What is psychodrama

An Introduction to Psychodrama

by Marcia Karp

A little girl asked her Mum, “What's life?”. Mum replied, “Life is what happens to you while you're waiting to grow up.”

Psychodrama has been defined as a way of practicing living without being punished for making mistakes; that is to say, practicing growing up while you are doing it. The action that takes place in a group is a way of looking at one's life as it moves. It is a way of looking at what happened and what didn't happen in a given situation. All scenes take place in the present, even though a person may want to enact something from the past or something in the future. The group enacts a portion of life as if on a video seen through the eyes of the protagonist or subject of the session. The personal representation of truth by the protagonist can be eye-opening for someone else watching; who may see them reflected in the struggle to express what is real. J.L. Moreno, who founded psychodrama in Vienna in the early 1900, described it as 'a scientific exploration of truth through dramatic method. Moreno (1953) had observed that thus far there was science without religion and religion without science. He felt the way forward was a combination: “A truly therapeutic procedure cannot have less an objective than the whole of mankind.”

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Psychodrama was designed as a method of group psychotherapy. Moreno had great trust in the group. When he asked, “Who shall survive?” I think he felt the survivors will be those who both use and cherish their own creativity and spontaneity and that these people will survive in a group. He used to say, “If God ever comes back, He'll come back as a group”. A group can experience many things:
We are not alone.
We can feel normalized.
We go back to the constellation into which we were born - the family group.
The group can share the weight of emotional truth.
The very form of this sharing, each person differently, may be liberating.
To be emotionally or physically held by a group member who is not previously enmeshed in the story can be therapeutic.
The tools set out for the method of psychodrama are as follows:
• a director
• the group
• a protagonist
• auxiliary egos
• a stage

The director
In most therapies this is the therapist, facilitator or group leader. The director is a trained person who helps guide the action. The director is a co-producer of the drama taking clues from the perceptions of the person seeking help. The following are some of the director's tasks:
(a) To build sufficient cohesion and a constructive working group climate.
(b) To stimulate individual group members sufficiently and warm them up to action.
(c) To consider group dynamics and measure group, interaction at the beginning of a session.
(d) To guide the appropriate selection of a protagonist and take care of others in the group who were considered but not chosen to be a subject of the session.
(e) To make a treatment contract for the session which is an action-preparation negotiated with the protagonist.
(f) To establish a therapeutic alliance.
(g) To prepare the action-space or stage on which the therapeutic drama takes place
(h) To intervene to give the protagonist sufficient freedom to select the focus of exploration.
(i) To identify non-verbal messages of the protagonist as well as the verbal.
(j) To anchor each scene setting in the appropriate time and place.
(k) To help put auxiliary egos into role.
(l) To identify central issues in the enactment and to help the protagonist show the group what happened rather than talk about it.
(m) To use psychodramatic techniques such as role-reversal, to move the action from the periphery of the problem to the core of the issue.
(n) The core of the issue may involve a catharsis of emotion, insight catharsis, catharsis of laughter or catharsis of integration which the director maximizes appropriately.
(o) To create sufficient safety for the protagonist and the group.
(p) To ensure confidentiality in the group and physical safety.
(q) To ensure that the psychodrama is a group process and not one-to-one therapy in a group,
(r) To create sufficient closure where the protagonist and group integrate the material presented in the session.
(s) To help the protagonist to re-enter the group after the session.
(t) To facilitate role feedback from group members who played auxiliary roles in the session.
(u) To allow catharsis and integration of group members who identify with the protagonist and can share from their own experience.
(v) To protect the protagonist from distorted responses or analysis of the group and to attend to each member sharing similar experiences or moments when they were most involved in the session.
(w) To share from his/her life history, if appropriate.

The group
The average size of a psychodrama group is between ten and fifteen people. I have seen groups of as few as three, and as many as four hundred. The emotional material in large groups seems to transcend the numbers and often people feel the group shrinks in size and are astounded that in a group of twenty-five they are able spontaneously to be themselves.
There are many societal roles represented in any given group. If, for example, the protagonist is an alcoholic, there may be a mother, sibling, partner or therapist in the group who, in the sharing, can present their own view of what happened to them. This feedback from other roles, in relation to the problem enacted, can be invaluable insight for the protagonist. The socially investigative dimension of the problem is better researched in the session when many roles are represented. One of the aspects of a psychodrama group which sets it apart from other groups is the multiplicity of roles that are
represented by each person in the group. We each play a staggered variety of roles in one day: parent, son or daughter, professional, friend, lover, citizen, boss, student, not to mention all the somatic roles such as sleeping, eating, and crying. Separate from the many roles we play in our own lives, we may be asked to play a role for someone else in the group – a dying mother, for example. If the person selected to play the dying mother has previously been seen as the group scapegoat, the role-structure can change drastically in a psychodrama group, allowing a positive alliance to form between protagonist and person playing the dying mother; an alliance which previously didn't exist. This constant change of role structure in a group disallows the role rigidity that may occur in other groups. The role repertoire is expanded by each group member playing a different kind of role from that which s/he may be seen to play in the group. A member of the group with low self esteem may be stretched to play a courageous role, surprising both themselves and the group by the release of creativity hidden, problematic, learned behavior. This glimpse of courage motivates the player to produce more and encourages group members to relate to them in a different way.

The protagonist
I used to work in a public theatre in New York at 78th and Broadway called the Moreno Institute. Seven nights a week there was a public audience, a circular wooden stage and a director. A person seated in the front, middle or back of the theatre, a professor, housewife or carpenter, could be a subject of the psychodrama session which they had chosen to attend.

Human beings have problems. Normosis, a word coined by Moreno, meaning the struggle to be normal, confounds the best of us. Though psychodrama was designed to help psychotics, it has evolved into a therapy of relationships for anyone. The protagonist, meaning the first in action, is a representative voice of the group through which other group members can do their own work. The protagonist simply states an aspect of life s/he wants to work on; my fear of death, my relationship with my daughter, my authority problem at work. The director, with the protagonist, sets out to create scenes that give examples of the problem in the present, looking at possible behavior patterns. Seeing the problem in the present, seeing the problem as it exists in the past and trying to resolve the problem by establishing the core or roots of
the issue, is the aim so that future behavior contains a more adequate approach. The “spontaneity” that is sought is defined as a fresh response to an old situation or an adequate response to a new situation. The idea of throwing away the script was crucial to the conceptualization of psychodrama as an action method. The protagonist has a chance to review the life script that s/he is using, which may have been handed down for good reason but fails to be adequate for present life requirements. A person who was handed a script not to cry may no longer feel that serves them in present-day functioning. One who has never grieved for the loss of a parent because they bought the 'brave' script may feel the relief of letting go of tears with a new definition of brave – one who has the courage to face what really exists within. That courage to be may not have been within the role repertoire of one's parents, but within this new family group bravery may find a new climate to encourage self-expression, which may have lain dormant for years.

The auxiliary ego
In the very first group I joined there was a psychiatric nurse for whom I formed an immediate dislike. While she was protagonist she was asked to choose someone in the group who could understand her inner thoughts and could help her express what she wasn't able to say. She chose me to be her double. I was astonished at her choice but found, once I stood next to her and we worked as a team trying to explore her inner truth that I could understand her very well and I stopped disliking her. She also taught me how much of me was in her and introduced me to the reality that the people we dislike usually have behavior that strikes close to home; therefore we are warding off the very thing we can't deal with in ourselves.

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The auxiliary ego is anyone in the group who plays a role representing a significant other in the life of the protagonist. This may be-a role external to the protagonist, such as a family member or colleague at work. It may be an internal role such as one's fearful self, child self or one's inner voice, as in the role of what is called the double. The double helps express that which
isn't being expressed, with or without words. Because Moreno felt that the royal route to the psyche is not the word but non-verbal expression, the auxiliary ego can express, by-gesture, posture or distance, those unspoken secrets in relation to the protagonist. I once was a double for a man who was having a quite normal dinner conversation with his wife of twenty years. He was telling her he didn't like to eat liver and clenched his fist as he spoke. As his double, I also clenched my fist and went a step further. I slammed my fist down on the table and said, "I've had enough of not being understood, I want a divorce." He looked at me, shocked, and said to her, "So do I!" It was the non-verbal clue that spoke the truth, not his words. His body conveyed the truth while his words masked it. He then chose to express his actual feelings. The auxiliary ego who plays a dying parent may reach out with arms to say goodbye to the protagonist caught in a web of unexpressed emotion. Those very arms may represent years of love that was unexpressed. If the protagonist reverses roles and is able to speak or show what has not been said all those years, the role-reversal can release spontaneity that was dammed or blocked in his own role as son. Often people are more spontaneous in the role of someone else than in their own role. Role-reversal is the engine that drives the psychodrama. The role of significant other in the group is modeled by the protagonist and a group member then moves in to play that role. Through crucial role reversals the protagonist experiences a shift in role boundary by playing another person. The person being the auxiliary ego holds the role that has been set and creates within it, as they imagine the person in that role would play it. The role is played through the perception of the protagonist.

Stage
Psychodrama is based on life itself. The space a person lives in is reproduced on the stage. If a conversation takes place in the kitchen, we set out the table and chairs and give imaginative space to a window, sink, door, fridge, etc.
Constructing the reality of an individual's space helps the person to really be there and warms them up to produce the feelings that do or do not exist in that space. When someone remembers a conversation that took place at the table, in childhood, it is important to have the people in the scene played by members of the group. We can often learn more by looking in this way at a person's living
space than we can in months of interview. I once was invited into a created space of a young man's apartment. He walked in by lifting his feet unusually high as if carefully tiptoeing. I asked why. He said, 'I throw my old milk cartons on the floor, they are everywhere. That spoke of isolation, not many visitors, a lack of care for the smell and looks. An important clue to his alienation was his living space. Our task then was to look at why he had no friends and why he became a recluse. His words up until then belied his reality, but showing the “stage” upon which he lived gave us a trust reality.

The phases of psychodrama
Every psychodrama has three phases:
  - Warm-up
  - Enactment
  - Sharing

Warm-up
The warm-up serves to produce an atmosphere of creative possibility. This first phase weaves a basket of safety in which the individual can begin to trust the director, the group and the method. When the room has its arms around you it is possible to be that which you thought you couldn't, to express that which seemed impossible to express.

There are many ways to warm up a group. Moreno did it by 'encountering' everyone and getting people to talk easily to each other. A person who had a theme was accepted by the group as their protagonist. Another way is for the director to select a protagonist; one whom s/he thinks is ready to work. Another alternative is through creative group exercise from which the subject of the session emerges. This is called a protagonist-centered warm-up. In a self-nomination warm up, people can put themselves forward to be the subject. These suggestions are ways of protagonist selection which come from the warm-up whilst the warm-up itself makes it possible for people to feel freer to trust the group, feel the cohesion and safety in the group and to present their problems in an atmosphere of love, caring and creativity.

Enactment
In this part of the drama, the director and protagonist move the work forward from the periphery of the problem to the core. Psychodrama means literally action of the mind, and it brings out the internal drama, so that the drama
within becomes the drama outside oneself. The director uses the group members to play auxiliary egos who are significant people represented in the drama. The original psychodrama stage was three tiered, concentric circles. The first level was for the audience, the second for soliloquy and represented the space outside the heat of the drama, and the top level was for the drama to be enacted. The design was for the work to go from the periphery to the core of a problem. Enactment in most psychodramatic sessions takes place in a designated stage area. During the drama other group members do not sit in that space unless they are playing a role. The stage feels like a ritualized-space once the drama begins. That is to say, the event that is meant to take place in that space takes place only there. Psychodrama which is attempted within the group space with no designated stage area often falls flat because there are no boundaries spatially or methodologically.

Sharing
As described in the Director section, sharing is a time for group catharsis and integration. It was meant as a “love-back” rather than a feedback, discouraging analysis of the event and encouraging identifications. Points of most involvement by individual group members are identified, and each member finds out how he or she is like the protagonist. Often, as in Greek drama, the audience member is purged by watching the enactment of another's life story. The sharing is meant to capture this learning process and allow the group members to purge themselves of emotions or insights gained. It is also aimed at normalizing the protagonist's experience by hearing how others are similarly involved at different levels of the same process. Sometimes the effectiveness of the overall session can be measured by the depth of the sharing session. A further function of the sharing is a cool-down, a way of re-entering our individual realities after the group enactment.

Psychodrama brings out the internal drama so that the drama within becomes the drama outside oneself.

For directors in training, an added part of the session is called processing. This is where clear rationale, theoretical assumptions and contract are discussed as part of the directing. The technical aspects are reviewed by the director, trainer and group members. How the director
got from scene to scene, how aspects could be maximized, what worked and why, and what could have been done differently, are generally discussed. Feedback for the trainee, director and self and peer assessment are invaluable.

Power and cautions
There are many cautions regarding the use of psychodrama and many of the individual techniques. First and foremost, it is important to have a purpose for using a specific technique, for using a technique without purpose and forethought, can be dangerous for the protagonist. Some techniques may be too powerful for a particular individual, some may be too esoteric and some too frightening.

It is important to be aware of the ease with which an individual may be opened up using these techniques, as well as the difficulty and necessity in achieving closure and the psycho dramatist must be careful not to provide a fantasy happy ending for a session when the reality base is not present.

There are scenes that require extreme sensitivity in their enactment. We are faced daily with issues like abortion, rape, incest and sexual molestation. In order to accomplish what is necessary for the protagonist and still keep him/her intact, we must use care and discretion (Goldman and Morrison, 1984).

Training
Psychodrama training is a postgraduate training for mental health professions. It usually takes a minimum of two to three years after initial professional training. Psychodramatists have their own therapy and supervision as well as a primary trainer who follows their clinical and theoretical progress. Because psychodrama is a powerful therapeutic tool only those trained in its use should be using it.

Effectiveness
A large body of literature has been published on therapeutic factors in group psychotherapy (Bloch and Crouch, 1985). In 1955; Corsini and Rosenberg reviewed over 300 articles on group psychotherapy and made three broad categories to discuss the results emotional, cognitive and actional. Yalom (1975) found that interpersonal learning together with catharsis, cohesiveness and insight were the factors
Peter Felix Kellermann (1992) found in two studies that insight, catharsis and interpersonal relations are therapeutic factors central to psychodramatic group psychotherapy. Grete Leutz, a German psychodramatist, suggests that making a conflict tangible, concrete and visible also makes it dispensable and thus the person can change (Leutz, 1985). This making a process that is unconscious conscious helps the person gain control of their own behavior. Kellermann (1992) offers the following model illustrating the aspects of psychodrama which facilitate therapeutic progress.

A Mode of the Therapeutic Aspects in Psychodrama

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<thead>
<tr>
<th>THERAPIST</th>
<th>SKILL</th>
<th>Emotional</th>
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<tr>
<td>Cognitive</td>
<td>action inside</td>
<td>catharsis</td>
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<tr>
<td></td>
<td>resistance</td>
<td>closure</td>
</tr>
<tr>
<td>Interpersonal</td>
<td>Imaginary</td>
<td>tele (8)</td>
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<td></td>
<td>as IF (9)</td>
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<tr>
<td>Behavioral</td>
<td>Non-specific</td>
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The outcome of psychodrama

Some professionals who have never experienced psychodrama for any substantial length of time, are afraid of it as a therapeutic method. Many tend to overdramatise its process and emphasize its presumed dangers. Others exaggerate its virtues in a naive, superficial manner which violates the most elementary precepts of social psychology. Both groups are unaware of the relatively recent attempts that have been made to investigate, scientifically, psychodrama's therapeutic potential. Such controlled studies have shown that, employed by trained professionals with awareness of its limits, psychodrama can make a contribution either on its own or as an adjunct to many branches of psychotherapy, whether these be behaviorist, psychoanalytic or existential-humanistic (Kellermann. 1992).

Who can use it?

Psychodrama may be helpful to a wide variety of people, cutting across categories, individual and social problem areas and a spectrum of behavior disorders.
“Psychodrama can help the normal client solve actual conflicts, the neurotic client to uncover infantile conflicts, the psychotic to regain reality by means of concrete action and the narcissistic or borderline person in the process of separation and individuation” (Leutz, 1985). Leutz, Karp and others have used psychodrama successfully with some people who had psychosomatic disorders.

Psychodrama can be helpful only to those who are able and motivated. The ability to participate in the imaginative process of role-playing without losing touch with outer reality seems to be a minimal requirement for participation. Furthermore, participants must be able to:
- experience surges of feelings without loss of impulse control
- have some capacity to establish relationships
- have minimal tolerance for anxiety and frustration (ego strength)
- some psychological mindedness
- a capacity for adaptive regression

(Kellermann; 1992)

I have used psychodrama effectively in one to one work and in couple therapy. A single session usually has limited goals and is focused on a specific concrete issue. Psychodrama may therefore be characterized as a brief method of psychotherapy, sharing many of the circumstantial characteristics of crisis-orientated and focused therapy.

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