

The Origins and Practice of Psychodrama

By MARTIN H. DAVIES

Summary. Psychodrama, a method of human relations training and psychotherapy, is traced from its creation by Moreno fifty years ago to its present resurgence with the growth of 'humanistic' psychology. The basic techniques are described, together with Moreno's concepts of social interaction, e.g. encounter, spontaneity, the moment, catharsis and role playing. Its uses and limitations are discussed briefly.

INTRODUCTION: THE HISTORICAL PERSPECTIVE

'Psychodrama' was the invention of one man, Jacob Levy Moreno (Greenberg, 1974). Born in Rumania in 1892, reared and educated from the age of four in Vienna, he emigrated to the USA in 1925 and after a full and active professional life as writer, teacher and therapist, died there in 1974 when, ironically, his ideas and methods, frequently relegated to the status of a minor psychiatric cult, were at last being rediscovered and acclaimed by others who, to his undisguised annoyance often failed to acknowledge any debt to his pioneering efforts in the nineteen twenties and thirties. Group dynamics, systems analysis, encounter groups, gestalt therapy and family therapy all draw upon concepts or techniques formulated and practised by Moreno, whose influence on his contemporaries can be traced from the work of Kurt Lewin, through the T-group developments of the National Training Laboratories into the current explosion of interest in sensitivity groups and other experiential approaches to human relations.

The history of psychodrama is in large part the history of its creator, a controversial figure, a man of almost hypomanic energy, an ebullient, prolific, colourful extravert, whose contributions to our understanding of human relations can probably only be dispassionately assessed now that their originator and evangelizer has himself taken his leave of us. As a young student of

philosophy, and later of medicine between 1910 and 1917, Moreno's first and persisting interest was in the world of creative thinking and action, in philosophy, religion and the arts. He edited a literary journal *Daimon*, and the importance of the 'here and now', of spontaneity and openness in relationships between people, were a prominent feature of his own poetry and philosophical writing.

About the same time he led* impromptu activity groups of children in the public gardens of Vienna, and found that when they were encouraged to play out stories instead of merely listening or reading they often displayed unexpected depths of feeling and understanding. Following on from this, between 1921 and 1923 he experimented with a form of theatre (*Das Stegreif Theater*, or 'Theatre of Spontaneity') in which he abandoned written texts and rehearsed performances in favour of improvised enactments of current events, in which players and audience were encouraged to draw upon their own inner resources in creating the dramatic action or 'living newspaper' - since many of the scenes were based upon contemporary newspaper reports.

In both these activities Moreno was anticipating developments which were to become better known through the work of others, for example, the theological writing of Martin Buber, the existential philosophers Sartre and Camus and the movement towards extem-

porting in the professional theatre. But though these facets of his career are less well known than his chief offspring, psychodrama, they are important because of their underlying influence on his approach to psychotherapy, the approach that distinguishes it from the more superficial uses of role playing, as in behaviour therapy.

In fact, psychodrama seems to have had its own origin in the Theatre of Spontaneity. A young actress, Barbara, who customarily portrayed gentle naïve female roles, married George, a playwright friend of Moreno. Soon George confided in Moreno. At home Barbara was a very angry woman, whose viciousness and hostility were playing havoc with their relationship. Hearing this, Moreno gave her an opportunity to act more violent and unsympathetic characters, prostitutes and petty criminals, which she did with such convincing effect that the other participants were at first reluctant to let her continue. But the more she played such parts, the more reasonable and tractable she became off-stage. Moreno went on to bring George into the arena so that they could play out scenes from their life together, and within a few months a marriage which had been foundering became a mutually satisfying and stable relationship. It was from this spontaneous beginning that he went on to develop the whole range of action techniques and interventions which collectively he entitled 'psychodrama' later also to be known as 'action therapy'.

DEFINITION: SOME THEORETICAL CONSIDERATIONS

Psychodrama, then, involves a group of individuals who assemble under the leadership of the therapist or director and enact events of emotional significance in order to achieve resolution of conflicts and release from inhibitions which limit their capacity for spontaneous and creative activity, particularly as they affect personal relationships. The method has been taken up piecemeal and on differing theoretical grounds by a number of therapists, notably Perls, the originator of 'gestalt therapy' in which the techniques of monodrama and the 'empty chair' are used exclusively, and Schutz,

the advocate of 'encounter'. What is described in the following paragraphs is the classical form of psychodrama. But first some of Moreno's key concepts, which are central to this approach. These are encounter, action, spontaneity, the moment or situation, catharsis and insight, and I should probably add to these reality testing and role playing (Elefthery, 1975).

By encounter we understand a direct and open meeting of two persons in which thoughts and feelings are mutually exchanged in depth and with full intensity. A true encounter is an immediate experience occurring in the *hic et nunc*, the real concrete situation in which the participants find themselves. It implies a willingness to allow feelings to emerge and be experienced at source (*in statu nascendi*), and it is through action rather than verbalization that this spontaneous meeting, freed from the restricting stereotyped residues of past experience, can lead to catharsis and insight. Catharsis is used in the Aristotelian sense *καθαρσις τῶν παθῆματων*—'a purging of the emotions'. Freud and Breuer are rightly credited with recognizing the potential therapeutic value of the release of suppressed feelings, but too rapidly subordinated it to the verbal analysis of associated mental events, which thereafter characterized much of dynamic psychotherapy. In psychodrama, insights and changes of attitudes are more likely to occur, we believe, because the subject is experiencing the significant situation in its entirety rather than a verbalized and therefore partial and modified version of it.

It is unfortunate that the term 'acting out', which describes an unproductive compulsive repetition of emotionally determined maladaptive behaviour, has been confused by some with the therapeutic 'acting through' which constitutes psychodrama. For here the conditions are carefully structured to encourage the emergence of underlying emotions and conflicts—not merely the neurotic defences which prevent their complete expression and conscious recognition, resolution or acceptance. In psychodrama reality can be tested, not in the usual limited sense in which we use the term, but in the fuller meaning of testing out, in a careful reconstruction of a past event or a

rehearsal of a future event, the spontaneous reactions and feelings of ourselves and of those with whom we interact—in contrast with the distorted projections which we commonly foist upon each other. The enormous range of roles which we can potentially play in our relationships can be explored in a 'fail safe' situation which allows us to increase both the variety and the flexibility of behaviour which we exhibit to others—in effect to become more spontaneous and creative in our life styles.

TECHNIQUE: A TYPICAL SESSION

Now to a brief account of the method. The elements which make up the psychodrama are the director, the protagonist, the auxiliary egos, the audience and the stage. The protagonist is the group member who becomes the focus of the session and whose life provides the situation or situations which are played out. Auxiliary egos, or auxiliaries for short, are other group members or trained assistants to the director who play roles in the psychodrama. The audience, preferably numbering six to twelve, may be patients or professional workers in training or even a natural group such as a family. The stage can be anywhere, sometimes the natural locus of the event, but more commonly an artificial space around which the participants seat themselves. Some institutions have stages consisting of a circular platform about 12–15 feet in diameter, a foot to eighteen inches above the ground and surrounded by two lower levels six inches below the action area and just above the ground or floor. A few simple properties are available on the action area, a small table, chairs, cushions, etc.—nothing elaborate, for it is the protagonist who creates the scene from his own mental picture, and the simpler the materials the more readily he can project his inner reality upon them. In Moreno's own design and in those which have copied it there is also a small gallery, and the lighting can be varied in intensity and colour to suit the mood of the scene.

The session usually lasts 1½ to 2 hours and is divided into three phases. The first of these is called the 'warm-up'. This varies in length depending on a number of factors, particularly how long the members of the group have had

to get to know each other. The warm-up period is essential to psychodrama because it is in this phase that the appropriate conditions are achieved in which spontaneous behaviour can occur, particularly mutual trust and tolerance of expression of unpleasant as well as pleasant emotions. This requires that the director should first warm himself up and provide a model of authenticity, warmth and spontaneity, together with a reassuring confirmation that it is safe to express feelings openly, that the group members can be themselves but are not going to be coerced, overtly or covertly into exposing more than their trust in the director and group permits them at this point. In the early stages of a group, the warm-up may lead to little or no action because not enough spontaneity and mutuality have developed. Even in an established group there may be occasions on which the director senses the group's need to discuss and clarify what has gone before. However, in a typical session the warm-up is followed by the action phase. A group member emerges as a suitable protagonist, and the director, as he inquires further into the situation which he presents, walks with him round the lower level of the stage.

When a specific incident presents itself for re-enactment, the protagonist is led on to the top level and asked to describe in vivid detail the physical circumstances in which it took place. He is encouraged by the director's example to describe it in the 'here and now'. 'The door is here, the window is here, it is about 2 o'clock in the afternoon.' He is also asked to place furniture, cushions, etc. in the scene to represent its principal features. The emphasis on detailed description, the use of the present tense and the physical setting of the scene are deliberate, the aim being to bring it to life and so aid a fuller recollection of the events and emotions of the occasion.

The protagonist is next asked to select auxiliaries to play the other people in his psychodrama. Again the protagonist warms up the auxiliaries and himself by a detailed account of their appearance, background and attitudes. When they have been carefully placed in role, the director instructs the protagonist to begin the action. At this point an important psycho-

dramatic technique is brought into play. This is 'role reversal'. The protagonist is asked to change places with the auxiliary to demonstrate exactly what he said and how he behaved. With repeated reversals, the auxiliary begins to get the feel of the exchange and can soon begin to improvise accurately. But the director constantly checks with the protagonist that the auxiliary is truly representing the other person as he sees him. As the scene develops, the director may use other techniques, for example, the 'double'. The double is a second person who stands with the protagonist and speaks or acts for him. He may speak possible unspoken thoughts. He may emphasize what is present in the protagonist's utterances but expressed in an inhibited fashion. If the protagonist finds his feelings becoming too much for him, the double, by his closeness, may provide support and enable him to continue with the psychodrama.

As the protagonist's conflicts become apparent, they may be externalized by auxiliaries who represent the polarities of the unreconciled feelings and attitudes. The protagonist can then himself double or reverse roles with the two parts of himself. The director may also remove the protagonist from the scene and put an auxiliary in his place to imitate his behaviour so that he can see how it appears to others. This technique is called 'mirroring'. Eventually the scene or series of scenes reaches a suitable point for closure and the third phase or 'feed back' and discussion follows. First the auxiliary egos are asked to share what they felt in their roles with the protagonist, and then the other members of the group. The emphasis is on shared feelings, and interpretation or theorizing are discouraged until all have had a sufficient opportunity to express what they have experienced at an emotional level. This is most important, because often the other members of the group, not involved in the scene, have become aroused by similar emotionally charged aspects of their own lives, but have not had the opportunity to express them in action as have the protagonist and auxiliaries. Finally, after further discussion the director ascertains the feelings of the protagonist and brings the session to a close.

DISCUSSION: THE PLACE OF PSYCHODRAMA AMONG PSYCHOTHERAPIES

What is the relationship of psychodrama to the verbal methods of psychotherapy? It is not so much an alternative psychodynamic therapy as an expansion of technique to include action as well as words. Why has it not previously been more widely accepted? One reason that has been suggested is that it is too potent a medium. It is clear that without careful direction it is possible to release feelings which the participants are unable to work through adequately in the time available. Moreover, one cannot learn psychodrama out of a book, and training has not been available in this country until recently.

Psychodrama is a directive treatment in the sense that the therapist exercises control by structuring of the therapy situation; but it is undirective in that the emotional content is not controlled but arises spontaneously from the protagonist and other group members as they become involved in the concrete reality of the situations they enact. It is a method that has a natural appeal to the extraverted; and when counter-transference is ignored it may be exploited for the gratification of the therapist at the expense of the patient. For this reason it is advisable that those who practise action techniques should be trained in psychotherapy both with the individual and with the group. Although some therapists are not (because of their own character defences) comfortable in action, they should not therefore feel that they are necessarily less effective for lacking this additional skill. However, to those who are it offers a powerful catalyst which may resolve a therapeutic stalemate and accelerate the growth of self-awareness. I am impressed by its effectiveness in less sophisticated patients who are considered unsuitable for individual or group analysis but who in psychodrama can show a remarkable capacity for empathic understanding. The immediacy of everyday colloquial speech makes the doubling and role playing of these patients a more direct and powerful form of communication than some of the cleverer subjects' verbalizations in which the strength of feeling is diluted by rationalization and intellectualizing phraseology.

I have also found it helpful to model doubling and sometimes role reversing in the earlier meetings of a new group. Anxious patients may be slow to warm up to playing themselves in a psychodrama, or may become too tense when faced with a real person, the auxiliary ego, representing an emotionally significant individual in their life. Several techniques are available to overcome this difficulty (Blatner, 1973). One is the 'substitute role' in which the protagonist plays not himself but someone else. This other person whom the patient chooses to play usually represents someone close to him, possibly a parent, who is associated with one of his core conflicts. Once the action has begun to move, the problems which this person presents to him will exhibit themselves in relationship to one of the other characters in the psychodrama with whom he identifies and whose feelings he will now be able to present by role reversal. Another approach is that of 'symbolic distance'. Here the protagonist initially takes on a role very different from his own position but which provides a possibility of moving into situations which are similar to that in which he finds himself. When the protagonist cannot face a live auxiliary, a useful alternative is an 'empty chair' in which he may picture an antagonist whose behaviour is completely under his own control—unlike the live auxiliary whose spontaneity he finds too threatening. Indeed, it is possible to play a whole psychodrama with empty chairs, the protagonist moving from one to another to portray the various characters.

Commonly however, these techniques are not needed because the first scenes which the protagonist plays are selected for their commonplace nature and lack of obvious symbolism. As in analytical therapy, the emerging repetition of specific emotional responses and patterns of interaction leads gradually to events which when portrayed have a greater significance. But this is a slow and gentle process in which the patient is allowed to make his own pace.

CONCLUSION: WIDER USES OF PSYCHODRAMA

Finally a word or two about the use of

psychodrama outside the clinical situation. It has long been popular in education and in the training of various professional groups, especially in the fields of mental health and counselling. It is an approach that can help with the heavy burden of personal frustration and ambiguity which is the lot of those who counsel the emotionally disturbed. The ventilation of negative feelings and experience by role reversal of how we appear to others is a source both of cathartic relief and of personal growth and understanding. It can also lead to increasing insight and tolerance in workers who deal with the socially underprivileged and whose own unresolved conflicts and tensions may interfere with their effectiveness by entering unconsciously into their relationships with clients. The use of psychodrama in existing work groups, such as the staff of a business or institution, carries some risks. The reliance of staff members on roles formally or traditionally incorporated into the social matrix of the system is often greater than they can admit or even recognize, and those who after a psychodrama must revert to their normal roles find it particularly difficult to tolerate the symmetrical self-disclosures of disappointments, doubts, jealousies, rivalries and other 'taboo' feelings from which the system of accepted roles defends the social organism, in the same way that ego defences defend the individual organism from its inner contradictions and conflicts. Nevertheless, if the method is modified so that social roles are focused upon rather than individual personalities (the sociodramatic as opposed to the psychodramatic approach) it can be used to catalyse a social system without excessive disturbances of its equilibrium.

I believe that psychodrama is becoming an increasing force in therapy, mental health training, education and management consultation. The emphasis on the individual's responsibility for himself, the optimistic expectation of his unfulfilled potential for positive constructive living, which it embraces, afford a more dignified, and helpful picture of human personality than the mechanistic model of the behaviourist or the fatalistic evolutionary determinism of Freud. Man is not only acted upon; he is also the actor.