

The Genuine Encounter Revisited.

My own encounter with psychodrama

Why should we practice psychodrama? There may be many answers to this question. Anyhow, I shall never forget my first encounter with psychodrama. It was in 1977 when I worked as a child psychiatrist in a mainly rural area in North Sweden. I participated in a basic training in psychodynamic group psychotherapy. We had invited Carl Galaasen and Inga Allwood, both trained by Dean and Doreen Elefthery, to conduct a weekend workshop and give us a glimpse of what psychodrama was about. This weekend turned out to be a revelation for me. I had chosen to become a psychiatrist because of a strong interest in helping people's psychological problems and usually found myself at ease in the doctor- client relation. Anyhow I was painfully aware of my shortcomings. The medical and psychiatric training, mainly biologically based, left me without implements when drugs and an understanding attitude was not enough.

I struggled with the psychodynamic concepts, which offered new ideas but often had a dogmatic touch. I instinctively resisted the ideas about the therapist as an uninvolved and emotionally neutral "white screen" and felt sceptical about other psychoanalytic dogmas. I definitely did not like the "cardboard cut-out figure" model, which was preferred in the training I passed. It felt cowardly to hide behind this attitude and it could not possibly encourage open communication among the group members. I often spontaneously overstepped the rules and struggled with my ambivalence.

In Inga's and Carl's workshop I experienced active and encountering leaders. The presented themes of the group members were displayed in dramatic action on the stage in front of my eyes. Suddenly even difficult problems became comprehensible and could be worked with directly. Being a member of the group I experienced more intense emotional reactions than I ever had watching a movie or a traditional theatre performance. I encountered the other group members and my own feelings in a way I had never experienced in any therapeutic situation.

After the workshop I was already resolved: I wanted to learn psychodrama. So half a year later I had joined a basic training group with Dean and Doreen. It was a great experience to be a member of a continuous group. I took steps in my personal development and had opportunities to work through many difficulties in my present, rather messy, life situation. It was instructive to take roles in the dramas of other group members and sometimes overwhelmingly moving just to watch. The sharing at the end of the dramas also provided a new experience: The transparency of the leaders eliminated much of the shame I had in exposing my shortcomings and helped to create a culture of tolerance and openness. However I had to confront the obstacles and difficulties of learning to direct psychodrama myself. I had to unlearn many ideas about the role of a therapist. Moreno writes:

"The psychoanalytic interview in its orthodox form ... tried to be pure and objective, by reducing the involvement with the analyst to a minimum. In the psychodramatic situation a maximum of involvement with other subjects is not only possible but expected."(Psychodrama, Vol. I, p. b.)

In my first attempts at directing I felt stuck, paralysed and preoccupied with critical thinking. I slowly realised that, just as when learning to ride a bicycle or drive a car, most of the skills of a director had to become implicit. I gradually developed my freedom to trust my

spontaneous feelings and ideas when encountering the protagonist and the group and be open and relaxed whatever happened on the stage.

Thus the experience of psychodrama gave me, educated in the current western tradition of individualism, a lecture about the importance of the group and of what happens in the interpersonal space, which Moreno called “tele”.

“Tele is feeling of individuals into one another, the cement which holds groups together. It is *Zweiführung*, in contrast to *Einführung*. Like a telephone it has two ends and facilitates two-way communication. Tele is primary, transference a secondary structure.” (Psychodrama Vol. I p. XI)

The cradle of interpersonal psychology – and its continued development.

Moreno must be attributed to have formulated the first interpersonal psychological theory in the modern history of psychotherapy. His well-known poetic formulation from 1914 is like this:

“A meeting of two
eye to eye
face to face
and when you are near I will tear your eyes out
and place them instead of mine
and you will tear my eyes out
and will place them instead of yours
then I will look at you with your eyes
and you will look at me with mine”

Moreno 1946/1980: preface Vol.1

Moreno, as well as the philosopher Martin Buber, emphasized the priority of the interpersonal at a time when psychotherapists, inspired by Freud, devoted their efforts to investigating what happened inside the individual client on the couch. Moreno, a man of action, did not limit himself to poetry. As a young man he initiated “the House of Encounter”, where refugees could come together and help each other. He started a self-support group for prostitutes and found that every group member could be the therapeutic agent of the other. He worked with spontaneous drama, the predecessor of psychodrama. He introduced sociometry, when working as a doctor in a refugee camp, based on the conviction that active choices of companions based on interpersonal factors (tele) were important to create a healthier psychological atmosphere in the camp.

It would take many years before psychoanalytic dissidents like Karen Horney and Harry Stack Sullivan seriously considered interpersonal factors in psychotherapy. Also the growth of family therapy (where Moreno has been a disregarded pioneer) and systems theory (in my view sociometry should be regarded as an early form systemic thinking) have inevitably sharpened the focus on what happens between people. In my opinion the consciousness of the importance of the interpersonal space has in later years gradually permeated psychotherapeutic praxis. It is expressed by the followers of the British Object-Relation

school of psychoanalysis and for instance in the writings of Robert Langs. But many remnants of old praxis, for example the idea of the neutrality of the therapist, have remarkably survived.

In psychodrama the main aim of the techniques is to accomplish a genuine encounter, the necessary condition for any change to occur. The protagonist encounters his own inner pictures of important persons in his life as well as hidden parts of himself on the stage represented by auxiliaries. He also encounters the other group members as authentic persons. Also in a family therapy setting and in work with organisations the goal is to favour authentic encounters between the members. What happens in the encounter is produced through implicit and explicit communication of feelings and intentions and may result in action, new feelings and insights, possibly the catharsis that occurs with integration. That is what makes psychodrama an effective mode of psychotherapy. We still honour JL Moreno's speculative ideas, which almost a hundred years ago opened a new direction for us to follow.

The first encounter between child and mother

In the last twenty years research in neurobiology and early child development have contributed to scientific evidence that substantially supports Moreno's ideas. Among the contributors is Daniel Stern, a psychoanalytically trained researcher on child development. His book *The Motherhood Constellation* describes the interplay between babies and their mothers. The use of modern recording devices, videos etc, allow detailed studies of short moments and reveals an earlier unknown richness of interaction. The baby is exposed as genetically equipped to actively establish contact with and respond to its care-giver, (generally the mother), which seems to be a prerequisite for survival and development. Stern describes the mutual development of increasingly sophisticated interactional gestalts, which he calls "schemas". I would like to reformulate these observations in psychodramatic terminology: **Tele as well as genetically established roles seems to be established from birth and generate a continuous development of roles and counter roles in the encounter between the baby and the mother.**

Attachment theory and role theory

In this context it would be unfair not to mention John Bowlby who, since the 1950's, based on child observations, developed *Attachment Theory* inspired by the ethological studies of Lorenz.

Bowlby rejected the psychoanalytic word "object". He felt that "attachment figure" better captured the bi-personal nature of the relations. Bowlby regarded attachment as a primary biological function to secure survival, true for all social mammals, not just human beings. In the child development process he places emphasis on *how* the interpersonal field is created by both individuals within a relationship.

"Confidence that an attachment figure is, apart from being accessible, likely to be responsive can be seen to turn at least two variables: (a) whether or not the attachment figure is judged to be the sort of person who in general responds to calls for support and protection; and (b) whether or not the self is judged to be the sort of person towards whom anyone, and the attachment figure in particular, is likely to respond in a helpful way.... The model of the attachment figure and the model of the self are likely to develop so as to be complementary and mutually confirming." (Bowlby 1973, p.238)

Referring to my earlier formulation I read this citation as another description of the internalisation of roles and counter roles in the early development of a child.

Bowlby's text makes me associate to a concept formulated by the Australian psychodramatist Lynette Clayton:

“Clusters of role can be recorded in three gestalts...The first gestalt I have termed the neurotic gestalt. It represents the unresolved pathological aspects of the parents' personalities together with the role responses of the child. Whenever severe psychopathology is encountered, the person, whether temporarily regressed or permanently adjusted to a pathological identity, enacts the roles within the pathological gestalt” Lynette Clayton in the Journal of Group Psychotherapy 1982 p. 112)

In this article Lynette Clayton focuses on the pathological aspects of internalisation of roles and omits to mention the probability that a full range of roles is internalised in the same way.

Bowlby's theories have got support from the research of Mary Ainsworth and Mary Main. Ainsworth designed the “Strange-situation test that assesses the infant's response to being separated from the primary caregiver and left alone with a stranger for a three minute period in a strange room. Mary Main assessed adult attachment styles using a narrative interview. They identified characteristics of “secure attachment”, basically a healthy narcissism and three different dysfunctional attachment styles, avoidant, ambivalent and disorganized. Not surprisingly they found connections between the styles of the parents and their children and conclude there is evidence for propagation of attachment styles through generations. There has been some controversy among researchers about the number of attachment styles. Speaking as a psychodramatist I would simply regard the attachment styles as role clusters, internalised from early childhood and possibly more nuanced and varied in their appearance. The attachment theory describes the enormous importance of the human encounter without ever using the specific word.

The present moment – Kairos and spontaneity.

In his latest book *The Present Moment in Psychotherapy and Everyday Life* Stern takes the step from Child development research and focuses on what happens between human beings generally and – as can be understood from the title – especially focuses on the moment, what happens here and now? He concludes that conscious moments are short, generally around 3-4 seconds, that they have an emotional tone, include intention, action and resolution, a mini-drama. Stern suggests the Greek concept for subjective time, *Kairos*:

“a moment of opportunity, when events demand action or are propitious for action. Events have come together in this moment and the meeting enters awareness such that action must be taken, now to alter one's destiny – be it for the next minute or a lifetime. If no action is taken, one's destiny will be changed anyway, but differently, because one did not act” (p.7)

This in concordance with Moreno's definition of spontaneity and his view that spontaneity is essential for survival and that lack of spontaneity thus prevents us from making good choices and taking adequate action.

Mirror neurons and implicit knowledge – prerequisites for intersubjectivity

Stern writes concerning intersubjectivity, that we can perceive the intentions and feelings of other people, because of the way our neural systems are constructed. Two souls co-create intersubjectivity, intersubjectivity creates two souls. We now have neuroanatomical evidence: the recently discovered mirror cells mediate, implicitly, information about the intentions and emotional states of the other and are the basis of our capacity for imitation, which is remarkably well developed immediately after birth. Research so far supports the idea that they provide the neural structure for empathy, language formation and most social skills. I guess Moreno would have been enthusiastic to know the existence of “action and tele neurons”

The importance of implicit knowledge, Stern writes, was long overlooked but constitutes the quantitatively overwhelming part of our total knowledge, including most of our social skills. In an encounter, for example a psychotherapy session, beside the explicit verbal content, there is an abundance of implicit material related to the working relation, the holding environment and transference- counter transference issues, all communicated through body language, vocal pitch, eyes and facial expression. The implicit regulates the intersubjective field. Stern assumes that it takes place through sequences of moments, a mainly unconscious dyadic process, where both parts read what happens in the room:

“In dealing with this relational-process agenda, the patient and therapist are ... either face-to-face looking at each other, or they are standing side by side looking at themselves, looking at each other, or alternating between these two positions”(p.121)

This reminds me again about Moreno’s formulation of the authentic encounter. Again it dispatches the myth about the objective, neutral therapist who can work without being affected and just apply his techniques. Of course the implicit material can be used in a fruitful way in psychodrama because of its emphasis on action, spontaneity and encounters.

The moment of intersubjective consciousness

Stern is also concerned with consciousness. Introspective consciousness is the awareness of having the phenomenal experience and is expressed verbally in talking therapies. In psychodrama and other action methods, phenomenal experience is usually synonymous with action.

Stern asks how a present moment that is implicitly grasped can be conscious. He suggests:

“When two people co-create an intersubjective experience in a shared present moment, the phenomenal consciousness of one overlaps and partially includes the phenomenal consciousness of the other. You have your experience plus the other’s experience of your experience as reflected in their eyes, body, tone of voice and so on. Your experience and the experience of the other need not be exactly the same. They originate from different loci and orientations. They may have slightly different coloration, form and feel. But they are similar enough that when two experiences are mutually validated, a “consciousness” of sharing the same landscape arises. This is *intersubjective consciousness*.” (p. 125)

Stern suggests that reflective consciousness is social in origin and depends on a shared experiential world and social reflectivity. It would mean that we become aware of our own mental states as we discover that others have them. And again I feel the relationship between Stern's thinking and Moreno's concept, the co-unconscious.

Solid support for psychodrama

Starting from my personal discovery of psychodrama, I have aimed to connect Moreno's pioneering work with recent development in the field. Moreno's concepts were developed at a time, when the main direction of psychotherapy was focused on the individual and the subjective qualities of the therapist were hardly mentioned. Research about attachment and intersubjectivity based on gradually more sophisticated observations as well as neurophysiological advances confirm much of Moreno's early speculations and give clues towards understanding the advantages of psychodrama as a method of therapy and group work. It has been tempting to refer to the role theory when discussing other directions of psychotherapy. That has to do with my conviction that role theory because of its phenomenological character is very practical when describing what happens in therapeutic action. Besides I feel satisfied when practising a controversial method to find so much practical and theoretical support for doing so.

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