticed that if he did this exercise his anxiety reduced. He began to do it before work meetings where he was required to speak publicly. In the past when speaking publicly, his hands used to

shake and he would almost pass out. If he did the curl, he found that he could be more present and not shake so much. He was relearning how to be in his body and be supported by it. He was becoming a *confident embodied presenter*.

Vigorous Movements

Later, we did more vigorous activity with his legs and feet. Lots of lying on his back and pushing into mats with his feet. Kicking hard into mats. He found that when he did these things his head stopped spinning with thoughts and the intensity of his thinking reduced. He began to enjoy the movement and the developing strength of his legs.

Original Social Atom

As we worked through his resistant, coping stances, his progressive roles emerged more often. At this point he also brought forward his experience of his fragmenting roles, albeit in a manageable way. Joseph began to talk of the terrifying dreams which he had nightly. Some of these centered around his fears that he had mentioned briefly in passing, quite early on in sessions. Being alone and abandoned and not knowing how to look after himself. He now talked about these with more affect and with more emphasis. More often he shared about his terror of being destroyed, especially by his mother who he recalled as displaying an incomprehensible wrath towards him from a very early age. In psychodramatic terms, he brought out the central role relationship in his original social atom where he was the *bewildered terrified child* at the mercy of a *furious mother*. Initially it was enough that he was able to stay in his body while he reconnected with his past. Later this dynamic was explored verbally.

Different Rhythmic Paces

Working in the ways described above, Joseph shifted his habitual patterns of warm up to himself and to others in his life, except probably

his wife. As this work progressed and his trust in me and his own process developed, we began working more directly to shift his emotional stuckness so as to deepen his growing aliveness and spontaneity. This was the most challenging aspect of our work together.

One of the ways he maintained his emotional stuckness was to keep his energy rhythm at a fixed, monotonous pace so he did not experience much intensity in his body. We worked to interrupt his ability to keep his energy monotic by having him do activities at different rhythmic paces. This approach is familiar in psychodrama groups to bring group members into their bodies and awaken their flow of energy and access to spontaneity.

I began by having him roll his head from side to side on the mat. Once he was accustomed to doing this, I instructed him to quicken or slow down the pace of the rolling. He initially found this very confusing and disorienting. Eventually he accomplished it. Later he added moving his arms and legs. He would run out of steam fairly quickly. Watching his breathing indicated that he was holding onto his exhale. That meant he couldn't breathe in fully as his lungs never emptied enough. So we started to play with sound as a way of assisting him to breathe out. This process then highlighted his tight jaw and throat. After working with biting and moving his jaw he was able to make good loud sounds.

After one of these sessions he reported that for the first time in his life he was able to shout. He had shouted across an oval at some kids who were into mischief and they had stopped their activity and ran away. He couldn't believe he had had the power to accomplish this. As his jaw loosened he was also able to breathe into his chest more and this resulted in him feeling much more energised at the end of sessions.

Embodying His Voice

Then he had a session where I suggested he shout out 'no' as he hit and kicked and rolled his head. A tantrum-like action. I wanted him to have the experience of his whole body being congruent and engaged in the activity. Not just his head. He was able to do this and stay very present and assertive in his eyes. His eyes had the look of 'don't mess with me'. He could feel the power of this and also the energy in his arms and legs. This was the first time that I had a strong experience that someone was 'home' - embodied and engaged. Joseph was thrilled. Then, five minutes later, his head started to spin. I grounded it by placing my hands on his forehead and the back of his neck and holding both firmly. He then started sharing how much he had wanted his father to be there for him and to stand up to his mother. His father had been so unavailable and absent. He had tears in his eyes. Again the work of reclaiming his body and allowing him to get to know his own warm up brought Joseph back into some congruence. While he is experiencing the feelings of a *hungry vulnerable child* he is able to stay in relationship and allow himself to experience what it means.

Connecting To Anger

A couple of sessions later, he arrived and looked at me directly and said he had been so looking forward to seeing me. He had been beside himself all week. It was the first time that he had really wanted to come to the session. He then talked of his wife attempting to kill herself that week with a kitchen knife. He shared how terrified he had been and he reported that she had done this off and on all their married life. She had sworn him to secrecy and he had worked very hard to protect their children from ever witnessing these scenes. He shared what a burden it had been bearing this all his life and how he was exhausted. That week he had decided that he had to tell someone and unburden himself. Gradually he began to

connect to his anger about this secrecy.

This led to some sessions where we discussed how he keeps himself isolated and others at a distance. During one of these, I had him sit with his back against a mattress and to hit out with his arms and say "I won't let you get close to me". As he did this he was again congruent right through his body. He felt strong and alive. He was really excited that he had been able to achieve this. Then he shared that this dynamic was the crux of the matter. It felt like a battle for survival. He had to keep others at bay or he would be crushed. In the next session I continued this theme. Encouraging him to hit out with his arms at a mattress placed behind him and shout, "Back off." "Give me space" "No way will I give in and be affectionate". In this way we concretized his feelings of anger and he experienced what it felt like to express it in a safe environment. He talked of resistance as the only way he knew how to be strong and the pain and loneliness of being like this. His eyes teared and he almost sobbed again. The next week he came and said that in his session with his verbal therapist he had cried deeply.

A month or so later, he reported that he could now feel his body from the inside. I had him kick and hit till he had to gasp in air. He had never breathed that deeply before. He said this felt challenging but good. The next month he left his wife.

Reflection

When my work with Joseph commenced I was most struck by the predominance of coping roles. In the Radix system, Joseph would be seen as blocking a lot of pain so on reflection the degree of coping roles was not that unusual. The blocking of emotional pain fits with the initial impression of stuckness in his physical body, his emotional expressiveness and his cognitive functioning. Life for Joseph was about getting

by without being too disruptive in any shape or form. In the early stages of therapy, it was not so easy to see his progressive roles as he was too fixed on 'being who he thinks he should be'. It took quite a bit of time before these began to emerge. By the end of a year's work, the *curious self explorer*, the *naive boy scout*, and the *delighted discoverer* were probably most well developed. The others were definitely developing but at the best of times their presence was fleeting.

What particularly struck me was how long it took for his fragmenting roles to really be revealed. He mentioned one or two very quickly at the beginning and then did not disclose them again until we had built a much more trusting relationship. Only when the deeper level of trust was established did he feel safe enough to share these roles especially when sworn to secrecy about his wife's suicide attempts. By the end of the year, particularly with his decision to separate from his wife, his sense of hopelessness was diminished. With more sense of self, there was also a diminishing of the *sarcastic destroyer*.

Psychologically and emotionally, Joseph was developmentally quite young. With very young infants, the sense of self, the development of emotional and psychological boundaries and the subsequent ability to centre and relax occurs by the caretaker actually providing physical support and touch. For example when he began to spin out after being angry, Joseph responded very well to me holding his neck and his head very firmly whilst reassuring him that all was ok. He needed more than cognitive reassurance at this point. As time progressed and he became conscious that connecting to his body gave him a sense of knowing himself, of greater control over how he presented to others and the quality of this presentation, he felt more of his inner strength and was able to relax and so his spontaneity increased. Connecting to his body reawakened the congruence between his

thought, feeling and action.

Conclusion

In writing this paper I have brought some of my Radix practice together with aspects of psychodramatic thinking. While each gives a different starting point and focus there is considerable overlap in the process of healing. The body is central to how we live and is great source of therapeutic data and insight. It is a key element of how a person orients to life. Noticing a person's physical posture, energy flow and tone enhances the ability to reverse roles with them and understand their warm up. For psychodramatists interested in paying more attention to the body the following questions are a starting point for training their perception about a client's orientation to life.

- *Are they embodied? Do you have a sense that they are really 'inhabiting' their physical body?*
- *Are there some parts of their body that has a sense of not quite fitting?*
- *Where is the life energy visible? In their eyes, their chest, their legs?*
- *Is it pulsating/flowing or stuck?*
- *How do they keep it stuck? By not taking in touch, support offered, by holding back expression, by keeping everything moderated?*

References

Olney D (1987), *The Bioenergetic Tapes*, Green People Productions Inc. Catati, California USA.

Footnote

1. Radix means root or source and here refers to the energy flow underlying body, mind and spirit. Radix practitioners work with clients to restore the rhythmic flow of the radix throughout the body - both on its inward movement, enhancing self contact and its outward movement, enhancing contact with others. In doing so clients discover experientially how the body unconsciously participates in how they think, feel and act'.





The Psychodramatist

Mike Consedine

The face is older now,
thinner,
more clearly defined
by the years.
The body is leaner
yet still strong.
The breath rasps
where once it flowed
easily
and the legs
sometimes ache
when the path
is steep.
Life lived
now defines
the body
yet the will
remains strong.

And so he continues
to bring life:
he concretizes
so that all aspects
are clearly present;
he maximizes
that all may feel
the strength of their passion;
he produces
that all may appreciate
the fullness of each life.
Fortunate are those
who are touched
by his love.

19th February 2005

Written for Max
to recognize him
and to celebrate his 70th Birthday.



A General Theory of Love (and) The Neuroscience of Psychotherapy

- T Lewis, F Amini and R Lannon

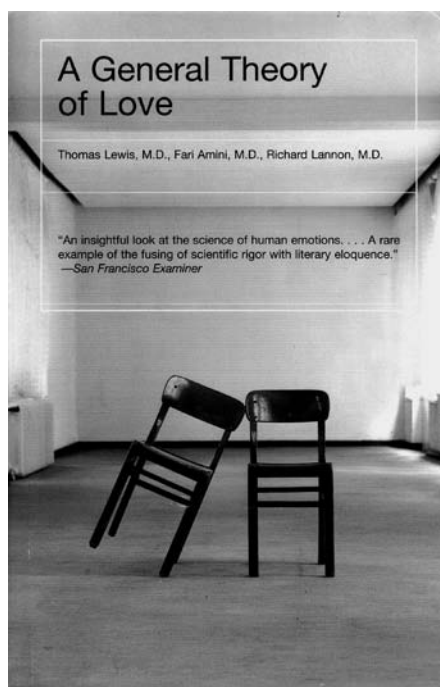
- Louis Cozolino

reviewed by Judy Broom

What a privilege, to be asked to read two good books in order to review them. Both of these books are rewarding. They are written in distinctly different styles, and neither is aimed particularly at psychodramatists, but they offer much to a thoughtful reader.

The authors of *A General Theory of Love* describe how their book was born out of the relationship between the three of them, hatched over breakfast meetings in California. I can almost see them waving their muffins in the air and shedding crumbs into their orange juice as they debate the finer points of neuroanatomy, and the power of human relationships. This is a very human book. It is a book about science and love, about the anatomy of brains and how they are shaped by relationships, and about why and how psychotherapy works. The authors build up their arguments piece by piece, leading the reader through the basic structure of brains, principles of memory and learning, properties of neural networks, and the impact of relationships on growth, development and living. They finish with a tantalising three chapters on healing and therapy that left me excited and engaged, but also wishing for more.

The book is aimed at a wide audience, and would probably not satisfy those who were

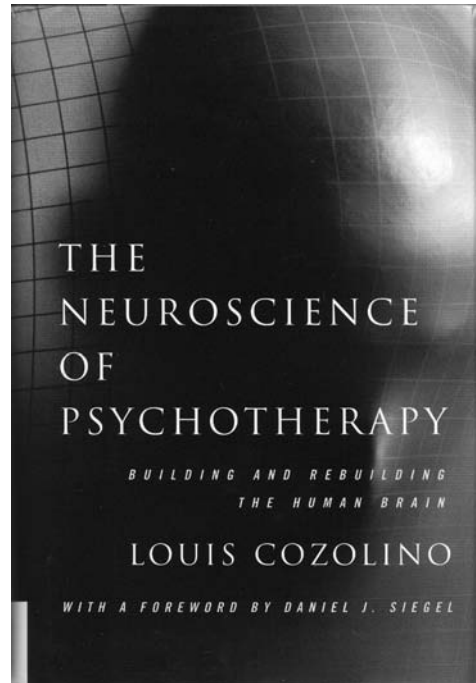


wanting a detailed scientific treatise. However, it is well referenced, and the interested reader can easily follow up their curiosity and delve into the scientific literature. The book is written in a poetic style - quite in keeping with the authors' premise that emotional connection is fundamentally important for any significant learning or change. Some people will find this a little over the top - lines like "*Humanity awaits the revelations that may glint through that open portal*" do take a little swallowing at times. But overall I found it delightful, full of passion and liberally sprinkled with whimsical little gems

like: “*insight is the popcorn of therapy*”. (I think I should frame that and hang it on my wall.)

So what does this book have to do with psychodrama? I think this is a book anyone could enjoy, but it spoke particularly to me about why it is that I am a psychodrama trainee and not a Freudian. It speaks about why passion and feelings are so important in our lives, and why social connection is so vital. Sociometry is the cornerstone of Moreno’s thinking: *A General Theory of Love* comes to some of the same conclusions from a completely different angle - arguing from biological and psychological principles that people need to be connected up, and that the quality of those connections both reflects who we have been and who we are, and influences who we will be. For example in Chapter 7, drawing from research on attachment by Bowlby and later writers, the authors essentially set out the value of doubling and mirroring. The ideas in the book support the co-created nature of identity, the immense value of groups for people, and the power of shared events that are full of feeling and beauty to bring about constructive change. It’s not a long book, my copy is only 230 pages, and it is easy to read. If you are at all curious about modern neuroscience and psychology, start here, read this book. I guarantee something will pique your interest.

The Neuroscience of Psychotherapy, as its title suggests, is a little more traditional in style, and in many way launches in where *A General Theory* leaves off. The author, Louis Cozolino, is a Clinical Psychologist and Professor of Psychology at Pepperdine University in the US, and according to his website holds degrees in theology and philosophy as well as in psychology. The book is part of *The Norton Series on Interpersonal Neurobiology*, edited by Daniel Siegel.



This book is a more detailed and less poetic book, and specifically addresses psychotherapy as a means of altering brain function. The author covers a lot of ground, including neural networks, brain anatomy, neurotransmitters, evolution, memory and attachment. The book is structured differently from that of Lewis *et al.* in that Cozolino provides clinical vignettes throughout linking successful interventions with hypotheses about what might be going on in the brains of his clients.

In Chapter 3 he surveys several schools of psychotherapy and how the elements of their ways of working may relate to neural development and change. Sadly psychodrama is not among them. This is not so surprising. Psychodrama is still not well known or appreciated in either the medically oriented or the psychodynamically oriented communities. We remain a little outside the mainstream, on the whole. It seems to me that in part this is because we have not managed as a community

to articulate a well-defined explanation of why psychodrama works, in language that can appeal to those outside the discipline. (Whether the narratives articulated by other, more widely accepted schools are truly explanatory is a moot point.)

I was very excited by Cozolino's book, and also felt quite tantalised. I was excited because many of the ideas articulated here are directly applicable to psychodrama. Cozolino views psychotherapy as the provision of an enriched environment within which the individual can increase their integration. Simply, psychotherapy works to change brain function. He emphasises the importance of narrative in shaping our view of ourselves and our world, and the need to have both thinking and feeling active together, or in rapid sequence, in order for change to be effective.

Consider this little story. A woman stands on stage, facing an auxiliary in the role of her overbearing father. She is accompanied by another auxiliary, doubling her. She is frozen and fearful. Reversing roles with the double, she unfreezes, and is able to comfort her scared self with a touch and a few words. Back in her initial role, she is able to articulate, perhaps for the first time in her life, a point of view that differs from that of her father. In psychodrama terms, a new role is emerging.

In Cozolino's terms, the protagonist has experienced a 'safe emergency' within the enriched environment of the psychodrama group. She has experienced enough stress to make her ready to learn effectively, but not so much as to immobilise her and cause further

dissociation of functioning. She has experienced herself both feeling intensely and thinking, in relation to a situation that in the past has resulted in overwhelming feeling. Integration has been promoted.

In every psychodrama group, something like this happens.

This early part of the 21st century is a time of great opportunity for psychodrama. The paradigms on which psychotherapy has been based are changing. Moreno was ahead of his time - neuroscience is now catching up. Warm up, the importance of sociometry, the value of role reversal and of the full expression of roles are all represented here in this book, under different names. The challenge to us all is to take psychodrama into the new century. We should be ready to translate our concepts into language that will allow others to warm up to psychodrama as an effective and intelligent method of promoting personal change. The Therapeutic Spiral method goes some way along this path, but there is much more to do. I recommend *The Neuroscience of Psychotherapy* to anyone who is interested in either field, and look forward one day to reading *The Neuroscience of Psychodrama*. I wonder among us who will write it?

A General Theory of Love by Thomas Lewis, Fari Amini and Richard Lannon was published in 2000 by Random House, New York.

The Neuroscience of Psychotherapy - Building and Rebuilding the Human Brain by Louis Cozolino was published in 2003 by W W Norton & Company, New York.



Trauma and Addiction

Ending the Cycle of Pain Through Emotional Literacy - Tian Dayton

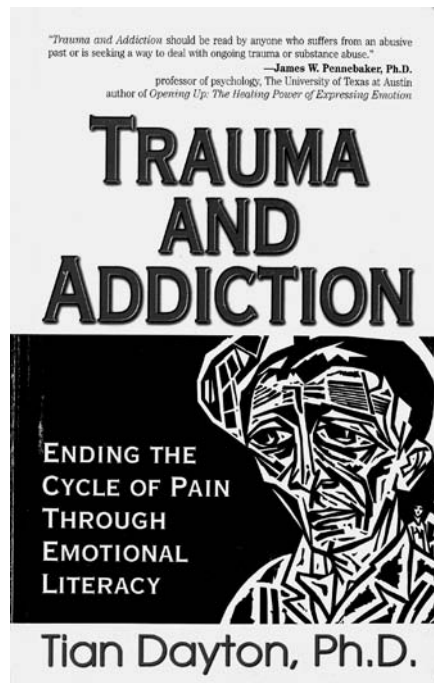
Reviewed by Phillip Corbett

Tian Dayton, who openly shares with us the pain of having grown up as the child of an alcoholic father, is a clinical psychologist and psychodramatist, highly regarded in the United States for her knowledge and experience in the field of addictive behaviours. She is the Director of Program Development and Staff Training at the Caron Foundation, a comprehensive addiction treatment facility in Pennsylvania.

"This is a book about relationship trauma, about the internal earthquake or loss of solid psychological or emotional ground that happens when people you love and need in order to feel secure in the world are lost in their addictions, psychological illnesses or addictive behaviours, when the relationships you depend upon for survival are ruptured." [p xv]

Her book is liberally sprinkled throughout with the findings and theories of a great many researchers into the areas of human psychology, emotional adaptation, trauma and addiction, starting with the earliest contributions by Darwin and Freud, right through to the work of neurobiologists and psychologists of recent years.

At the core of her argument is the observation that untreated and unresolved childhood trauma is a primary cause of addiction and relapse. She contends that addiction cannot be



lastingly and effectively treated without addressing these underlying trauma issues. The trauma may have taken many forms and Dayton draws on a large number of actual case histories from her patient files to document the lasting effects of childhood trauma, including sexual and emotional abuse, death of a parent or sibling, mental illness of a parent or the all too common, often generational damage from being raised in a home environment already ravaged by addiction and substance abuse.

Dayton presents an exhaustive review of the

ongoing effects of such trauma from psychological, emotional, somatic and social perspectives.

At the somatic level we learn from researchers including Bessel Van der Kolk and Candice Pert how trauma can affect the brain and body much more than was previously understood. Memories of traumatic experience often become dissociated from conscious awareness and are stored at more basic levels of the brain such as in the limbic system affecting mood or in regions of the hindbrain controlling primitive fight/flight responses. This leads to a somatization of the traumatic memory that in turn leads to visceral symptoms associated with anxiety and panic or that triggers invasive visual images such as flashbacks or nightmares.

Candice Pert and other bio-neurologists assert that traumatic memories are stored at an even more fundamental level as a 'cellular memory' in the organs and soft tissues, specifically involving the neurotransmitter receptors on the cell walls.

Dayton immediately draws a link with Moreno's prescient observation that "*the body remembers what the mind forgets*" and notes that psychodrama, with its emphasis on movement and expression through the body provides a natural and immediate access to these memories. It is not surprising then that when we act out rather than talk out situations from our lives, the recollection of memories can occur more spontaneously and completely.

At the level of the emotions, the repression of painful memories of past traumatic experience largely outside the reach of conscious awareness mentioned above results in these persistent unconscious elements from the past sabotaging the adult individual's ability to respond adequately and appropriately to present day

situations in their life. This has a potentially huge effect on the ability to express emotion and on the development of functional personality.

Dayton lists and illustrates examples of a number of maladaptive behaviours that result including learned helplessness, anxiety, depression, emotional constriction and numbness, distorted reasoning, inability to form healthy relationships, loss of trust and faith and loss of spontaneity.

Clearly these are very unpleasant states to find oneself in and it is hardly surprising that the person is strongly tempted to turn to a variety of dysfunctional behaviours to attempt to ward off and escape from the emotional and psychological pain they are experiencing. Such behaviours may include the quick fix of self-medicating with drugs or alcohol or engaging in high risk or high intensity activities such as risky sex, gambling or excessive work. Others turn to behavioural addictions such as excessive sex or eating disorders including bingeing and purging.

These behaviours have in common that they activate the pleasure centers of the brain, enhancing the release of 'feel good' chemicals such as neurotransmitters dopamine and serotonin, thus providing relief from pain for a period of time. Unfortunately, the unresolved pain inevitably returns and the cycle of relief through drugs, alcohol, food or sex repeats, leading eventually to the point where dependence and true addiction sets in. The destructive nature of the addictive lifestyle itself then contributes to further damage to the person's emotional and psychological well being as well as to a deterioration of social relationships.

Most seriously, though, during this whole process the person is moving no closer, in fact is

moving further away from being able to address the underlying cause of the present distress, namely the unresolved effect of past trauma.

At this point there is a stark choice. Either continue the destructive cycle of self-medication, escape and denial or engage in the difficult process of recovery.

There is no doubt that the first steps on this new path are extremely difficult and challenging because once the brave step is taken to set aside the addictive substance or behaviour, then the real struggle begins. At that time the old wounds and pain resurface with no recourse to the quick fix of relief. Now is a time of great need for appropriate supportive intervention.

This time, as the painful old feelings are allowed to arise, in the supportive and safe space of therapy, the original traumatic experience can be revisited, re-examined and re-understood in a new light and then reintegrated into the adult personality.

The recovering individual embarks on the stages of healing which from Dayton's experience in one shape or another take the following course :

- i) Telling the story and bearing witness to the trauma.
- ii) Accepting support and caring from others.
- iii) Linking current behaviour with the original wound or trauma. Separating the past from the present.
- iv) Creating a new narrative and re-investing freed energy into constructive living.

It is immediately apparent to a psychodramatist that there is a striking resemblance between these four stages of healing with the processes of a psychodramatic enactment and Dayton makes a strong case for the effectiveness of psychodrama in the recovery process.

The end result of this path of recovery is the development of emotional literacy which Dayton defines as "*the ability to convert feelings into words, to decode our inner world through the use of words.*" This is a process of bringing consciousness to our inner world.

Dayton makes the important point that taking the first difficult steps to emotional literacy can be assisted by experiential approaches such as psychodrama which offer alternative ways for clients to connect with and bring out repressed memories of abuse and trauma stored in the brain and body that may otherwise be difficult to access or talk about in words.

She describes various other useful experiential approaches such as journaling, letter writing, use of old photos, drawing up trauma time-lines and social atom diagrams to help with conscious recall and re-examination of previous traumatic experience. The material that arises from this work in turn provides more opportunities for psychodramatic exploration.

Dayton enumerates the particular strengths psychodrama has in assisting the recovery process this includes encouraging role reversal and mirroring to gain a new perspective on old hurts. Psychodrama also addresses the original ruptures in relationship by rebuilding relationships with self and others and by the re-empowerment that arises from the protagonist centred opportunity to rewrite their own script for a new approach to life. She draws on Zerka Moreno's observation that, "*Psychodrama puts the client in touch with their own inner healer.*"

Throughout, Dayton never promises an easy ride to recovery and the comprehensive prescription she recommends and details shows that the process is by no means a simple or easy one. She includes one on one therapy, group therapy, medication where appropriate, 12 step

programs, psychodrama, spiritual path, integration with the family and physical self-care.

However, for those willing to commit to the work, with appropriate support and guidance, often over a period of from five to eight years, she holds out good prospects of ultimate recovery based on her own track record of success in both private practice and with the Caron Foundation.

Anyone who hopes to gain greater insight into overcoming the effects of trauma and resultant addiction on their own lives or anyone working to assist these people on their difficult journey, will find much wisdom and hope in the pages of this book.

Trauma and Addiction, Ending the Cycle of Pain Through Emotional Literacy by Tian Dayton, Ph.D., TEP was published in 2000 by Health Communications Inc, Florida.



Psychodrama in the 21st Century

Clinical and Educational Applications - edited by Jacob Gershoni

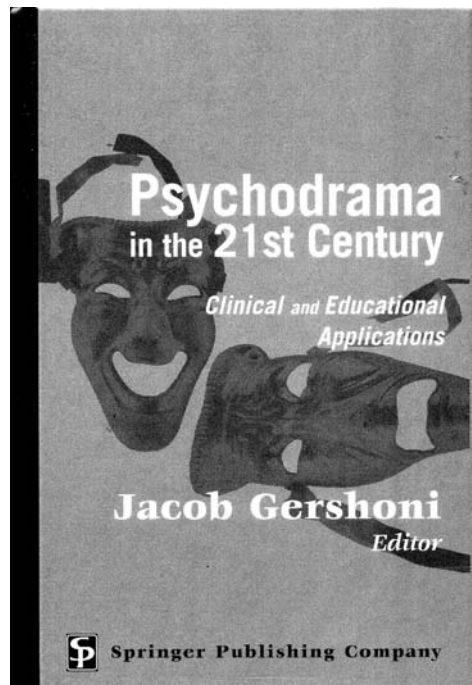
Reviewed by Kate Hill

At last a book that gives psychodrama its rightful place in the world of psychotherapy, education and the arts. It concretises the way that elements of psychodrama, such as role playing, have become mainstream and illustrates the efficacy of these techniques in training a wide spectrum of professionals. In the forward Robert Siroka points out that *"Moreno's original ideas - directly or indirectly, consciously or unconsciously - influenced the contemporary psychotherapeutic scene"*.

The book consists of three parts: Psychodrama and Other Methods; Applications with Various Groups; and Applications in Training and Consultation. The book can be picked up and read chapter by chapter and is a great reference for specific areas of interest.

In Part 1, the triad approach is emphasised in many of the chapters. This approach sees sociometry, psychodrama and group psychotherapy as three interdependent aspects in a triadic theoretical system. Louise Lipman gives a very readable chapter focusing on sociometry through the process of the psychodrama session. This would be useful for trainees who wonder where sociometry fits into the larger picture.

Sandra Garfield demonstrates the integration of psychodrama and psychoanalysis bringing



new literature to the realm of psychodrama from the French school. Back in the late 1980's I attended the AGPP conference where Sandra ran a wonderful session combining the two schools using video to process the sessions. It was great to see the theoretical background to this session two decades later. I recall thinking at that time how many psychodramatists had trained in other areas and then were in the process of integrating the two. Rumour had it that after Moreno's death his students were free to use the method in a variety of ways. This book demonstrates their work: Chris

Farmer with family therapy and psychodrama, Jean Peterson with art therapy and psychodrama and Mary Anne Carswell and Kristi Magraw with 'The Body Talks'. This book fills the gap in placing psychodrama in the mainstream.

Part 2 demonstrates the application of psychodrama to specific areas including children, adolescents, couples, gay communities, veterans and trauma. Tian Dayton gives great explanation of the use of the social atom in the healing process of women with addictions. Many exercises are included which demonstrates the application of the theory to practice. Adam Blatner's passion for making psychodrama an everyday tool is illustrated in his chapter. These chapters are a valuable resource for practitioners and include case studies, exercises and outcomes.

In Part 3, the application of psychodrama to experiential education, legal and medical training brings hope to Moreno's words that "*we cannot have less of a vision that the whole of mankind*".

This book takes you on a journey to all areas of personal and professional development using the psychodramatic method and giving it a place in the theoretical dissertations of psychoanalysis, art therapy, education, and working with specific populations. It is also valuable in bringing a new perspective on Moreno's theory. While many psychodramatists baulk at reading the theory, possibly because of Moreno's style of writing, this book enables the reader to browse, take in, review and integrate his theory. Each time I read another psychodramatist's interpretation of Morenian theory I re-evaluate my own interpretation.

This book certainly lives up to its title - Psychodrama in the 21st century. I'd encourage both practitioners and trainees to get this book and read and reread it and then discuss it. It is a good step forward for psychodrama at a time when we are wondering about its relevance.

Psychodrama in the 21st Century - Clinical and Educational Applications edited by Jacob Gershoni was published in 2003 by Springer Publishing Company Inc, New York.







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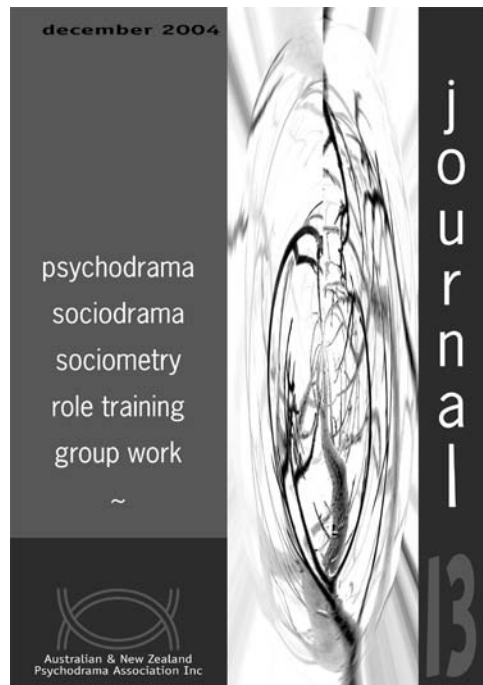
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Editor, ANZPA Journal
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Call for Papers

Guidelines for Contributors



Purpose of the Journal

The purposes of ANZPA include professional association with one another; the setting and maintaining of standards; and establishing and promoting the reputation of this method. The Journal aims to fulfil 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.

Journal Articles

For example, articles may explore the application of the method to a particular field, social system or population; examine underlying theoretical principles and philosophy; or explore what psychodrama has to offer and can learn from other approaches to human relations and psychotherapy. Articles typically include case examples or research from the writer's professional experience and practice. In addition, reviews of recent publications about psychodrama, sociodrama, sociometry, role training and group work are published.

Contributors

Contributors to the Journal include members and associate members of the Association and trainees in ANZPA training institutes.

Length of Articles

There is no pre-defined length for articles, which usually range from between 2,000 words and 10,000 words.

Publication Elsewhere

Articles are accepted for the Journal on the understanding that the same work has not been and will not be published - nor is presently submitted - elsewhere.

Material Awaiting Certification

It is not acceptable to present written work for publication in the Journal which is currently being supervised or examined as part of ANZPA's certification process. Once papers and theses are passed contributors are welcome to present them in whole or in part for publication in the Journal.

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References

References made to other authors in the article should be indicated by including the author's name and the date of their publication (Moreno: 1953) in the text. Full publication details should be included in a list of references at the end of the article. For example:

Hale A E (1985), *Conducting Clinical Sociometric Explorations - A Manual for Psychodramatists and Sociometrists*, Royal Publishing Company, Roanoke, Virginia.

References from the Internet should include the full address and date they were accessed.

Tables, Diagrams and Illustrations

Contributors are welcome to include tables, diagrams and other illustrations within their article.

Editing

Articles usually require some editing to ensure readability and a fit with the style of the Journal. This is done in consultation with the contributor.

Presentation of Articles

Articles can be accepted at any time during the year. To be considered for publication in December of each year they must be received by September 30 of that year. This ensures there is adequate time for editing and for an editorial dialogue with the contributor.

Contributors are encouraged to contact the Editor to advise of their plans to present an article and to discuss any questions they have as they start or as they develop their article.

Articles should be sent as an email attachment.

Copies

Each contributor receives two copies of the issue in which their article is published.

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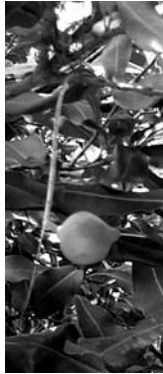
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