Conceptual Clarity in Psychodrama Training

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THE RELATIVE LACK OF THEORETICAL SUPPORT for the psychodramatic approach is known to those who practice it as well as to those who follow other theoretical psychotherapeutic methods. This deficiency has happened even though the psychodramatic method is only 15 to 20 years younger than Freudian psychoanalysis.

Psychodrama and Theoretical Elaboration

Moreno had an original counterposition in regard to Freud. In fact, Moreno, even if he was not a "son" of Freud or not attached to him in some other way, belongs to the generation of rebels against the "great prophet." His *Weltanschauung* presents some affinity with Jung's theory, rather than with Freud's psychodynamic theory.

Insiders know that Moreno elaborated his own psychodynamic theory in a nonorganic way, and that the subsequent contribution of a certain number of disciples helped to give the psychodramatic approach some foundation and some necessary reference points. Beyond that, it is necessary to recognize that the theoretical structure of the method is, even today, not more than a framework or a skeleton of a body still to be built. To recognize the reasons for this theoretical insufficiency, in my opinion, would not be a purely intellectual or historiographic exercise. Rather, it would allow us to point out the differences and specificity of the psychodramatic method in regard to psychoanalysis. That would reveal to us the way in which such specificity—although it influences the theoretical insufficiency—is also the most precious lever to personality development in psychodramatic method.

This is not the place for deep reflection on this subject. I just want to point out some evident differences between the two approaches that might explain the different way in which the two theories developed. The quality of a "concluded chapter" of each psychodramatic session is a characteristic that is in neat contrast to a psychoanalytic session (which

is, by definition, a fragment out of a long speech). The fact that at the end of the psychodrama session the patient is in a state of emotional integration perhaps prevents the mobilization of secondary processes. The fact that the therapist in a psychoanalytic session must keep himself in a condition of anonymity might be an important reason for the mobilization of the secondary processes in the analyst, inducing him or her more easily to a theoretical elaboration (elaboration that long ago gave to psychoanalysis a fantastic epistemological and methodological knowledge). The psychodramatic session, on the other hand, requires full participation of the director, who plays an active (directive) role, making it less necessary for him (energetically speaking) to undertake an intellectual elaboration.

Today, however, even the psychodrama needs a deeper epistemological reflection, a better organization of the theoretical material, and a more precise elaboration of the method. In fact, this is more than necessary if we want to establish a solid foundation for the didactic work.

Psychodrama Training

The Theoretical and the Experiential Parts

In psychodrama, the didactic has to consider two different levels: experiential and theoretical. On the experiential level, the first essential condition to ensure is free emotional interaction; on the theoretical level, conceptual clarity is required.

Primary processes and secondary processes in the normal psychic activity act in a continuous dialectic of the conscious and unconscious, modifying each other in a reciprocal process. The times, however, of these processes are quite distinct, and each one has a length of time intrinsically regulated by the tension that is underneath. During the training, in a similar way, the emotional processes end up interacting dialectically with the intellectual and reflexive processes, but they take place at different times, each one with its own assimilation economy and interior integration. It is an essential condition to respect these times in the didactic of psychodrama in order to achieve the harmony of the emotional and rational components. The biggest difficulties in the learning process until now have been to give name and rational form to the free game of projections and emotions and to recognize, in an objective way, the conduct of the director/therapist in order to transmit his role in a correct way in different situations.

The training of a psychodramatist at the Moreno Institute in Beacon focused on the "processing," the discussion following the session about

the way in which the session was directed. During the processing, the director, the protagonist, the auxiliary egos, and the members of the audience, each one according to his or her role, all offered testimony to the direction, abstaining themselves from any critique and expressing themselves in a constructive way, making suggestions. This procedure, obviously, does not need any particular underlying didactic scheme. Theorization is minimal, and the experiential feedback is favored. The director is the chief reference and the only didact. Finally, the processing takes place in a very short time after the psychodramatic session to prevent a dimming of the memory of the session without the possibility of adequate sedimentation of the emotional experience.

Not many psychodrama schools nowadays have tried to articulate the training process, in a more dependable and controlled way, but many of them feel the need to do it.

Two Techniques

The introduction of videotaping was a real turning point in psychodrama training, allowing for objectivity and reflection about the behavior of the director during the sessions. We can say that this is one of the cases in which technical development addressed problems it was not meant to solve.

Videotaping allows us to respect the time of assimilation and integration of the emotional experience of the participants in the training/therapy group; to mobilize the secondary processes of the participants through different sensorial stimulation (mainly, vision and hearing, but also through feedback in group interaction during the showing); and to provide "technological objectivation" that promotes a substantial emotional distance.

Another fundamental development during these years of attempting to give an organic structure to professional training was the recognition that the psychodramatic method is a group therapy method. As such, it needs a group life. This can only happen if the group stays closed for an adequate period of time. The training group, in its experiential part, has to be a therapy group, relatively closed, that meets with enough frequency for a sufficient time. As we know, every group therapy is based on the interaction of the group members, which is permeated by projective needs and reality demands.

Beyond that, psychodrama is an action method and a directive method. It is an action method because it stimulates the life of the group through different forms of interaction—sensory, motor, play, projection, on a somatic as well as on a psychological level. It is a directive method because the director activates and guides the life of the group, ensures the return to reality,

guarantees that the game rules are respected, protects the group from devastating conflicts and paralyzing anxiety, becomes the "medium" of tele, and stimulates the group members to new roles and creative answers.

The group in the psychodramatic method, therefore, remains the main point of reference in the therapy. At the same time, it is the place and the medium for the transformation of the individual. This is true for that part of the psychodrama session that concerns the group life as well as for the part that concerns the work with the protagonist. In fact, it is the presence of the group that translates the magical experience of personal transformation, lived as semireality, into a possible reality.

These two characteristics of psychodrama therapy—a method of action and a directive method—also condition the characteristics of psychodrama training. In fact, the experiential part of the training requires participation as a therapy group member and, on the other side, as a director, working through in the group the conflicts inherent in this role. The learning through direct deep experience constitutes a structuring condition for the psychodramatic method, perhaps even more than in other psychotherapy methods. Without that, any theoretical training would be sterile.

For itself, subsequent theoretical elaboration (to which videotaping has given ideal modes and times) will be free of two major risks that occurred in the past: on one extreme, the risk of conceptual superficiality, of theoretical fragility and, overall, of the nontransmissibility of the director's role; on the other extreme, the risk of blocking and deforming the emotional processes by imposing a rational structure on them in a violent way.

The Structure of the Training

Throughout my years of experience, I have expanded on a well-defined, although nondefinite, psychodrama training structure with sufficient basic criteria. These criteria concern the characteristic of the training/therapy group and the definition of the times and methods of experiential and theoretical work. The general organization of the training lasts 4 years and combines four levels of courses that are not separate but interact as much as possible.

The Training/Therapy Group. The candidate has to send in a written application and an autobiography that clarifies personal and professional reasons for the request. This induces the candidate to think about the path that he is about to follow, its length, and his commitment. An interview follows in which it is important to make sure that the candidate plans to attend the courses regularly. Certain characteristics are given preference in the selection of the candidates: (1) personal work (psychoanalysis or other form of

psychotherapy), (2) past attendance in a psychodrama group for certain period of time, (3) motivation to enter training as a personal investment, not merely to develop professional skills.

The training/therapy group should have no more than 12 members and should stay together for at least 1 year. The following year, a reconstitution of the groups is possible. Each group should have a fixed central nucleus to which new elements from previous groups should be added. Those people who arrived at the 4th year of training should build a new group with people from the 1st and some from the 2nd and 3rd years, according to possibilities and needs. The addition of new people to a group that has had a sufficiently long past common experience promotes the better knowledge of the group dynamics, stimulates new roles and richer interactions, and allows the experience of separation, change, and restructure.

I insist on the need to have small groups and to ensure regular participation of the members and their emotional commitment. This is essential to maintain the group as a therapeutic medium, to allow a significant experimentation of the sociometric aspects as well as the work with the protagonist, and to ensure a harmonic combination of practical learning as well as theoretical elaboration.

Time and Method of Training. The training lasts 4 years and includes a total of 200 hours of courses each year. About half of this time is dedicated to the practical part of the training; the other half is reserved for the analysis of videotaped experiences and the deepening of theoretical knowledge.

Each session lasts 4½ hours and is divided into an experiential and a theoretical part. The sessions are held 1 afternoon during the week and 1 full weekend per month. The interval between the sessions should not be longer than 2 weeks because the training group is also a therapy group. The choice of the afternoon session, followed by a long weekend 2 weeks later, allows the participants to experience the usual session of a therapy group as well as the intensity that characterizes an extended experience. One afternoon of these weekends is set aside to confront various aspects of the psychodramatic approach, with the help of teachers from outside. These include the theoretical and epistemological foundations of the Morenean psychodrama; meaning and use of sociometry; possibilities of the sociodrama; emotional and cognitive development of the person, according to the psychodynamic theory of Moreno; as well as theory of change and psychodramatic method.

At the end of each year, the student has to present a written paper on a given theme and take an oral exam on this subject as well as on themes presented by the staff during the year.

The Content of the Training. The experiential part of the training occurs along the usual line of a therapy group: according to the classical Morenean

subdivision, each session will have an initial phase of group work that will evolve according to the dynamics in the group or the special needs of the individuals, leading either to a sociometric experience or to work with the protagonist. The difference from a therapy group is that each member has to have access to all the possible roles, starting with the role of group member and progressing to audience member, the role of auxiliary ego, the alter ego, the leader of group work, and to the role of director of psychodrama.

The access to the role as a director is given gradually: during the 1st year, a few experiences leading group work; during the 2nd year, a consistent number of such experiences; during the 3rd year, experiences in directing brief psychodramas (about 1 hour), alternating with sociometric work; finally, during the 4th year, full responsibility for a certain number of sessions (2½ hours).

The enormous advantage of videotaping consists in the possibility of separating the experiential from the analytical, reflexive part of the training. The practical session of the training/therapy group can be held without didactic controls and brakes, allowing the emotional experience and the interactive group dynamics to develop fully. The discrete eye of the camera registers this material for the second part of the training, and these experiences can be reviewed with enough distance because there is time for emotional assimilation and integration. It allows constructive reflection about the direction, its positive and inadequate aspects.

Analysis of the videotaped sessions follows the traditional principle of the Morenean method that dismisses direct criticism and invites evaluations in constructive, personal terms. The problem of the subjectivity of the critical judgment, potentially hurtful, is largely overcome by the use of video. It allows viewers to concentrate on the efficacy of direction and reflect on the different ways and possibilities of directing. It focuses attention on the most frequent errors and cunning difficulties of directing, on the projective traps inherent in certain situations that mislead the director, and on the fine thread that signals the position of the director between reality and semireality and plus reality.

The telecamera has to show the whole psychodramatic space constantly in order to allow the sociometric aspect of the work in view to come into evidence, be it group- or person-centered.

Another possibility of the use of videotaping is the assemblage of different sequences of psychodramatic work. This allows us to visualize a specific phase of the psychodrama session or a particular technique of direction. In the first case, one can put into evidence different modalities of group warm ups, group work, sociometric experiences, and of taking charge of the protagonist, induction and management of catharsis, final integration, and sharing. In this use of videotaping, sequences of psychodramatic work can

also be put together to focus on different techniques of directing, such as concretizing, mirroring, doubling, the use of balcony or auxiliary chair, or certain specific forms of directing, including management of dreams, of vignettes, or of an encounter.

A last observation has to be made about the more traditional theoretical content of training. It should comprehend the systematic exposition of Morenean theory and method, its principals and its aim, and also include the Morenean approach into a more general psychological and sociological theory of personal development.

In our experience, the establishment of training groups that include people who belong to different levels of courses presents some difficulties in organizing the theoretical part. In fact, it means giving up the homogeneous presentation of theoretical contents, graded into set schemes, that in the traditional didactic work consists in the passage from general notions to more complex concepts. In our training organization, we create some "unities of study" arranged according to the subdivision of the material into fundamental themes. This allows the rotation of different study units in order to avoid repetitions for the members of the same level of the course. The advantages of groups that are heterogeneous exceed the relative complexity of this training structure. These advantages can be observed in the vivacity of these groups as therapy group, as well as in the opportunities for the participants to experience gradually different roles of direction within dynamic conditions.

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Psychodrama's Response to AIDS

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THIS ARTICLE PRESENTS SUMMARIES of two different workshops at the May 1989 meeting of the psychodrama association. One was coordinated by Irwin Stahl and led by Peter Pitzele, director of Psychodrama Services at Four Winds Hospital; Raymond Jacobs, AIDS project administrator, Young Adult Institute, and an early program developer of the Gay Men's Health Crisis Network; and Lo Sprague, cofounder, Guibord and Sprague Associates. The other was led by Lo Sprague with Zerka Moreno and Raymond Jacobs. Both workshops were dedicated to Neil M. Passariello, Irwin Stahl, and all others in and out of the psychodrama community who are living with AIDS.

Rene Marineau, in his discussion of Moreno's life story, aptly pointed out that there is always a profound difference between one's knowledge of historical or scientific facts and one's psychological experience of those facts. With AIDS, the scientific fact is: We are dealing with a deadly disease that is easily preventable. Yet it continues to spread throughout every nation of the world because the psychological experiences are so overwhelming that they encourage repression and denial. We are in a crisis of unparalleled proportion that urgently requires a way to break through this dysfunctional psychological rigidity. Psychodrama, sociometry, and group psychotherapy provide some of the best tools for reinstilling spontaneity into rigid perceptions. If Moreno were alive today, there is little doubt that he would be in the middle of the AIDS crisis—directing, challenging, confronting, creating new ways to cope.

The Reality of AIDS

The facts about acquired immune deficiency syndrome (AIDS) are relatively simple:

AIDS is a global disease. According to the World Health Organization, an estimated 5 to 10 million people worldwide (1½ to 2 million of them in the United States) are currently infected with human immunodeficiency virus (HIV), the causative agent. Many of them have no symptoms and do not know that they are infected and capable of transmitting the disease.