

## WARMING UP PROTAGONIST AND AUXILIARIES

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### I. WARMING UP OF PROTAGONISTS AND GROUP TO PROTAGONISTS:

Often protagonists will be warmed up by the group interaction and can go to the stage directly from their chair. This can be aided by beginning to focus on (by questions and use of a double), a patient during the floor discussion. Other ways to warm up a protagonist are:

1. As you focus on a protagonist, offer a hand or take his hand and lead him to the steps of the stage. Continue your warm-up with your protagonist sitting beside you before the group. Often such questions as age, where from, or names of persons referred to (their ages or description of physical appearance, etc.), can lead to a gradual and increased warm-up. Do not let your patient describe in any detail what he is going to stage because this lessens the scene's power. Get other information that is related and when you are ready to move him on stage, do so by raising with him. Get him on stage and have him describe and set up the scene. Get colors, textures, furniture arrangements, etc. This increases warm-up involvement as well as concretizes the scene to make it more vivid to the rest of the group. It is well worth the effort and takes only a short time longer. The patient, by his activity in arranging the chairs, will be more ready for action also.
2. The Director may aid warm-up to a scene, even if the patient resists describing the room by questions and reactions. "What color are the drapes?" Pt.: "Red." Dir.: "Boy, they are really red!" "Nice texture too!" or some comment to stimulate imagery. He may ask the group if they like that shade of color of the couch, etc. It is amazing how these little enthusiasms by the director can increase group involvement prior to any action at all.
3. You may start your scene on the floor with roles being taken from the chairs and then move to the stage as involvement increases.
4. A soliloquy with a double by the protagonist (or possible protagonists) also increases warm-up of patients and aids you in choice of action (and protagonist).
5. Sometimes you may ask your protagonist to take the auxiliaries off and brief them for a few seconds. While this is going on, you should be maintaining group involvement.

- . Sometimes there is a need to validate a warm up. The patient or auxiliary can be asked questions that will reveal whether he is in role or not. The warm up can come (a) indirectly from the patient (b) at the reaction of the auxiliary to ongoing activity of the group (c) suggestive procedures from the patient (d) suggestive procedures from the director (e) suggestions from the auxiliary himself. But you may need to test the extent of the warm up. This can be done by getting the auxiliary or patient to project and describe the roles by asking "What is your name now?" and "How old are you?", etc. If you look at an auxiliary who approaches the stage and ask "What is your name?" and he gives his own name then you know that he is not warmed up to the scene. Also, if he gives the wrong age or description or seems unsure of his role, then you need to do more work in helping him enter the role before the action begins.
7. Sometimes when a patient is talking about the scene an auxiliary can spontaneously enter into role playing with the patient picking up on the cues that have been given. No invitation is extended to the patient to do a scene or be a protagonist as it is anticipated that they will resist it but, rather, a scene is spontaneously entered into for as long as the patient will hold it, from the materials that the person is discussing. For example, they are talking about what their mother said to them and how they felt and then the auxiliary enters and talks as though she is the mother or role-plays the mother.
8. Moreno has a monograph on working with the withdrawn psychotic patient. This includes assignment of the auxiliary ego to thoroughly learn the patient's part. The auxiliary ego lives and eats with the patient, learns his case history, knows how he reacts and feels then the director may work directly with the auxiliary ego, asking, for instance, "could John Brown come from the audience" and instead of the patient, the auxiliary ego, John Brown rises. This less extensively can be done by assigning an auxiliary to a patient for one or more sessions who stays as his auxiliary.
9. Large groups (Demonstrations): In warming up a large group and to help select a protagonist in a large group, you may "spot" direct remarks to specific people. Hit all areas of the room. As you pick one out to question all in that area become alert and involved. Five well placed questions, in a friendly or humorous manner, can warm up a group as large as a hundred people. Especially good are questions such as "Do you know that fellow behind you?" "Find out his name, will you?" "And what is your name?" This gets interaction between strangers and involves those in the row behind those spoken to as well.
10. In all groups the highlight is that the Director must be concerned with getting the group started with warming up the group. In new, large groups especially, he must get them familiar with each other, get them to function in buzz groups, holding an election to determine the topic, using role playing within the large group where the entire group pairs up and role plays by itself without an audience or other methods useful for large groups. Another method is beginning stage activity with auxiliaries and substituting them as the audience becomes stimulated and involved. This is especially useful in demonstration sessions.

11. Dream Analysis Warm Up: Warm-up to dream presentation should begin by reenacting (prior to or at) bedtime. Have the person go to "sleep" on stage in his usual sleeping position. Dim the lights -- have him close his eyes and "sleep," describing his imageries and feelings. As he comes to the dream itself tell him to arise and be in the dream. Variation on the warm-up to a dream are possible but must combine his sleeping position scene with a semi-hypnotic approach: Often, especially if the dream is traumatic you may wish to close the action by returning him to his bed and waking up. This is a support without detracting from your interpretations and the significance of the session. Also, this makes the session more esthetic in its totality and provides a strong closure.

#### WARM-UPS OF AUXILIARIES:

12. Do not hesitate to call for role reversals early so your auxiliary can feel more comfortable if the role is unfamiliar. When you instruct auxiliaries before a scene starts, do not take very long, and remember with psychotics a low instruction is better than a whisper. Never go on stage and whisper with auxiliaries for any length of time when you have paranoids in the group. It seems like a plot and also loses involvement. The best warm-up can be ruined this way.
  - A. Remember that time spent warming up a protagonist or auxiliary pays off. (Remember also to warm up your group as a whole to a scene.) A good warm-up of an auxiliary and protagonist will involve your group more.
13. Warming up a person for a scene may utilize suggestive procedures, such as is used in hypnosis. Get a description of the room that the scene take place in; this may be obtained from the auxiliary as well as the patient with the auxiliary having been alert to the patient's past comments. The auxiliary may be asked to describe her clothing in role, that is, she structures some of the role herself. The therapist may say "Those clothes are not too clean are they?" or other suggestions for the auxiliary.
14. Try to choose auxiliaries who are identified with or most involved in the feelings of a patient or the situation staged, unless your goal is one that calls for less involved double. With some patients, especially those who avoid feelings, you may wish to focus on your auxiliary. After a scene, for instance, you could poll the auxiliary about what the feelings were. Some auxiliaries may have parents or problems (preferably past problems) similar to a patient's. You may use that auxiliary to warm up the patient. Example: Auxiliary as self, and patient compare fathers in a scene in canteen. Auxiliary then does brief scene to show his father. Then patient shows his and you continue to work with the patient now assigning the auxiliary as double. This has some dangers: know your auxiliary and clear this approach with him prior to doing it. Keep his scene short and remember he is not the protagonist but a warm up for the patient.
15. The best type of warm up for an auxiliary is for the Director to warm him up to a mood rather than a specific type of action.

16. Patients may be used in auxiliary roles as therapeutic maneuvers by the Director, placing the patient in a role which encourages him to project his own feelings or in a role which encourages him to role train in role behaviors in which he is deficient may be therapeutic.
17. You may at times interrupt the action to ask the double what he is feeling,
18. You may at times interrupt and go around the group having them all double their own feeling. This will involve the others more, give your auxiliary clues and indicate who in the group may need a double even though they are not in the action.
19. You may warm up a double (or other auxiliary) to some emotion such as anger by provoking it in him by the way you bring him on stage -- you may make him angry as he approaches the stage by some sarcasm or impatience, etc. to elicit the feelings the role demands. (Prepare your auxiliaries for this during their orientation so that they do not take it as a personal attack.) Auxiliaries should be instructed to pick up and repeat the shouted comment of the Director. This assures that the auxiliary has heard and understands the direction and, that the auxiliary is prepared to follow the lead of the Director. Comments shouted by the Director in this way are meant to be directions to the auxiliary and are meant to be picked up and used by him. Too often, the auxiliary will let the comments of the Director go by and return to his own simile, sometimes you can enter a scene and show the auxiliaries how to play the role, you should step out of the scene as soon as possible and the auxiliary should pick up what you have done as a direction. Too often the auxiliaries do not realize that they are the extension, the auxiliary egos of the Director as well as the patient and that they need to shift with the instruction. Of course there are ultimate loyalties as to the patient and if they feel that the Director is interfering with the patient they need to, if they are in double roles, to voice this. This, then, will give the Director opportunity to validate with the patient if this is a feeling. If it is, then the Director should shift, if it is not, then the auxiliary should shift.
20. You may interrupt a scene to poll the protagonist on his feelings as a way to help his double gain information.
21. Some directors may step into a double role for a comment or two, then step back out. This is only really necessary if you do not have auxiliaries, but can be used to stimulate or instruct a double. The double should repeat it and follow it up. Some Directors hold rigidly to the rule of never becoming involved, even for a brief comment, as a double. (If you, as director, feel strongly that you want to double, it would be best to assign another director and you become the auxiliary.)
22. Monodrama can be used to warm up an auxiliary ego. This is to say that the auxiliary in watching the protagonist play all roles begins to learn or begins to warm up to a specifically assigned role and can move in in the middle of a scene. For example, the patient is shifting back and

forth between chairs playing mother and self. Somewhere along the line an auxiliary who has been watching and preparing can take either of these parts, or indeed, two or three of them can take both parts allowing for a mirror with the patients observing what has proceeded. (Moreno uses the term monodrama to indicate that the drama takes place with one individual, or protagonist, who plays all the roles in his psychodrama.) Monodrama can be used for (A) the patient who has difficulty assuming roles -- see the section on narrating and intellectualized patient; (B) patients who are ready to take all parts. Some may be so eager to explore that others interfere with his involvements. (C) (Any other reason the Director wishes to allow the protagonist to act out his problem alone.) While shifting of chairs allows him to define and experience a change in roles, it also allows the audience and assigned auxiliary to see more clearly the role he will later argue.

23. It is often helpful to set up hand signals to instruct your auxiliaries. In any case the auxiliary should watch the Director for non-verbal signals. If they are not standardized signals, be sure they are clear as possible in meaning.
24. Make sure you do not over-use one auxiliary and neglect others, even though one may be your most effective. The others need practice to become more skilled. Also neglect of an auxiliary will lower their morale. If, for therapeutic reasons, you deliberately use one less than the others, talk with them and explain your behavior, even if it involves a criticism or personally uncomfortable situation -- let them know where you stand and try to work it out if it is a problem.
25. The Director needs to be warmed up to the session. This can be arrived at by thinking about the session, or by doing some kind of act before arriving at the session, or by his activity level at the session. (You will notice that the activity and the emotional level of the therapist can influence the direction and interest and involvement of the group.)

These are only a few suggestions for increasing your warm-up effectiveness. You might consider them as bits of information to add to your repertoire of techniques. The prime thing to remember is that your progress in later parts of the session depends on your warm up of the group as a whole and of your protagonist and auxiliaries.