Psychodrama – theatre of spontaneity, action method for life

Introduction

Psychodrama was introduced by Dr Jacob L. Moreno as a treatment modality for individuals experiencing mental illness in the 1930's. Moreno (1972: a-e) described five instruments that are used in psychodrama. These are the stage, the subject or patients (referred to as the protagonist), the director, the staff of therapeutic aides or auxillary egos and the audience. Concepts and methods developed by Moreno continues to be used by health practitioners in many countries world wide. The nursing profession, especially education and mental health has been greatly influenced by Moreno since the 1930's to contemporary times (McIntosh, 2010, 1999). Psychodrama has a much broader use than its therapeutic intent and is used by practitioners from fields as diverse as education and training, theology and organisational management.

What follows is an account of how I used the five instruments of psychodrama during a workshop I conducted for health professionals. The content focuses on the specific work by one of the participants.

Action method of life

It is a pivotal moment during the workshop that I am facilitating. The workshop is on professional boundaries. One of the male participants Jacob*, has been struggling with the concept that the relationship he has fostered with an elderly female client has transgressed professional boundaries. As a group we have been using psychodrama to explore many themes pertinent to professional boundaries. It is clear to me that unless Jacob gains insights to the role relationships he has enacted with Mavis* there is a possibility that he will be reported to his regulatory board for boundary transgressions.

I invite Jacob to set out a previous scene where he has had an interaction with Mavis. Jacob becomes the protagonist for the group. I direct Jacob to choose one of the participants to be Mavis. This participant becomes an auxiliary ego for Jacob. The auxillary joins Jacob and I on the stage (a space that is created at the beginning of the workshop on/in which psychodrama occurs). What follows is a short vignette where Jacob re-enacts a scene that is familiar to him in the nursing care he provides to Mavis.

An essential intervention in psychodrama is role reversal. According to Moreno et (1955) (cited Kellerman, 1994) role reversal is important for personal self-integration and interpersonal socialization with others. In this vignette Jacob role reverses with Mavis. In the initial role reversal I interview Jacob as Mavis. It is important that I assist Jacob warm up to being Mavis, to deepen his experience in the drama. I ask a series of questions including: "Mavis how old are you? How long have you been in this nursing home? What family do you have? What do you enjoy about the nursing care that Jacob provides?". As Jacob experiences being in the role of Mavis his body posture changes from upright to stooped. I notice his fingers become stiffer. The tone of his voice changes from that of a confident young man to an older woman, frailer yet full of vitality.

After a short series of role reversals where he experiences himself in relation to Mavis and Mavis in relation to himself (a process which has taken four minutes), Jacob turns to me and states "she is my grandmother, I am relating to her as if she is my grandmother. She relates to me as if I am her grandson". I and the group give Jacob time to process this important information. Jacob looks up towards Mavis (he has been kneeling beside her, washing her feet, she has been sitting on a chair). I ask him to express to Mavis this new insight. He does so using a gentle tone and adds a significant element "and I have to change my role with you, I stopped nursing you when I took up the role of grandson. I stopped attending to your clinical needs".

I direct Jacob to role reverse with Mavis to experience her as she hears this statement from Jacob. As Mavis, Jacob states "I want you to be my grandson, I lost my only grandson when he was 20, you mean a lot to me". I direct Jacob to role reverse so that he is again in his own role. I ask the auxillary who has been effective in the role reversals to express what Mavis has just said to Jacob. She does so and I observe Jacobs body shift. I ask him to express himself, "I don't know what to do, I feel for her, I don't want to let her down".

Another crucial point has emerged in the drama. I ask Jacob "do you want to develop the capacity to change the role relationship that you currently have with Mavis?". He affirms that he does, "I have to, I don't know how to". I direct another drama with Jacob, this one set in the future. In this drama he develops a broad range of role responses in terms of the care he provides Mavis. He is able to set and maintain boundaries that is more in keeping with a clinician than a grandson. The learning challenges Jacob and through the role reversals he develops and strengthens his clinical identity.

At the end of the drama. I sit with Jacob in a circle with the other participants (the audience). I ask them to share the insights, awareness and learnings they have gained from Jacobs drama. The sharing is an integral part of psychodrama which aims to reunite the protagonist with the group, and to allow a consolidation of the work that has occurred for the protagonist and each participant. Further, the sharing enables participants who have been auxillaries in the drama to de role and and if required debrief from their experiences in the drama.

As I write this I am back in the drama with Jacob. I see and hear him in action. I recall the significance of the work he did in the drama. In *acting out* old and new roles he was able to gain greater awareness and insights into the motivations for his relationship with Mavis. Further and perhaps more importantly he was able to create different possibilities of future relationships with her. Such is the power of psychodrama to enable a travelling between past, present and future, to explore roles and relationships and to create new possibilities for those who engage in the process.

I finish with some words from Moreno in relation to encouraging patients to act out (Moreno coined the phrase acting out to mean acting that out which is within the patient, in contrast to acting a role that is assigned to a patient by an outside)

"Why not let him act out these hidden thoughts and strivings as an alternative to an analysis of his resistance".

Moreno (1972: x)

References

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NB. Names have been changed to maintain confidentiality of participants.

Post note. I would like to dedicate this article to Max Clayton who died 28th March 2013.

Max was one of the pioneers of bringing psychodrama to Australia and New Zealand in the 1970's. Without your vision and life Max I would not have experienced the this method which has been life changing for me. I thank you.