

The Basic Elements of Psychodrama

Psychodrama involves the staging of a problem in life as if it were a play, and so certain terms are used which are derived from theatre: protagonist, director, stage, audience, and the like (Moreno, 1946). Moreno developed some terms specifically for psychodrama, such as auxiliary ego (nowadays more often called simply auxiliary.) And other terms have come into use as derivatives of psychodrama or Moreno's role theory, such as role playing and sociodrama.

Although psychodrama was first developed as a type of group therapy, it quickly was applied in creative forms, as an integral part of what is today called *milieu therapy* in hospitals; with couples and families; and even with individuals, using only one or two cotherapists. As *sociodrama* it also addressed group issues that dealt with the general roles in the group, beyond any focus on the individual, and further was applied in community settings to reevaluate not just the group, but the larger social network.

All these settings and situations have in common an appreciation that problems may be analyzed and worked with as if they were a kind of play that could be creatively revised. We are encouraged to think of ourselves not, as Shakespeare said, "merely players," mindlessly playing out our life scripts, but rather also as the playwrights and codirectors of our life's dramas. To meet this challenge, psychodrama makes available to us the rich methodology that is used in the theatre. Thus, people can be helped to present, for example, not only what actually happened in a given situation,

but more important, they can explore all the statements that were never made, although they were thought, or feared, or remained at the subconscious level.

Psychodrama thus opens the way to exploring possibilities inherent in a situation, various aspects of the minds of each of the players, and the richness of the interpersonal and cultural field. And, as mentioned in the introduction, these explorations can apply not only in psychotherapy, but also in many other settings where one might want to encourage a greater understanding of the complexities of life or to develop or practice strategies for being more effective.

BASIC TERMINOLOGY

As mentioned earlier, Moreno named five basic elements of psychodrama: the protagonist, director, auxiliaries, audience, and stage.

The *protagonist* is the person who is the subject of the psychodramatic enactment. Whether acting as a client, patient, student, trainee, group member, or other form of participant, in the act of portraying a personal life situation a person becomes the protagonist. (In this book, because complex situations are described which demand pronouns that refer to a single person, and in order to avoid the linguistic sexism yet prevalent in much professional literature, I will generally refer to the protagonist as a "he" and the director as a "she.")

The *director* is the person who orchestrates the psychodrama to help the protagonist explore a problem. In therapy groups, the director takes on the role components of both director and therapist, although, for example, in hospital groups, a patient's individual therapist might also be present.

In personal development or other types of groups, the leader's role may be more flexible. In a training group, the director of an enactment may be one of the group members. If the person who is most frequently in the role of group leader needs to deal with her own issues—either related to other aspects of her personal life or regarding some interactions in the group itself—then another per-

son serves as director and the previous leader/director shifts into the role of protagonist. These psychodramatic roles—protagonist, director, audience, auxiliary— are not fixed assignments. They can shift, and an individual might play each one of them in turn over the span of several enactments. However, to accomplish more than relatively simple forms of role playing, the director role does require a complex of skills which go beyond the ordinary training of most psychotherapists or group leaders.

The auxiliary (formerly also called the "auxiliary ego") is Moreno's term for anyone besides the protagonist and the director who takes part in a psychodrama. Usually the auxiliary portrays someone in the protagonist's life, such as a spouse, employer, or "another part" of the protagonist. More than a "supporting character," an auxiliary might play a bridge in a dream, a nameless sense of pressure pushing on one's back, or even the protagonist's unspoken feelings. This last mentioned role of the auxiliary is given a specific term, the double. Use of the technique of doubling is the subject of Chapter 3.

The term *audience* refers to the others present during the psychodrama. The audience is the group in which the enactment occurs and may be a psychotherapy group, a seminar or class in school, or participants at a workshop in management training. Being an audience implies more than simply being in the group because when the psychodrama is going on, the director uses the audience as part of the process. For example, the audience may give feedback, be a source of auxiliaries, or serve as a Greek chorus. After the psychodrama is over, the group ceases functioning as an audience and becomes more like a conventional group with a more interactive discussion dynamic.

THE STAGE

The *stage* is the area in which the enactment takes place. The stage may be a formal platform for psychodrama; it may be the area off to the side of a group or the actual locus of the conflict *in situ* (e.g., the reenactment and exploration of a conflict between children on the playground where it was occurring moments earlier). There

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are some props and structures, however, that can make the dramatic function even more effective.

Acting-In

In the original form of psychodrama, Moreno and his colleagues used a specially constructed stage, such as that shown in Figure 1.1. The three levels, lighting arrangements, balcony, and design were all empirically developed to facilitate the power of the enactments. Any of these components can be useful if included (Enneis, 1952). Modifications of this design have also been used, such as having part of the stage sunken, as was done at the St. Louis State Hospital (Moreno, 1971, p. 497).

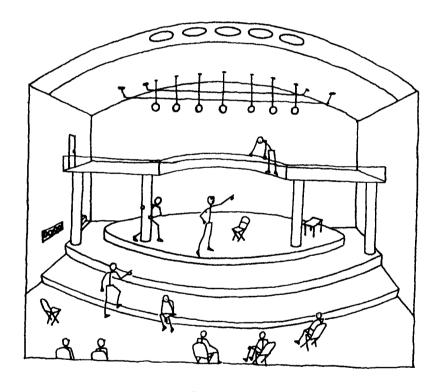


Figure 1.1

The main stage should be at least 12-15 feet in diameter. A raised platform that can easily be stepped onto is helpful in subliminally establishing the "as-if" set in the participant. (The Greeks used the

device of the proscenium arch to mark the border of the stage—when people cross the arch they enter or exit from the world of the drama.) As a protagonist and auxiliary ego move toward the stage, their stepping upward indicates to all concerned that they are entering the psychodramatic reality.

On the stage there may be a few props: Some lightweight chairs and a simple table are most often used. Pillows, a mattress, and a variety of other props can also be useful. The chair is not only for sitting on, but, when empty, can "hold" any fantasied or projected figure. It can also become a barricade, a platform, or an indicator of height, authority, or status. The *table* can become a building-top, a desk, a judge's seat, a breakfast-room table, or a cave in which to cringe or hide. Pillows and foam rubber bats can be used for fighting, pounding, beating, protection, or perhaps to be held as a baby.

More elaborate aids are not essential but can provide remarkable effects. Special lighting, for example, may be used to evoke many moods: red to represent hell, a bistro, or an intense emotional scene; blue for death scenes, heaven, or the sea; total blackness for isolation, loneliness, or a need to enact something privately; and dim light for dream scenes. Music, either skilled accompaniment or emotionally meaningful recorded songs, can be a powerful adjunct to psychodrama as well. Dance and movement activities can be integrated into psychodramatic enactments, as well as other creative arts therapy methods.

THE TECHNIQUES OF PSYCHODRAMA

In addition to the five basic elements, there are scores of psychodramatic techniques and hundreds of variations (Blatner, 1988). The major techniques will be described in greater detail further on, but to begin to orient you, here are some of their names and the some of the purposes which they can serve.

- In order to clarify a protagonist's feelings, the techniques of the double, soliloquy, multiple selves, and monodrama are used.
- For heightening and facilitating the expression of emotion, the director may use amplification, asides, and the exaggerations of

nonverbal communications, along with exaggerations of the dimensions of height, space, and position.

- The protagonist may be aided in becoming aware of personal behavior (self-confrontation) through the use of techniques such as videotape playback, role reversal, behind-your back, audience feedback, chorus, and nonverbal interaction exercises.
- Goals and values may be clarified through the use of the *magic shop* or the *future-projection* techniques.
- Support can be given with the techniques of ego building, sharing, and the judicious use of physical contact, such as hugging or holding.
- Issues of group process can be clarified through the techniques of the *spectrogram* and *sociometry*.
- Finally, there are many special techniques that can be used along with psychodrama, such as hypnosis and guided fantasy.

Through the use of the above techniques, the director can help the protagonist to enact a broad range of experiences: scenes from everyday life, as well as dreams, memories, delusions, fears, and fantasies.

AN OUTLINED DESCRIPTION OF A TYPICAL PSYCHODRAMATIC ENACTMENT

- I. The Warm-up (see Chapter 4)
 - A. The director warms herself up.
 - B. The group discusses goals, roles, fees, limits, time arrangements, and so forth.
 - C. Getting acquainted; exercises are used that introduce group members to each other.
 - D. The director leads the group in action exercises that build group cohesion and spontaneity.
 - E. This often leads to a discussion of what the participant experienced in the warm-up exercises, which in turn leads

- to the emergence of a theme of common interest to the group, or to an individual's problem.
- F. One of the group members is selected to be the protagonist, who will enact his own or the group's problem.

II. The Action (see Chapter 5)

- A. The director brings the protagonist to the stage, where the problem is briefly discussed (Schramski, 1979).
- B. The conflict is redefined in terms of a concrete example—one that could be enacted.
- C. The director helps the protagonist to describe the physical surroundings in which a specific action occurs, thus setting the scene.
- D. The protagonist is instructed to play the scene as if it were occurring in the here-and-now.
- E. The director brings other members of the group forward to take the parts of other significant figures in the protagonist's drama—these people then become the auxiliaries.
- F. The opening scene is portrayed.
- G. The director helps the auxiliaries to learn their roles by having the protagonist change parts with them (reverse roles) for a brief period during which the protagonist then portrays the behavior of the other figures in his drama. As the auxiliaries learn their roles, the protagonist gives them feedback until he feels that the scene is being enacted in an essentially similar way to the way he pictures it in his mind. This "molding" activity furthers the warm-up of the auxiliary egos and the protagonist himself.
- H. The scene continues with the director introducing other psychodramatic techniques that function to elaborate on the feelings being expressed (e.g., soliloquy, the double technique, asides, etc.).
- As the enactment unfolds, the director uses a variety of other techniques in order to explore different facets of the protagonist's experience.

1. Ambivalence is explicitly demonstrated through the use of several individuals (auxiliaries) on the stage, each portraying a different part of the protagonist's psyche.

- 2. Empathetic or projected feelings of the protagonist can be enacted through role reversal.
- 3. Self-confrontation for the protagonist may be utilized through the mirror technique.
- 4. Significant past memories are reenacted.
- 5. Future plans, hopes, and fears can be symbolically realized and explored.
- 6. The protagonist's suppressed emotions—guilts, resentments, fears, yearning—can all be expressed using a variety of facilitating techniques.
- J. The action may be carried to a point where the protagonist experiences a sense of having symbolically enacted those behaviors that had been suppressed—fulfillment of act hunger.
- K. The protagonist is helped to develop other adaptive attitudinal and behavioral responses to his situation—this is called working through (see Chapter 6). (In role playing contexts, this process may become the predominant task of the group.) Some specific techniques used in working through include:
 - 1. Repeat role playing of the conflict, with the protagonist trying a different approach with each attempt.
 - 2. Modeling by other group members, who show how they would deal with the problem.
 - 3. Role reversal between the protagonist and his auxiliaries—the other figures in his enactment—so that the protagonist can discover, through actually experiencing the other person's situation, some clues as to what behaviors might achieve the desired effect.

III. Closure (see Chapter 6)

- A. Following the main action, the director helps the protagonist to receive some supportive feedback from the other group members. Rather than encouraging an intellectualized analysis of the protagonist's problem, the director encourages the group members to share with the protagonist the feelings they had related to the enactment.
- B. The director may proceed to use a variety of supportive psychodramatic techniques.
- C. Further discussion by the group ensues.
- D. Finally, the director either goes on to the process of warming-up to another psychodramatic enactment with a different protagonist, or moves toward terminating the group, possibly using a variety of closing techniques.

MAJOR FORMS OF PSYCHODRAMATIC ENACTMENT

Finally, there is the terminology regarding the meaning of psychodrama itself. In fact, there is a fair amount of crossover in how the terms are used, and some degree of cultural politics and semantics associated with the various words. In some locales, *role playing* is much preferred, as the prefix *psycho*- seems to suggest something that's either too psychoanalytic or too criminally insane, while the suffix *-drama* for many people still carries an aura of phony theatrics, hystrionic emotionality, and manipulativeness, as if a background voice could caution, "Now don't get dramatic!" So some directors are using different words to communicate the essence of this most valuable group of methods, such as *action techniques* or *clinical role playing*.

One thing that psychodrama is *not*, however, is merely a psychologically infused dramatic novel or theatrical piece. Nor is it a similarly psychologically loaded and rather dramatic event in the news, although such phenomena have been termed "psychodramas" in magazines, newspapers, and other media. This point must be emphasized, because what are generally and erroneously so described always lack the essential element of the psychodramatic method: This approach is a context in which the participants are

enabled to suspend their habitual reactive patterns and reconsider how else they might choose to respond. Psychodrama is a method aimed at creativity, healing, and wisdom, not a blind playing out of some tragic pattern of self-deception. I hope the readers of this book will help to correct the misuse of the term by enlightening journalists who may not know of the constructive power or even the existence of psychodrama as a methodolgy.

Role playing has been a term used as an equivalent to psychodrama by some leaders in the field, such as Kipper (1986) or Corsini (1966). In other settings, this term is used a little more specifically to refer to enactments in which the goals are more limited. For some, role playing avoids any exploration of the personalities of the players and focuses only on a deeper understanding of the role—and this meaning is closer to the idea of "sociodrama," to be discussed in a moment. For others, role playing refers to an even more superficial or behavioristic approach, focusing on the task of rehearsing a behavior, or finding the best specific response strategy. Originally, Moreno used the term, role training for this latter purpose. In these more task-oriented senses, the term role playing blends into other simulation forms of learning or exploring, astronaut or flight training, military exercises, situation tests, and other approaches which have become widespread in our culture.

SOCIODRAMA versus PSYCHODRAMA

Sociodrama refers to an exploration of a problem that involves a role or a role relationship, a theme which might be relevant to a group of people. Moreno wrote about people of different racial or ethnic backgrounds meeting to attempt to resolve their differences. Some other examples are:

- Nurses attempting to understand more about their feelings about patients with AIDS
- Teenage boys and girls meeting to explore expectations in dating and attitudes about sexuality
- Seminary students exploring common religious issues

- Physicians, nurses, administrators, lawyers, and others in the community exploring problems of medical ethics
 - New parents sharing feelings about the stresses and strategies of dealing with the first year of the baby's life

Although a person may participate as a protagonist in a sociodrama, the enactment would relate to just one of the protagonist's roles, one which represents a role shared with others in the group and/or of concern to all the group. Other particularities of the individual are not to be considered. Thus, sociodrama could be described as *group-centered*.

One of the principles of directing sociodramas is that in general they should not be allowed to turn into psychodramas. A great deal of learning and benefit can emerge just by sticking to the topic and exploring the full depth of experiences inherent in the role situation itself. The numbers of issues, the many levels of awareness, the different types of often conflicting sub-roles, all need to be brought into consciousness. For example, a group of nurses in training might use sociodrama to explore the challenge of dealing with certain kinds of patients. When one of the nurses (as the protagonist) becomes involved in a scene, the emotional issues of the problem will be expressed. However, the director should bring out those facets of the relationship that would likely be present in many or most nurse-patient interactions; those feelings unique to the protagonist would not be emphasized. In other words, it would be inappropriate in a sociodrama for a director to deal with the personal aspects of the nurse who is the protagonist, for this might imply to the others in the group that the difficulties in the interaction were due to deficiencies unique to that nurse (Sternberg & Garcia, 1989.)

Psychodrama, in contrast, addresses the particularities of a single person who is at the nexus of many roles, and more, specific role relationships—not only with a spouse and child, for example, but with this specific spouse with unique qualities, and a particular child with certain abilities and problems. So psychodrama, in this case, has a very *individualized* focus; it is *protagonist-centered*. The drama may shift among the many facets of the protagonist's life—

his past, present, and future. Usually psychodrama moves toward relatively deep emotional issues (Kellerman, 1987; Kipper, 1988).

It is possible to use sociodrama as a warm-up for a psychodrama, but it is unethical to do so without the clear consent of the group and the people involved to such a personal exploration. In most situations, therefore, where sociodrama is the expected process, one should not intrude on people's privacy by subtly manipulating group members to disclose elements of their private lives.

However, depending on the composition of the group and its goals, and with the cautions mentioned above, it is possible to interweave several modalities. A psychodrama may arise out of or lead into a sociodrama; a role training exercise might be used as a warming-up or integrating process, complementing psycho- or sociodrama.

PSYCHODRAMA AND DRAMA THERAPY

In the last two decades the field of drama therapy has emerged as one of the recognized creative arts therapies, and there has been a gradual process of cross-fertilization between it and psychodrama. The two fields differ in the following ways: Psychodramatists generally begin as psychotherapists and then take specialized training in the use of Moreno's contributions. Many use psychodramatic methods in conjunction with other approaches, and some apply psychodrama also in nontherapeutic contexts, such as education and consulting to businesses. Drama therapists generally are trained first in the theater and then receive specialized training in drama therapy and psychotherapy. Psychodramatists emphasize protagonists playing scenes involving their own lives, while drama therapists give more emphasis to the taking of roles other than their own (Jennings & Minde, 1993). For example, drama therapists might have group members create improvisations (usually purely imaginary, but sometimes based on characters and/or plot themes in myths or recognized plays), and their spontaneity exercises are often adapted theatre games, because there is healing in the act of self-expression itself. Also, the act of playing and pretending often leads, albeit obliquely, to self-revelation. Drama therapists are also somewhat more group centered and work towards the general cultivation of spontaneity and group interaction rather than the focusing of one of the group members' problems. Finally, while psychodramatists avoid any rehearsal, some drama therapists recognize the value of having clients prepare for a performance which expresses aspects of their own personal experience.

I see value in both approaches. Some patients in fact need "role distance," the protection provided by not playing their real selves, but rather some other character. Then they can reflect on how they engaged in that presentation. Some psychodramatists, therefore, use these more skit-like drama therapy approaches for certain groups. Also, while earlier drama therapists used more scripts, psychodrama relied on improvisation; however, drama therapy in the last few decades has also moved far more toward almost completely unscripted work. (Interestingly, Moreno, in the early years of his New York City open session, sometimes had protagonists go offstage and plan with an auxiliary a small skit to express their situations; soon, however, the process evolved into entirely spontaneous productions.)

More recently, drama therapy has integrated actual psychodrama as part of its own general range of methods (Emunah, 1994), while psychodrama in turn has been integrating more drama therapy exercises as warm-ups and is recognizing the value of sometimes using ritual to close or intensify aspects of a more classically Morenian enactment (Blatner, 1994). Furthermore, the theoretical foundations of drama therapy as developed by a number of authors (many of whom are noted in the Bibliography) also are relevant to the understanding of the psychological, historical, and sociocultural basis for psychodrama.

ACTION TECHNIQUES

In addition to its classical rendering, psychodrama's major contribution has been (and may yet be) its component methods. Their importance, in fact, is emphasized by the title of this book. Role

reversal, doubling, multiple parts of self, and many other techniques may be modified and applied in individual, couples, conjoint family, and group therapies, and integrated with other schools of thought.

A number of psychodramatic methods have become so incorporated into other approaches to therapy that many professionals aren't aware of their origins. Striking examples include the use of "sculpture" in family therapy, and Fritz Perls' employment of the "auxiliary chair" technique into his method of Gestalt therapy. The value of knowing the origins is not merely a matter of giving Moreno credit, but rather of leading practitioners to the conclusion that there is value in learning all the associated techniques and principles in this rich complex of innovations.

Equally important, while classical psychodrama requires both more training and a number of associated conditions and cautions, counselors and therapists working with individuals and families can readily apply its component methods. And because these techniques can powerfully catalyze the process of psychotherapy, making it more efficient, it becomes an even more valuable tool in light of the present reality of cost restraints.

The idea of using specific action techniques—sometimes called experiential techniques or structured experiences—has also become incorporated into a variety of other fields, as discussed in the chapter on applications. In the encounter groups and the "human potential movement" of the late 1960s through the mid-1970s, psychodramatic methods were integrated with imagery techniques, bodywork techniques derived from Alexander Lowen's post-Reichian method of bioenergetic analysis, and "sensory awakening" methods developed by Charlotte Selver and Charles Brooks. Other expressions associated with these methods included "growth games," and "nonverbal exercises." The human potential movement evolved into a wide range of more focused programs for personal growth, but the use of structured experiences continues.

Moreno's early work with improvisational theatre was largely forgotten, but "improv" began again in the United States in the late 1950s and what Fox (1994) called the tradition of the "nonscripted theatre" drew from many sources to become the kind of cultural force that Moreno would have enjoyed.

SUMMARY

This chapter introduced some of the basic elements and features of psychodrama, its terminology and relations to other fields of endeavor. While classical psychodrama is a complex approach, many of its methods can be integrated with other types of psychotherapy and thereby add to the efficacy of treatment.

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