CHANGE PROCESSES IN PSYCHODRAMA

by

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The purpose of this study is to investigate the meaning of a significant psychodrama experience for participants in a psychodrama workshop . After the workshop is completed, participants were invited to take part in the study. The study involved a taped interview session using open ended questions and a written confirmation of analysis. The co-researchers were asked to describe their experiences after the psychodrama. The interview was tape recorded and transcribed. The transcripts were analyzed for themes. Theme statements were mailed to the co-researchers for verification. Additional remarks or deletions by the co-researchers were incorporated into the theme statements. The theme statements were then clustered and a description of the experience created. From the description, an essential structure was established. The study used an existential - phenomenological approach to describe the meaning of the experience for the group of six co - researchers.

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Chapter 1

Introduction

Psychodrama is a form of group therapy based on real life experiencing. J. L. Moreno developed the theory, philosophy, and methodology in 1908. Moreno believed that humans need to "recover their core selves which became lost through the pressures and demands of daily living" (Moreno & Moreno, 1969) and that we are social beings defined by our relationships with others.

Moreno's personality theory stresses normal functioning. Health is equated with spontaneity and creativity. He believed that people naturally self-actualize; they are able to cope and solve problems. At birth one is perceived as having an innate, creative vitality in every life encounter. Psychodrama facilitates the ability to be spontaneous and creative once again.

Psychodrama therapy models itself on life and believes that change occurs through action based encounters with others. Real life experiencing is based on 'encounter' which includes both self and others in terms of one psyche to another (Moreno, 1946).Through the encounter truthful communication is created (Moreno & Moreno, 1969). The cathartic dimension allows for change emotionally and physically (Janov, 1991). One develops a greater role repertoire through the experience (Blatner, 1984). Working in groups allows individuals to discover self through others in a supportive context (Gazda, 1968). Moreno believed in the group as a healing agent. He stated "If God came into the world again, He would not be incarnated as an individual, but as a group." (Moreno, 1989, p. 51).

Issues are worked out, be they past, present, or future, in the here and now, in an I - Thou encounter. Having worked out issues in an encounter (action based, social situation) one learns to rid oneself of frozen, fixated behavior and perceptions and act spontaneously and creatively (optimally adaptive) (Gazda, 1968). Affective, cognitive and behavioral dimensions are reached which encourage "new perceptions and behaviors and/or reorganizations of old cognitive and behavioral patterns" (Gazda, 1968, p. 107). The emerging patterns made aware of are more easily generalized to real life, as they are learned in 'real life' situations. Dramatic interactions, sociometric measurements, group dynamics, catharsis, and role theory are implemented to facilitate changes in both the participant and the group (Gazda, 1968).

Being with others provides models for role behavior and interaction. Each participant is the therapeutic agent of the other. Feedback is a necessary part of the experience. Moreno believed that engaging with one's muscles in movement increased the intensity of memory and emotional commitment and enhanced awareness of one's thoughts, actions and emotions. Self-awareness and feedback from others combine to enhance growth. Learning is aided by the director and the group. Usually a cathartic experience is involved in this growth and from this experience new insights and roles emerge.

Statement of the Problem

The aim of this study is to investigate the meaning of the experience of 'significant change' as reported by participants in a psychodrama. It attempts to examine the process of change from the point of view of several participants understood within the context of the whole psychodrama experience.

It has been difficult to analyze the experience because of its complexity. Kipper (1978) points out that there is little research claiming psychodrama is effective and valid.

Perhaps one of the reasons for the limited amount of research is related to the complexity of the psychodrama experience. The number of variables are many.

Research, thus far, has mainly been based on ethnographic or quantitative methods. The ethnographic approach is mainly composed of practitioners "comments based on personal experiences with clients" (D'Amata & Dean, 1988). A major criticism is that "The zeal and perseverance of many practitioners not only imply bias, but precludes even a pretense of objectivity" (Slawsohn, 1965, p. 531). Quantitative research studies have many problems in methodology due to the many variables to be controlled (Kipper, 1978; Kellerman, 1987; D' Amato & Dean, 1988). Therefore the validity of psychodrama as a therapeutic tool needs more research as there are many methodological problems (Kipper, 1978; Kellerman, 1987; D'Amato & Dean, 1988).

The combination of different research methods, quantitative and qualitative (ethnographic and phenomenological) might enhance and help to flesh out an understanding of the process of psychodrama to help us better understand the process of change. For this reason, I have included research studies in the literature review that are both quantitative and qualitative.

The study attempts to understand the basic structure of the experience of being a participant who reported having had a significant change experience. The aim is to find themes or patterns common among participants who experienced change. Themes are then formulated into a description of the experience and finally into an essential structure. The focus is the lived experience from the subjective perspective of the co-researchers. The goal is not to predict or control the experience, but to understand the meaning for the participants involved. The qualitative approach using the existential phenomenological approach was selected as it appears most suitable to capture the complexity of the experience.

In this study some of the following questions were addressed:

1. What effect does the psychodramatic experience have on participants?

2. How do individuals experience change or a coming to terms with issues and a corresponding change in cognitive, affective and behavioral dimensions?

3. What factors enable a powerful cathartic experience to take place?

4. Is a cathartic experience necessary for change in psychodrama?

5. How does the change experience relate to role, catharsis and interpersonal relations?

The study attempts to describe the whole psychodrama experience from the participant's point of view seeking to examine the nature of change.

The implications of the study are that it may assist psychodrama directors to facilitate participants in achieving a significant experience of change. Also, in respect to theory development, the research may enhance an understanding of the process of change in terms of the whole experience, the group, catharsis, and role.

Definitions

Definitions are included in order to clarify common terms used in psychodrama. Unless otherwise stated the source is Gazda, 1968.

1. <u>Psychodrama</u>: "...involves a group of individuals who assemble under the leadership of the therapist or director and enact events of emotional significance in order to achieve resolution of conflicts and release from inhibitions which limit their capacity for spontaneous and creative activity, particularly as they affect personal relationships" (Davies, 1987, p. 202).

2. <u>Role</u>: "Any specific act is the result of one's somatic, psychodramatic, and social roles. A somatic role is a constellation of body states at the moment. A psychodramatic role is a constellation of role behaviors particular to the individual based upon

experiences up to and including the present moment. A social role is the constellation of role behaviors common to one's subgroup passed on by parents and teachers. Body, psychological self, and incorporation's of society blend are experienced as self and expressed in behavior" (Fine, 1979, p. 429).

3. <u>Protagonist</u>: Through a selection process, the protagonist emerges from the group with a pressing need to explore a life issue through portraying intimate scenes (p. 38).

4. <u>Auxiliary Egos</u>: Auxiliary egos are group members chosen by the protagonist. They agree to represent others of significance to the protagonist's world, living or dead, real or imagined, animate or inanimate. An auxiliary may also come forward from the group, on their own, to stand beside or behind the protagonist to voice thoughts the protagonist may be having but is unable to express (p. 40).

5. <u>Director/Facilitator</u>: The director is the producer, the therapist, and the observer/analyzer. She/he helps in the selection of the protagonist, deciding the appropriateness of psychodramatic techniques, warming up the group, helping the protagonist to develop the scene, facilitating the expression of feelings. At times, the director may help the protagonist gain new understanding by making therapeutic interpretations (p. 45).

6. <u>Group/Audience</u>: The group supports the protagonist by serving as auxiliary egos and doubles, by its silent empathy during the session, and by its non-critical, non-analytical feedback during the final sharing phase of the psychodrama (p. 47).

7. <u>Stage/Action Space</u>: The stage represents an extension of the life space of the protagonist. It is the locus of psychodrama, providing an objective and secure setting to explore deep mental conflicts (p. 50).

8. <u>Warm-up Phase</u>: The warm-up is the psychological experience of focusing attention on the task in order to formulate goals and feelings and establish security

within the group. The objective is to foster spontaneity in preparation for the action (p. 52).

9. <u>Action Phase</u>: The action phase begins when the protagonist enters the action space; it involves acting out and working through the issue presented by the protagonist. Enactments are in the he here and now, whether they are past, present, or future events (p. 53).

10. <u>Sharing/Discussion Phase</u>: During this final phase, the participants share their perspectives of the experience. Group members and the protagonist review their experiences and feelings in a constructive and supportive way. The director watches to prevent attempts at analyzing or confronting the protagonist (p. 54).

11. <u>Encounter</u>: The encounter is at the very core of psychodrama. It is the process through which individuals meet and understand each other on a deep and meaningful level. Moreno (1946) states of the encounter:

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 (p. 106).

12. <u>Significant psychodrma experience</u>: Co - researchers in this study experienced what was, in their own eyes, a significant psychodrama. As 'significant psychodrama' is a subjective perception, and the focus of this studyt is on the meaning of that expereince to the indiviudal who lived it, no attempt was made to operationalize that term ahead of time.

(Martens, 1990, p. 14).

13. <u>Intermittant attention</u>: Focus of awareness may change from the encounter to the audience.

14. <u>Safety</u>: Co - researchers need to feel trust in others and feel protected by them.

Chapter two will review and evaluate concepts and studies in three areas of the psychodrama experience; role, catharsis and the group development and dynamics. The literature review will also include research analysis.

<u>Limitations</u>

The results of this study represent the meaning of the experience for six co-researchers; volunteers from a weekend workshop lead by two directors.

The population chosen consisted of therapists in the field, both private and educational, and students in the graduate Counseling Psychology program. They participated in the workshop as a vehicle for experiencing and learning about psychodrama. Most participants have had pervious knowledge of what psychodrama is and many have had at least one previous experience in psychodrama. This educational and experiential background may have a role in the meaning of the experience for the participants. Participants with different experiential, educational, and career background may have other meanings to the experience.

All the co-researchers live in Canada; some were immigrants. Participants were not chosen to represent different genders, ages, ethnic groups or races.

Chapter 2 Literature Review

Introduction

The literature review will examine three key concepts in psychodrama - role, catharsis, and group development and dynamics. A preview of the literature on psychodrama reveals that there are many elements that combine to effect change. Initially I have chosen three concepts that I deemed important by an examination of the literature and as a participant observer in the psychodrama workshop. The key concept of role will be described as first envisioned by Moreno to later developments of that concept - Blatner's role dynamics. Role will be examined in light of how it enhances the change process. There will be an examination of catharsis as a significant component of the change process. Group development and group dynamics will be focused on as critical processes in the change process in psychodrama.

Psychodrama Theory: A Description

Psychodrama theory is based on the idea that change is created best through acting out scenes from life rather than talking about issues one has (Moreno, 1958, 1971, 1984). Moreno's famous statement about psychodrama is that it is a rehearsal for life (Moreno, 1971), but also extends life by "reliving unsolved problems within a freer, broader and more flexible setting" (Petitti, 1992, p. 40).

Moreno's (1971) theory is based on four concepts - time, space, reality, and the cosmos. It is the combination of these aspects of psychodrama which produce change. In recreating a life experience Moreno believed that it is necessary to do so in the 'here and now'. In order to achieve the acting out (as opposed to reacting to the outside world) experience, a physical setting needs to define the action. Moreno refers to this as space. In terms of reality, he focused on the use of surplus reality. He summarizes this as "the invisible dimensions in the reality of living that are not fully experienced or expressed"

(p. 463). By accessing surplus reality one can deepen understanding, both cognitive and emotional, through awareness of different perspectives. Finally, cosmos can be seen as the creative act of possibilities. There are no restrictions in psychodrama in terms of creating role; one can be any age, sex, or creature, be real or imagined. The creations are tied to the "subjectivity and imaginings of the protagonist" (Moreno, 1971, p.465). Through these concepts "Psychodrama enables the protagonist to build a bridge beyond the roles he plays in his daily existence, to surpass and transcend the reality of life as he lives it, to get into a deeper relationship with existence, to come as close as possible to the highest form of encounter of which he is capable" (Moreno and Moreno, 1969, p. 29).

Stages

There are three necessary stages in psychodrama; the warm-up, the enactment, and the integration stage. As psychodrama is a group therapy, it is important to create an atmosphere of safety and trust before members feel able to participate. The warm-up stage is the foundation for the psychodrama as it allows for safety and group cohesion to occur. During this stage potential protagonists are chosen. This stage, as all the others, has no time perimeters, but is dependent upon group dynamics and individual readiness.

The middle stage of psychodrama is the enactment or reliving experience. There is great flexibility on the form of reliving that occurs. It may be a real life past or future experience or an imagined situation. It takes place either through the protagonist and the director, or with the assistance of auxiliary egos and doubles. There are many forms of the reliving experience. The result one seeks is a resolution and it can take many forms from finding an answer to an issue to becoming aware of an issue for the first time.

The integration phase begins at the end of the enactment and may go on for any period of time during and after the psychodrama. This is a period of sharing both feelings and cognitions about the experience for protagonists and the group members.

Techniques

There are many techniques available to create and expand the reliving experience. The following is a list of some techniques:

1. <u>self-presentation</u> (mono-drama) - The protagonist describes him/herself or portrays important people in his/her life.

2. <u>self-realization</u> - The protagonist presents the vision of his or her life, past, present, or future with the help of auxiliary egos.

3. <u>director soliloquy</u> - This is the protagonist's monologue. He/she steps outside the scene and speaks aloud his/her thoughts.

4. <u>therapeutic soliloquy technique</u> (asides) - This is the rendering and speaking aloud of hidden feelings and thoughts simultaneously with the scenes and thoughts of the main action; side dialogues and actions are often involved. The protagonist remains in the scene. The soliloquy reveals the personal reactions of a protagonist to the role and situation he/she has presented. It may reveal protagonist's real life patterns.

5. <u>double</u> - The inner world of the protagonist is tapped into through the auxiliary ego. He/she acts out what the protagonist acts and so becomes the conscience or unconscious of the protagonist.

6. <u>multiple double technique</u> - Several doubles, each representing parts of the protagonist's personality, present themselves, simultaneously or consecutively. Ambivalence, for instance, may be portrayed.

7. <u>mirror</u> - A group member portrays the protagonist in order to reveal his issue clearer, or to motivate the protagonist to become more active.

8. <u>role-reversal</u> - The protagonist assumes the role of his antagonist in an encounter.

9. <u>future projection</u> - The protagonist portrays either a realistic anticipated event or a dream future. What is important is the differences between where the protagonist is and where he/she would like to be.

10. <u>life rehearsal</u> - The protagonist works out, in advance, situations he is going to make happen.

11. <u>hallucinations</u> - The protagonist acts out his hallucinations in order to deflate their impact.

12. <u>dream</u> - The protagonist acts out his/her day dream or nocturnal dream by first inducing a state of near hypnosis. The technique may correct frightening experiences by learning to repeat the dream in many versions and attempting to correct a dream pathology. He/she trains the unconscious state and tries to replace frightening dreams by more harmonious and creative ones.

13. <u>auxiliary world</u> - The community becomes the protagonist's world which is recreated in its entirely in order to establish what is happening and needs to be changed. (Gazda, 1968, pp. 178 - 190).

Role

Moreno tried to "construct a therapeutic setting that uses life as a model, to integrate into the setting all the modalities of living - beginning with the universals of time, space, reality, and the cosmos ... and moving down to all the details and nuances of life" (Moreno, 1971). He believed that people learn best by creating or recreating important scenes in their lives. This could be accomplished by taking on roles. In this manner, an individual could become spontaneous and creative; conditions necessary for health according to Moreno.

Moreno believed that "Role playing comes before the emergence of the self. Roles do not emerge from the self; the self emerges from roles". Psychodrama enables individuals to act out roles. In this manner, "Psychodrama enables the protagonist to build a bridge beyond the roles he plays in his daily existence, to surpass and transcend the reality of life as he lives it, to get into a deeper relationship with existence, to come as

close as possible to the highest form of encounter of which he is capable" (Moreno & Moreno, 1969, p. 29).

Fine (1979) defines role playing as " a characteristic set of institutional behaviors defined both by the individual and by the group. Not only does an individual strive for homeostasis (internal balance) but he also strives for sociostasis (social balance through having well-established social atoms)" (p. 441).

Personality, Fine (1979) states is the "constellation of all role behaviors one has learned", the more roles one has incorporated the more likely that one is acting to the necessities of the moment rather than acting in a fixated, rigid manner. According to Fine (1979) pathology results from "a person having a paucity of roles due to a depressed environment, from incorporating incongruent or ineffective role models, and/or from inhibiting the expression of roles that are in the person's repertoire but blocked at an expressive level"

(p. 441). Integrated behavior incorporates "the cultural context and the goals that give one's life direction" (Fine, 1979, p. 441). This study will examine how role is developed in psychodrama and how role enhances awareness and change.

Role Dynamics

Role dynamics is a term applied to the systemization of Moreno's role theory. Blatner (1991) created this term "to serve as an integrative and comprehensive theory of psychology, a rational foundation not only for psychodrama but also for an eclectic approach to psychotherapy in general" (p. 33). This theory acknowledges the "multifaceted nature of human existence" (p. 38). Role dynamics offers an integrated approach as well as incorporating play, spirituality and cultural influences.

Moreno (1971) had a practical concept of role aimed at aiding individuals to "reflect on and change their own beliefs about themselves" (p. 34). Blatner (1991) envisions role

dynamics as including more than this. It is "a psychosocial phenomena in terms of the various roles and role components being played, how they are defined, and redefined, renegotiated, revised and actively manipulated as apart of interpersonal interactions" (p. 34). It involves "a general unit of interaction involving a complex of behavior, expectation and overt or covert consensual agreement" (p. 34). Personality is various roles unfolded in a dialectical process.

Blatner (1991) maintains that role dynamics are beneficial because it is comprehensive especially for clinical use. Role is easy for individuals to understand and the idea of role is familiar to people through television and film. People can understand examining their lives in terms of the many roles they play. This examination need not focus on the pathological. For research though, role needs "more precise definitions" (p. 35).

Role, Blatner (1991) states, is a powerful metaphor. Life can be viewed as a dramatic performance. A complex of associations can be made evident. Blatner states "a pluralistic model of human experience encourages a wider range of involvements" (p. 36) motivations and interactions. Role encompasses the complexity of human nature and reveals the many roles that can be played out in healthy behavior.

The effectiveness of role is being able to have role distance, the "differentiation in which actors separate from the role they play" (Blatner, 1991, p. 37). People can use role distance to "liberate themselves from many of their psychosocially imposed predicaments" (p. 37). Blatner states that people not only perform roles but can reflect on them and "how they are defined, performed and received" (p. 37). Role dynamics allows for the "multilevel process of cognition and encourages its use as a resource for insight and adaptation " (p. 39).

Part of role distance can be having a role that is in charge of how the other roles are played. In drama the roles of playwright, producer, audience, and agent parallel this position. The actor as person, is involved in the creative process that interpenetrates but

is different from the part written in the script. These meta roles help an individual to "recognize that they are not identical to the part they play" (p. 37). Psychodrama also offers, through sharing with the collective new expectations, rules, and procedures by reflecting, reevaluating, redefining and renegotiating.

Blatner maintains that the use of role dynamics can be a powerful metaphor for life where individuals can become spontaneous, improvisational actors, creating new roles without scripts. People could envision themselves as actors taking on new roles and leaving undesirable ones behind - as if, as Blatner states, negotiating with an inner agent. Role distance can therefore been seen as an observing ego or participant observer. This allows one to have diversified viewpoints and think on several levels simultaneously. Blatner maintains that "Thinking on several levels simultaneously is the basis for imagination and creativity "(p. 39).

Role distance may be a powerful means of change that can be accessed in psychodrama. An examination of this phenomena will be made in this study, especially during the sharing session, when group members may facilitate the broadening of role for the protagonists.

Spontaneity

Davis (1964) states that psychodrama attempts to synthesize psychological analysis with dramatic actions, and to build a living picture of the protagonist's private world with all its prejudices and fantasies" (p. 15). Intuitive and creative abilities are fostered alongside a protected environment for "reality testing" (p. 15).

Spontaneity and creativity are the redeeming factors of man, according to Moreno (Davis, 1964, p. 15). These factors come into play in the reliving experience of psychodrama. It is through spontaneity and creativity that the protagonist is triggered into the real life experience.

A central core of psychodrama is the reliving experience. Davis explains this experience as a combination of modes. "The first of these modes is the conscious and spontaneous reproduction of scenes from his own past, experience or of material which he has learned from others" (1964, p. 15). In this mode the protagonists is similar to an actor. But, in the other mode he is "more of a composer, acting out the creations of his unconscious"(p. 15). "The drama lies in the confrontation of the unconscious attitudes and wishes by the objective reality of the situation, which is manifested in the reactions of other persons on the stage to the protagonist's behavior and words" (p. 35). There is a use of play, fantasy, intuition, or artistic imagery and other components from the subconscious realms of primary process as vehicles for creative living (Bellak et al., 1973, in Blatner). In spontaneity, as Moreno defines it, the intuitive impulses and inspiration are balanced with the power of reason and aesthetic sensitivity expressiveness is balanced with effectiveness and primary process is balanced with secondary process" (Blatner, 1984, p. 97). A self confidence is gained through allowing spontaneity to happen.

Del Nuovo, Spielberg, and Gillis (1978) describe spontaneity as:

1. Psychophysiological correlates: a keen sense of excitement, acute ability to appreciate bodily sensations, and an energy flow within the person of the protagonist.

2. Altered cognitions; a cognitive shift, a new integration of selves and world about them, a new sense of clarity which crystallizes choice and facilitates decision making, often involving risk.

3. Alteration of self awareness: totally involved and unaware of audience. A shift in the basic figure - ground relationship between self and the outer world.

4. Supra-reality: the spontaneous experience established the set for the protagonist to allow himself to do in fantasy beyond his or her present experience and actively test out

new possibilities, attitudes, and/or feelings. Experience of supra-reality is a more active

component which is lacking in the thinking oriented category of altered cognitions.

5. Experience of individual autonomy and potency: a greater sense of activity which

feels inner directed, a renewed confidence in their own personal resources, and a greater

sense of capacity to control own lives.

6. Sense of discovery: a sudden insight which may or may not come out of the

experience. When it does, it is experienced as a powerful new level of awareness

(pp. 87-92).

Moreno (1946) believed in spontaneity because, he stated "Creative life, as we use the

term, is life that creates the life energy working through the bodily and personal

organism"

(p. 149).

Catharsis

It is through the spontaneous reliving experience that catharsis may occur. Catharsis

is one of the main components of psychodrama that enhances change. Moreno defines

catharsis as 'emotional purging' and sees this as combined with an integration and

ordering.

Moreno used Aristotle's concept of catharsis as a process which takes place in the

mind of the spectator of a drama and elaborated on it. He distinguished three forms of

catharsis: "The first form of catharsis takes place in the author, the creator of the

drama. In writing the play he gets many things 'off his chest.' The next recipient of

catharsis is the actor who interpolates his own experiences into the role which the author

created. The third recipient is the spectator who experiences a catharsis in the

Aristotelian sense. In psychodrama the patient is the recipient of all three forms of

catharsis at one time. He is the creator, the actor, and the audience in one person, thereby deriving a maximum benefit" (Fantel, 1945, p.367).

Catharsis in psychodrama includes a "non verbal enactment", a " private ritual", a "communal shared rite of healing", an "interpersonal conflict resolution", and a "religious and aesthetic experience" (Kellerman, 1984, p. 10).

Blatner (1985) defines catharsis as composed of four different categories. There is an emotional element which he defines as abreaction which is "the recognition and expression of feelings that had previously been disowned and are allowed to surface through the psychodrama action." This is followed by "an expansion of the sense of self to include new role functions that had been previously experienced as incompatible with the identity"

(p. 161). There are physical and mental feelings of peace and relaxation which follow this experience. The catharsis of inclusion is the third category and it involves a sense of belonging and acceptance from the group. The last category that Blatner includes is spiritual catharsis and this is achieved when "an individual experiences an even higher level of integration that has to do with an individual's relationship with ultimate values and beliefs, with the universe, with wholeness, or with God" (p. 161). Blatner maintains that this last category is not always included in catharsis, but is a part of the healing and personal growth process (Gilbert, 1992, p. 30).

Gilbert defines catharsis as being of two parts. One part is psychological catharsis, a therapeutic process for the resolution of traumatic experiences. Gilbert examines this part. Gilbert's study undertakes to provide a comprehensive understanding of this process which has not been researched before.

Gilbert attempts to flesh out the concept of catharsis in her study "Common Factors Across Three Cathartic Therapies" (1992). She defines psychological catharsis and operationally defines it. Her study determines the key element of psychological catharsis

as being a reliving process which is operationally defined. Finally, Gilbert identifies three cathartic therapies to determine common and crucial factors/behaviors/conditions involved in the reliving process.

Gilbert sought to answer the questions -"What common factors/behaviors /conditions are involved which facilitate the reliving process to occur in a given therapy session using three therapies?" and "Which factors are considered, by the therapist the most necessary to critical in the facilitation of the reliving process?" (1992, p. 5).

Through her review of the literature she determines the definition of psychological catharsis to be:'

"1. Specific or general primal pain can be repressed so that it is completely lacking from the conscious memory or else exists in an abridged form. The first reaction to primal pain is a splitting off process often manifested by a trance-like or contactlessness state. Repressed primal pain is converted into physiological, emotional and/or behavioral symptomology which can include the trance state.

2. The trauma must be relived as vividly as possible; to relive means: a. the experience must be remembered; b. the emotions that accompany the memory of the experience must be expressed.

3. When primal pain is experienced in the present the client may relive his/her defensive response to the trauma i.e. psychological, physiological and or emotional symptomology. The individual must go beyond this point; to relive the actual trauma and express the emotions he/she did not communicate at the time it occurred.

4. The whole process of reliving a primal pain must be analyzed. Analysis means; a. to categorize, analyze, clarify, interpret, explain, confront, comfort, challenge, discuss before, during, and after the reliving process. b. to aid the patient to understand and comprehend the meaning of his/her pain and how it related to his /her symptomology c.

to help the client gain emotional and intellectual integration of what he/she is going through and of what he/she has gone through in his/her sessions.

5. Once repressed traumatic experiences have been relived possibly more than once and analyzed the symptoms they cause disappear and the patient is purged of his/her pain - psychological catharsis.

a. However symptoms that originate from childhood trauma, but are triggered by a recent trauma, will not be eradicated by reliving the latter. The original trauma must be relived and analyzed.

b. Symptoms of an original trauma will resurface during the therapeutic reliving of childhood traumas that emotionally parallel the first. This symptomology will not be eradicated until the first original trauma is relived and analyzed" (1992, p. 45).

Gilbert operationalizes the reliving process as:

1. When an individual reexperiences a deep repressed emotional event as vividly as possible; the individual does not merely recall the event he/she reenacts the incident right in front of the therapist.

2. The original memory causing the repressed emotional pain be remembered consciously.

3. The emotions that accompany the memory of the experience must be expressed.

4. When an individual is reliving repressed emotional pain it was observed that he speaks and acts in the present tense (1992, p. 203).

Gilbert identified a pattern as existing within the reliving process which consists of regression, symptomology, and expression/recollection.

The methodology used was the 'Critical Incident Technique'. Data was collected through interviews and the following questions were asked:

1. "Is the reliving process a regular occurrence in your therapy?

2. (If their credentials had not been verified) Are you a certified Bioenergetic

therapist, Hypnotherapist, or Primal Therapist?" (1992, p. 6).

If the questions were answered in the affirmative therapists were included in the study.

Interviews were held over the telephone and were approximately one hour. Each

interview was tape recorded and a transcript made. Open ended questions were used

such as "Could you describe the session from the beginning to the end; telling me exactly

what was said and done by you and the client?" (1992, p. 95).

A total of fifteen psychotherapists were interviewed concerning their experiences in

therapy involving factors/behaviors/conditions that facilitate the reliving process. There

were five therapists from each of the cathartic therapies.

Three independent raters went through the 15 interviews for critical events. The

selected observations were transcribed onto index cards and categorized by Gilbert and

another independent rater. The factors/behaviors/conditions were categorized that

facilitated the reliving process. "Percentage of agreement, across the three raters, was

used as an index of reliability" (1992, p. ii).

There were a total of seventeen common and four crucial factors/behaviors/

conditions evidenced. There were a total of 693 critical incidents.

Gilbert found four crucial common factors/condition/behaviors that the therapists felt

necessary for the reliving process to occur. They were qualifications for therapist,

qualities of the therapist, trust/rapport within therapist client relationship and the

therapist providing emotional safety (1992 p. 108).

Gilbert points out her study shows, among other things, that tone of voice is important

-"gentle, relaxed and calm" (1992, p. 159). Client motivation was not evident in

research prior to this study. A major area of difference among the three therapies was -

"First, the fact that Bioenergetic therapist-subjects monitored and directed the client's

body more frequently than counselors from the other two models. Secondly, the

therapist-subjects who predominantly directed their clients to do guided imagery, autosuggestion and desensitization were the hypnotherapist. Thirdly, Primal Therapist-subjects direct their clients to focus on feelings more frequently than counselors from the other models"

(p. 160-161). Summarizing the differences, Gilbert states "Bioenergetic concentrates on the body. Hypnotherapy centers upon general techniques of imagination and relaxation. Primal therapy focuses on feelings. Each technique is the galvanizing factor which triggers reliving and each technique defines the core differences between the three therapies "

(p. 161).

Gilbert's study focuses on one area of the psychodrama experience. She provides a clearer picture of the nature of catharsis which will aid in the analysis of catharsis in my study. Especially as her study includes three different approaches to the reliving experience it reveals that catharsis may be achieved through some common factors but also through unique techniques. A fuller understanding of the impact of psychodrama may be achieved by an understanding of catharsis as one part of the complex experience of psychodrama.

Group Development

The context for the process is the group. Therefore much of what goes on in psychodrama is either directly or indirectly involved with and influenced by group process With this understanding the following review is added.

Moreno believed the group has a social force with special dynamics taking place within it. These group dynamics come into play in psychodrama.

Moreno (1966) believed in group psychotherapy as a "vigorous science in its own right" (p. 22) and so belief systems from other theories need to be combated. These are

specifically : "(a) psychoanalytic mysticism - the mysticism of the individual psyche as the sole source of group analysis; (b) group mysticism - when the group becomes a self-propelling entity independent of the individuals who comprise it; and (c) existential mysticism - when existential concepts are used instead of those gained through empirical investigation" (p. 22).

Bion believed there are three stages of group development; dependency, fight/flight, and pairing (cited in Golembiewski and Blumberg, 1977). In each stage there are tensions that revolve around particular issues. In the dependency stage the conflict involves the authority or leader figure. When this has been successfully resolved the group moves into the fight/flight stage where conflict involves members of the group. In the pairing stage there is a movement toward greater intimacy. In each developmental phase there is a "gradual substitution of conscious to unconscious bonds" (Kellerman, 1979, p. 109).

Freud (1914) maintained that in a group setting the original family is recreated with primitive responses to it resulting. He was one of the first to note that patients "automatically exhibit the compulsion to repeat certain behavior" (in Kellerman, 1979, p. 118). When group members trigger original family responses transference is occurring. Durkin (1964) states "The central idea is that the relation of the transference to defense mechanism brings the past into the present. Freud (1973) takes this further and states "this synchrony of past and present may modify the repetition behavior " (in Kellerman, 1979, p. 119). It is in the connection between the past and the present that the corrective experience may occur (Kellerman, 1979, p. 119).Through the group experience one can come to understand the past and create new behaviors in the present. Kellerman states "one implication of this past - present correlation is that the repetition of current

behavior in the light of historical material is the soil in which defensive operations are nourished."

(1979, p. 119).

Kellerman (1979) maintains that remembering is crucial for "The degrees to which past and present are differentiated determines the extent to which defensive operations may be modified" (p. 120). Freud (1914) states it is at the "groups insistence that self knowledge is used to move ahead towards new modifications of emotions, new reactions and fresh ways of coping with life" (cited in Kellerman, 1979, p. 120). Kellerman (1979) summarizes "self-defeating ritualized defenses can be modified" and "one's coping patterns are confronted and this confrontation may seem to be life threatening" (p. 121). Because emotion is experienced "in the full measure of its historical impact "the simple act of entering therapy group" will produce "a significant amount of tension" (p. 121).

Further tension is induced through working on the link between past and present; "working through releases anxiety for reconstructive work" (p. 123). Kellerman explains "working through" is considered to represent the most profound achievement in the therapy because it holds out the hope for reconstructive modeling to occur. Members of the group become historical figures for each other, and in this special sense they also endure for each other. In addition, because of the working through process, the fixed form of the family scene, its neurosis - may be transcended" (p. 123).

Object relations postulate that "the group is a transitional object and it affords each patient a chance to experiment with different roles" (Kellerman, 1979, p. 55). It is in this environment that roles shifts and relocations can be made possible for "Identifications are expanded and split - object problems repaired" (Kellerman, 1979, p. 55).

In conclusion Kellerman (1979) maintains that "roles are not unrelated to deeper structures; they may reflect deeply ingrained genetic codings which tend to retain

residual qualities even under the most profound change conditions". The group has "sociological implications" for "any roles that metamorphoses into another implies that some basic personality tendency was transformed, which inturn modified a basic emotion. This change of emotion further implies that a trait representing some enduring personality characteristic relinquished and a given diagnostic disposition has been similarly significantly altered. Such a process may constitute a genuine genetic like advance" p. 55). The groups transformational aspect reveals that it can have "truly profound evolutionary power"

(p. 55).

Blatner (1984)also points out that "our true human nature is really more collective than we realize"(p. 136). Like Adler, he believes in "social interest or fellow feeling" as productive forces in the group. There is a "healing alternative in the feelings of social interest" (p. 136). Jung's collective unconscious should be recognized in the group according to Blatner. For "resistance to opening to the depth of our common humanity reflects an almost archetype fear of loss of identity or autonomy within the group" (p. 136).

Gibb (1964) stated that the group can facilitate growth by containing a defensive - reductive atmosphere that fosters interpersonal relations. He believed that four processes needed to be resolved for growth to occur; acceptance, data - flow, goal formation and social control. He also maintained that "growth is an interdependent process" (p. 288) in which in a circular manner, as people function better they will function better in groups and as they function better in groups personal growth is stimulated.

Trotzer (1989) points out therapy is stimulated in the group by several factors; safety, sense of belonging, social value, group as power, helping and being helped, self-

correcting group dynamics, curative factors, spectator therapy, feedback for growth, and personalizing the learning process.

The group creates a 'corrective emotional experience' according to Yalom (1984). This is comprised of five parts:

1. "a strong expression of emotion which is interpersonally directed and which represents a risk taking on the part of the member

2. a group supportive enough to permit this risk taking

3. reality testing which allows the member to examine the incident with the aid of consensual validation from others

4. a recognition of the inappropriateness of certain interpersonal feelings and behaviors or of the inappropriateness of certain avoided interpersonal behavior

5. the ultimate facilitation of the individuality to interact with other more deeply and honestly" (p. 23).

Group Related Research

A recent study on the advantage of group over individual counseling was undertaken by Towberman (1993). She examined the impact of the treatment mode (group versus individual counseling) on the client's perception of treatment environment. The question asked was whether there were significant differences in the environmental perception ratings of those assigned to group counseling and those assigned to individual counseling. The study examined the bivariate relationship of treatment mode and the client's perception of the therapeutic environment. The independent variable, the treatment mode, was defined by the dominant form of therapy (either group or individual counseling) used in the contained cottage units. The dependent variable, client's

perception of the treatment environment, was based on consensual ratings of environmental factors.

The subjects were 96 institutionalized female delinquents between the ages of 13 to 18 with an IQ mode of 96.6 and educational levels of between grade 6 to 12. The subject's length of time in counseling ranged from 1 month to 11 months. The subject's perceptions of the treatment environment was measured by the Correctional Institutions Environment Scale (CIES). This 90 item questionnaire has a true false format. Content and criterion - related validity has been assessed and test retest reliability values range from .65 to .80. The instrument measures the client's perceptions of three environmental dimensions; "(a) the treatment program, (b) the degree of interpersonal relationships, and (c) the emphasis on institutional order and control within the correctional environment" (Towberman, 1993, p. 163).

There were significant differences between the consensual ratings of the treatment environment by the delinquents in group treatment to those in individual treatment. The groups revealed significantly higher and more positive on two environmental ratings; perception of interpersonal relationships and perceptions of treatment programs.

Lester and Braswell (1987) believe that the group treatment is advantageous because it "includes information sharing, role modeling, recognition of similarities with others, reciprocal helping and being helped, support for emotional catharsis, and intimate connection with a family substitute"(p. 172). Towberman states that the sense of belonging and feelings of worth that a group can give "may have positive consequences on the self-esteems and attitudes and positive outlooks of group members" (1993, p. 172).

My study will also be examining and describing the impact of the group on the change processes in psychodrama. The guided group interaction model used in this study may apply to psychodrama. Lester & Braswell (1987) point out that this model gives group members the responsibility for therapeutic change with the leader taking on a

nonauthoritarian role and only setting group boundaries in terms of behavior. This is similar to the psychodrama experience. The group in the interaction model facilitates a reduction of defense mechanisms in order to effect change. I will be looking to see if this same process occurs also in the psychodrama experience.

Factors that effect change in psychotherapy and in group psychotherapy need clarification, according to the authors of another study. There are many "specific and non- specific variables that play various roles" (Ozbay, Goka, Ozturk, Gungor, and Hincal, 1993, p. 3.) in change. There are no clear answers as to "how group psychotherapy affects different subjects groups or to how various therapeutic techniques differ in their effects" (Ozbay, et al., 1993, p. 3). At the same time there are limited standardized instruments to assess the degree of change.

In order to answer the question "What helps in group therapy?" Yalom (1985) developed a list of therapeutic factors. Composed of 60 items, each item stresses a different experience that participants may have found useful during therapy group. With a total of 12 therapeutic factor categories; each category contains 5 items. Each category was factory analyzed to demonstrate the unique effect that psychotherapy has on an individual. The list has been used extensively with different therapeutic groups.

This research study was designed to discover how participants in an outpatient adolescent psychodrama group used Yalom's Therapeutic Factors List (1985) to rank therapeutic factors at different stages of a group process. Literature concerning group psychotherapy outcomes with children and adolescents is scarce (41 studies in total, 2 peer group interventions) (Ozbay, et al., p. 4). The study had three aims: to examine the therapeutic effects on adolescents of a psychodrama, to examine differences between gender rankings of the effects and to compare changes of the rankings over time in group development.

session and from the 20th session. Using a statistical analysis of variance, the values of the whole group as well as the value for the genders were analyzed. The results were:

Whole Group	Females	Males
1. Family Re-Enactment	Family Re-Enactment	Altruism
2. Insight	Insight	Instillation of Hope
3. Existential Factors	Existential Factors	Insight
4. Interpersonal Learning-Input	Universality	Interpersonal Input
5. Instillation of Hope	Instillation of Hope	Family Re-Enactment
6. Universality	Interpersonal Input	Universality
7. Altruism	Interpersonal Output	Interpersonal Output
8. Interpersonal Learning-Output	Group Cohesiveness	Group Cohesiveness
9. Guidance	Catharsis	Catharsis
10. Group Cohesiveness	Guidance	Guidance
11. Catharsis	Identification	Existential Factors
12. Identification	Altruism	Identification

The examination to find out changes between time periods and between genders revealed no statistically significant differences.

This study is significant in that it makes new contributions to the literature of factors that effect change in group psychotherapy - measurements were derived from the same group over a period of time, the participants were adolescents and psychodrama was the primary method used. The major limitation of the study was the small sample size which does not lend itself to "statistical methods generally used with larger between group samples" (Ozbay, et al., p. 8).

Although there were no statistically significant differences with the scores of this study and those of other studies, trends were apparent. The authors hypothesize that the

The participants were adolescents who attended the SSK Ankara Hospital psychiatric clinic as outpatients. Neurological and psychiatric examinations, psychometric testing, and family interview were part of the detailed assessment given to the adolescents before they were assigned to the psychodrama group. Adjustment difficulties concerning adolescence and a degree of identity confusion were the main concerns participants displayed. No organic or psychotic symptoms were displayed. Pre-therapy sessions were given to ensure participants were ready for group therapy and to assess personality structure.

The outpatient group met for two hours sessions each week for one year. Participants who dropped out were not replaced so that all members participated in the same number of sessions.

The group was directed by the first author, a psychiatrist, an experienced adolescent clinician, and a psychodrama therapist. Five psychiatrists and psychologist served as cotherapists and psychodrama assistants.

There were a total of 15 participants (ages 15 to 20 yeas) in the psychodrama. Data used was gathered from 10 members of this group; 6 female and 4 male. All had attended at least 20 sessions. Six of the participants were students, 3 were unemployed and one was a laborer. Their socioeconomic standing was from the lower strata and their families were of rural origin and all were from Turkey.

Turkish translations of the Therapeutic Factor List was used. At the end of the 10th and 20th session participants were given 60 cards on which the different items were written. Participants were to arrange the cards from most useful to least useful in terms of therapeutic factors.

The results were rated on a 7-point scale ranging from least useful (1) to most useful (7). The scores of each item were calculated by adding the values of cards from the 10th

trends were due to the small sample size and the nature of psychodrama. The differences were:

1. Change through time did not occur as it did in other studies. The authors believe this is due to psychodrama which reflects group process independently. Literature reveals that different therapeutic factors become more prominent at different stages in therapy.

2. There were gender differences regarding effectiveness of therapeutic factors. Literature reveals that genders have different focus of concern in most areas of life during adolescence. Face validity of the differences in ranking between genders in this study could be evidence of that focus the authors maintain (Ozbay, 1993, p. 9).

3. Interpersonal Learning, Catharsis, and Insight have been valued most highly in other outpatient groups. But only Insight was scored as most highly valued in this study. Family Re-Enactment was valued highly by both genders, Altruism highly by males. These two categories have been in the least valued ranking in other studies. The authors believe this is due to the specific culture (family valued highly), the particular form of therapy - (psychodrama) and the adolescent stage participants were in.

The inconsistencies, although not statistically significant, reveal that the validity of the study is somewhat questionable. Assumptions were made about differences in scores with other studies. Further research is necessary to confirm these assumptions. These could involve other adolescent groups, a variety of cultures, social-economic stratas and lengths of time. This was only one small study "the scores have not been reexamined with the same test on different occasions, or with different sets of equivalent items or under other variable examining conditions" (Anastasi, 1988, p. 109), therefore reliability is also questionable.

<u>Research Related to Psychodrama</u>

There is little research on change factors in psychodrama both quantitative and qualitative. Psychodramatists rely more on experience gained through practice than systematic experimental research data (Kellerman, 1991, p. 27).

Kellerman (1991) states that "Psychodrama seems to be known more for its application than for its theories" and "there is little going on in systematic research" (p. 19). He states that there is no systematic framework for practitioners to work from. Kellerman believes that a theory that comprises "a framework from which to view the protagonist and with a rationale for intervention" (p. 20) is necessary. Creating a "metascience" would be a means of structuring and understanding theories and describing them on a metalevel
(p. 20). Kellerman attempts to do this.

Currently there are two schools of metascience, Giorigi (1971) describes this as "The natural science approach is characterized as being empirical, positivistic, reductionistic objective, analytic, quantitative, deterministic concerned with prediction and largely operating with the assumptions of an independent observer. The human science approach is concerned with meaning, description, qualitative differences, the process of explication, investigating interactional relations, articulating the phenomena of human consciousness and behavior within the context of a broadened conception of nature, and assuming the privileged position of the life-world, the primacy of relations, and the presence of an involved scientist" (cited in Kellerman, 1991, p. 21).

Kellerman calls for an integration of the two schools, by using Maslow's hierarchical system of values. The behavioral school uses the medical model believing in cure. In existential psychodrama one is not considered unhealthy but in need of becoming spontaneous and creative. Kellerman suggests that either could be used depending on the needs of the respondent. For instance, if an individual wishes symptom removal,

behavioral psychodrama would be implemented. If an individual desires self-awareness and/or self-actualization, existential psychodrama would be the most suitable.

Behavioral psychodrama uses an objective process with a logical, empirical approach. Existential psychodrama implements research based on self-understanding using a descriptive phenomenological or process oriented approach.

Kellerman (1991) maintains that a better system would be "integral psychodrama" which "makes a point of combining both qualitative and quantitative methods of research in any single study" (p. 28). This could be accomplished by a movement from both ends combining a little of both - "qualitative to quantitative, subjective to objective, mind to body, theology to science" (p. 30). This can be done by using both closeness and distance, laboratory research and field and action research, observation and participation, passive interpretation and active involvement" (p. 29).

In my literature review I have included both quantitative and qualitative research studies on change in psychodrama. Hopefully, a more complete picture of the change process can be realized through this examination. Both kinds of studies provide insight on change factors which will be helpful in determining themes and patterns in this qualitative study.

Qualitative Research

Martens has undertaken a qualitative research study on psychodrama. Most research, she maintains, has been either "ethnographic, composed of practitioners comments based on personal experiences with clients" (1990, p. 8), or quantitative, which is "plagued with problems in methodology and the fact that there are many variables to be controlled" (1990, p. 8). Martens examines the whole experience of being involved in a significant psychodrama in order to understand the elements

necessary for change. The study is included as its methodology is similar to this study and both examine the experience of being in a significant psychodrama.

The study attempts to answer the question "What does it mean to be a protagonist in a psychodrama?" This was to be studied from the participant's point of view if participants felt that the experience was significant in terms of life change. An examination is made of the whole experience that includes before, during and after.

The research questions focused on investigating the meaning of the psychodrama process as experienced by individuals. Common themes in each of the three stages (before, during and after) were sought.

The method used was the existential-phenomenological approach. Vale and King (1978) describe this method as seeking to "understand and articulate the essential structure (common pattern) of human experience and human action through rigorous descriptive techniques (cited in Martens, 1990, p. 59). The 'inner' perspective of the co-researchers was the focus. "The goal is not to predict or control the experience in any way, but rather to understand its meaning for the individuals who lived it" (1990, p. 60).

Co-researchers were volunteers who had attended a psychodrama workshop directed by a qualified psychodramatist. Martens asked potential co-researchers if they felt their psychodrama experience as protagonists was significant to them in terms of life change. If so, they could participate in her study. Those selected were Canadians ranging in ages from 27, 30, 33, 35, 41, to 49. Their occupations were elementary counselor, recreation director, and high school counselor/teacher. There were four male and two female co-researchers.

Two interviews were conducted with the co-researchers. These interviews were tape recorded and transcribed. The transcripts were analyzed and themes were formulated. Themes were then validated by the co-researchers. An exhaustive description of the psychodrama experience was then formulated. This was then condensed into an

essential structure. Both the exhaustive description and the essential structure were again validated by the co-researchers.

There were a total of 28 statements derived from the transcripts. These statements were condensed to the essential structure. The results taken from the essential structure are:

1. Being ready is a necessary prerequisite to being a protagonist in a psychodrama.

2. In order to reach a deeper level of the experience there must be a strong desire to go through the experience.

3. There is a feeling of safety which includes trust of the leader and of the group.

4. The protagonist's subject changes from being "diffuse towards a specific and clear focus" (1992, p. 100). This is achieved through cognitive processing, emotional involvement and actual physical movement. There is no particular time frame this occurs in.

5. Prior to this experience is a feeling of being drawn inward.

6. A transition takes place in which there is a talking about the situation and then a movement to experiencing the real situation as in real life.

7. There is a "change of control level" (1992, p. 102).

8. An intensity of experiencing occurs in which there is either no awareness of the group or an intermittent awareness of the group.

9. The experience is holistic in that it combines the body, and cognitive and emotional realms. The experience is derived through physical actions.

10. There is a release of energy or tension - a shift.

11. There is a feeling of completion for the real life drama.

12. There is a need to be drawn back into the group for acceptance.

13. Even though one is usually exhausted there is a need to process the experience at some level with the group.

14. At a later date there is a need to analyze the experience on a cognitive level.

15. There is need to take action based on the experience and the insights that derived from it.

16. There is a feeling that a change has taken place for instance of a pattern being broken.

Martens maintains that the "unifying pattern of elements seem to resemble what are commonly called 'real life experiences'. In other words it is not one element alone, but the combination of all of them together which makes a difference" (p. 139). The study affirms both psychodrama and Gestalt theory.

Marten's research study can be a valuable comparative study to the present research. The same method and analysis will be used and the co-researchers have similar backgrounds in terms of socio-economic level, occupations and ages.

Psychodrama is a complex experience. It incorporates many areas of change. Weiner (1966) summarizes the some of the benefits of the psychodrama experience that result from the change:

1. gives a greater depth of feeling to the group therapy experience

2. enables the patient to discover his spontaneous self

3. activates the individuals' unconscious to bring forth conflicts, fantasies, memories, past life experiences and emotional phenomena

4. develops the need for motivation

5. provides an atmosphere where the patient can try, succeed, and fail - can learn by experience, rational thought, and action

6. removes subconscious inhibitions and develops problem-solving ability

7. teaches patients to work out and solve their own problems

8. helps set realistic goals

9. develops insights and reassurance

10. intensifies the patient's affectivity and reduces excessive intellectualization

11. trains for family, work and community roles

12. provides rock bottom

13. decreases the transference reaction

14. develops personal freedom

15. helps educate patients to the addiction or disease of alcoholism

16. proves the opportunity to develop family roles and changes

17. lets off steam and rage

18. develops and explores the self concepts

19. restores or eliminates old roles as needed

20. intensifies reality

21. develops and encourages community spirit, group identification and citizenship

22. betters patient-personnel understanding

23. educates

24. re-educates

25. modifies isolated behavior by reducing social deprivation and anxiety-creating conditions

26. develops emerging social situations

27. changes self concept in terms of picking up others' cues and expectations as well as own

28. narrows grandiose feelings and in their place develops responses to reduce conflicts'

29. proves an educational method with a high quality of feedback

30. repairs the loss of love and affection of parents, guardians, or spouses through death

31. reduces the effect of social deprivation

32. trains how to live

33. develops the courage to be (p. 387-388).

Chapter 3

This chapter will describe the method employed in the study, the selection process for the co-researchers, the type of interview used, and the procedure for analysis.

Method

The method used for this study will be the existential-phenomenological approach. This study should assist in providing a fuller understanding of the process of change in psychodrama by its use of the existential/phenomenological method. The existential-phenomenological approach tries to understand and articulate the essential structure; "the common pattern which is found in all the many variations of the experience through rigorous descriptive techniques" (Valle & King, 1978, p. 14). It seeks to understand phenomena, not explain, predict, or control. It uses "description through disciplined reflection" (Valle & King, 1978, p. 15). The emphasis is on extracting the meaning of an experience for individuals who have lived it.

The approach begins by interviewing participants for the subjective meaning of the experience. The interviews are transcribed and read for a general understanding of the experience. The experience is examined further through a search for and extraction of significant statements. Each participant's significant statements are compared in order to find commonalties among the statements . The commonalties become the theme statements - the foundation for the analysis.

The next step is a description or explanation of the theme statements (experience). Evidence of themes are given by using examples from participant's statements. Finally, the description of the experience is summarized by extracting an essential structure from it. The structure is the core experience. These steps provide rigor for the analysis.

The subjective experience is derived through interviews with participants in a psychodrama. The interview framework employed is "of interviewees as informants or as competent observers and interviewers as reporters" (Mishler, 1986, p. 123). The relationship between interviewer and interviewees is one of equality. The interviewee is called a "co-researcher'. The focus of the dialogue is the experience of being a participant in a significant psychodrama.

Co - Researchers

There were six co-researchers involved in this study who were participants of a weekend psychodrama training workshop led by two professional leaders. They were told the purpose of the study and asked to sign a letter of consent.

Co-researchers were asked if they experienced the psychodrama as significant. If the psychodrama was significant to them they qualified to volunteer. The first six volunteers were selected. Selections were not be based on gender, ethnic origin, race, or age. Co-researchers did not need to be protagonists.

The six co-researchers ranged in age from; 34, 35, 35, 37, 39, to 41. Their occupations included two full time graduate students, a graduate student/counselor, a graduate student/accountant, and a graduate student /counseling testing consultant. There were four male co-researchers and two female co-researchers. Four co-researchers were protagonists and two were participant observers.

Phenomenological Interview

Co-researches were interviewed once for between one to five hours. The interview was conducted in an atmosphere in which Rogerian skills of empathy, reflecting, paraphrasing and clarifying were used in order to have the interviewees relate, in their own language, and in their own way, the meaning of the experience. The interviews

were taped and later transcribed. The transcripts were analyzed for common themes and significant statements. The themes and statements were verified by the co-researchers. Co-researchers were asked to read the theme statements and note agreement or disagreement to them. Additions and deletions were incorporated into the theme statements. A final verification was made by the co-researchers.

The co-researchers were asked to recall their psychodrama experience, describing what happened to them before, during and after. To ensure that all areas were covered the following questions were used when necessary:

1. What prompted you to participate in the psychodrama?

2. What factors enabled you to fully participate in the psychodrama?

3. When and why did you feel ready to begin?

4. What relationships did you form or what situations occurred during the session that made it easier or harder to become fully involved?

5. Was there a significant experience that colored the session?

6. Did you feel that the experience effected a change in your life? If so how?

7. Do you feel differently about the experience now compared to the conclusion of the psychodrama?

8. Would you participate in another psychodrama? Why?

9. Is there anything you wish to add?

Procedure for Analysis and Interpretation

After the interview, all six interviews were transcribed. Transcripts were read for general understanding. Secondly, significant statements were sought. Themes or patterns were given to the significant statements. Of this form of analysis Colaizzi states "the phenomenological researcher engages in something which cannot be precisely delineated, for here he is involved in that ineffable thing known as creative insight; he

must leap form what his subjects say to what they mean (1978, p. 59). It is for this reason necessary to have the theme statements verified by the co-researchers.

Clusters of themes were formulated from the meanings. The themes and the significant statements were given, in written form, to the co-researchers. This was verified by them and additions or deletions incorporated .

When the written statements were returned, themes were woven into a description of the significant psychodrama experience. It consisted of a description of the experience for the co-researchers, mainly in their own words.

The description was summarized into what Colaizzi (1978) calls an "essential structure" (p. 59). It is a shortened description of the psychodrama experience and is intended to represent the core of the experience. A unifying pattern was sought from this.

Chapter 4

Results

This chapter describes the theme statements using the raw data from the transcripts. The original theme statements (participants had 14 statements, protagonists had 33 statements) were mailed to the co-researchers for verification. The verified theme statements were returned. Agree or disagree was marked next to each statement. Room was given for any comments co-researchers felt necessary. Theme statements were then reorganized into 11 participant statements and 31 protagonist statements. The revised statements are included.

A description of the theme statements follows the revised theme statements. This description explains the statements and uses examples from the co-researchers transcripts to verify the themes. The description is in the form of a narrative and uses the words of the co-researchers wherever possible. Co-researchers opinions of the experience are minimized and an experiential description is sought. Following this procedure the description is narrowed down to an essential structure which reveals the common pattern evident for change to occur in psychodrama for both participants and protagonists.

Themes

Each transcript was read through completely for an initial understanding. The transcripts were read again and key statements were noted. Statements were direct quotes. Separate key statements were taken from each of the six co - researchers transcripts. There were four protagonists and two participant observers among the co-researchers. The participant's statements were separated from the protagonist's

statements as it was felt they were different experiences. The two groups were analyzed separately. For each group I looked for common key statements. I changed the key statements into theme statements. I reviewed the key statements of the co-researchers to ensure that the theme statements were evident in all the transcripts for each group.

Theme statements were mailed to the co-researchers for verification. The returned statements were revised and reorganized to the theme statements I have included. I tried to use only those statements which were based on the experiential aspect of the psychodrama and not co-researcher's analysis of the experience.

The following theme states were derived from the transcripts. I have organized the themes in the following order; for both the protagonists and the participant observers - before the psychodrama, warm-up, encounter, integration, and after the psychodrama.

Participant Observer Statements

Before the psychodrama

1. There is an intellectual understanding of what psychodrama is.

2. Participants have a relationship with the director before the psychodrama.

Warm-up

3. There is a need for trust and safety in the director.

4. There is a need to feel trust with the group which is not yet experienced.

5. There is a focus on observing the psychodramas to better understand one's own issue and develop it into a psychodrama.

6. There is a focus on planning what one would do as a protagonist.

7. There is a building of emotional intensity and an anxiety about that.

8. There is a feeling of not being ready to be a protagonist if safety factors are ensured.

9. There is an intermittent awareness of the group and of the psychodramas.

After the psychodrama

10. There is a feeling of emotional exhaustion at the end of the psychodrama due to the intensity of the experience.

11. There are insights gathered form the experience and the universality of themes witnessed in the psychodrama.

Protagonist's Theme Statements

Before the psychodrama

1. Protagonists have been involved in personal development or counseling before this experience.

2. Protagonists have experienced being a participant, auxiliary ego, or a protagonist in a psychodrama.

3. There is an idea already formulated about what the protagonist's experience will be. A skeletal structure is in place of how to do it.

4. Protagonists have an established relationship with the director that includes feelings of trust, safety, and comfort before the psychodrama begins.

Warm-up

5. There is a comfort and safety in having a close friend/colleague in the group.

6. It is helpful to observe other psychodramas in the workshop to focus on how to develop one's own.

7. There is a need to feel safe in the group.

8. There is a movement to an emotional level.

9. There is a growing tension, that is felt emotionally, cognitively, and physically, before the protagonist begins his/her psychodrama.

10. There is a lessening awareness of the group as one's psychodrama develops.

11. There is a need to use setting, roles, and story to make one's psychodrama more focused and move into role.

Encounter

12. Moving from talking about the story to acting it out in present tense facilitates immersion in role/character.

13. There is a growing consciousness and power of the director and the auxiliary egos.

14. There is an intermittent awareness of the group.

15. There is a feeling of a movement (fluctuation) from being in control of the experience to allowing the director to control the experience.

16. There is a sense of fear, or danger at taking the risk to fully experience the drama.

17. Physical movement facilitates the experience.

18. There is a feeling of being lost in role - a change in control, being in a trance.

19. There is a feeling of actually reliving the experience - in touch with old feelings.

20. Pacing and silence have an impact on the process. Experienced directors are cognizant of this while doubles and auxiliary egos may not.

21. There is a natural flow of events.

22. There is role expansion experienced.

23. There is a sense of importance to the event derived from being a protagonist in front of the group.

24. There is a feeling of vulnerability from the swift change of emotions.

25. There is a need to return to the group for reconnection, support, and sharing. This is on an emotional level as one is too depleted to cognitively process any discussion.

26. There is an intensity of feeling which is different for all the protagonists. It ranges form feelings of peace, comfort, depression, vulnerability to grief.

27. There is a physical aspect to the understandings derived from the experience.

Integration

28. There is an increase in cognitive processing of the experience sometimes later. New insights keep arising and connections made. Ideas about future psychodramas arise.

29. There is a feeling of a shift having occurred; a reconnection of old feelings in a new way and of having completed an issue. Change has occurred.

30. There is a need to act on the change - rescript one's life.

31. There is a need to reconnect and find support from the director soon after the experience is over.

32. There is a reprocessing of the experience through the interview which is helpful and supporting to the protagonists. There is an essential working through of the issue in the process of the interview.

Context of the Description

The description is a narrative of the theme statements. The description begins before the psychodrama and ends in the weeks and months after the psychodrama workshop had concluded. I have tried to follow a time sequence of before the psychodrama, warm-up, encounter, integration and after the psychodrama. But the experiences do not always follow this format. There is an overlap of experiences as well as continuation of experiences.

The description views the patterns which are the meaning of the experience for the co-researchers who have lived it. The primary focus is the experience of the protagonists. I have included the participant observers to reveal what is probably the initial feelings of the experience for protagonists. This is followed by the essential structure which is derived from the description. The meaning of the experience in the description is condensed into concise terms.

The description begins with the experiences of the participant observers. It was felt that their descriptions were the initial feelings of the protagonists before they had witnessed psychodrama. To fully understand the experience of the protagonists it is necessary to understand how one first approaches psychodrama.

There were two directors leading the psychodrama workshop. I will use the initials M and P for them. M had previous contact and a professional relationships with the protagonist co-researchers before the psychodrama. P did not.

There were two participant co - researchers. I will use the initials B and O for them. There were four protagonist co - reseachers. Their initials will be L, C, A, and G.

Description for Participant Observers

Before the psychodrama

1. **There is an intellectual understanding of what psychodrama is.** The participant observers had never experienced a psychodrama before. They had some knowledge of the theory of psychodrama which was based on readings. There was an element of surprise at the difference between knowledge of the theory and living through the experience themselves. O stated "I had read about it and was interested in it ... as an intellectual approach." She goes on to say that the "concept of what makes work changes with visceral experience. Psychodrama provides an experience in a way that

words alone cannot do." B stated that there was an "emotional component" that was unexpected for he "knew intellectually" what psychodrama was. There was a curiosity about understanding what psychodrama is all about, that initially brought the participant observers to the workshop.

2. The participant observers knew the director before going to the workshop. This relationship allowed for enough safety to provide a certain level of comfort in participating in the weekend workshop. B stated "I have a good relationship with him ... he had the experience" which B felt was necessary to lead the workshop. M was more unfamiliar with both directors and hoped the weekend would develop the necessary comfort level.

Warm-up

3. There is a need for trust and safety in the director. Participant observers stated repeatedly how necessary it was to feel safe with the director. Without this trust it was impossible for the participants to believe they could become protagonists. O was cautious and therefore hindered from doing her work.

4. The safety factor included feeling trust in the group. For one participant observer sense of safety was not established. Both were intent on understanding the experience and felt somewhat overwhelmed. It detracted them from feeling a part of the group. B sums up the feeling by stating "I did not feel part of the group, but I was involved in my own things". Safety is an important issue. If one does not have a feeling of safety in either the director or the group one does not move beyond being a participant observer.

Encounter

5. Once a part of the workshop, the participant observers felt emotionally drawn into the experience. Part of the draw became the search for an issue to be worked out through psychodrama. O stated "By the end of the first evening, I had a scenario, I wrote the play in my mind. ... I needed more preparation." B stated "There was something significant in each drama but not in the same context. I incorporated each one. I felt something building up in me...a tension. Like watching a puzzle with a piece missing ... a significant moment came ... I thought this is dangerous ... It really crystallized my issue ... It hit me like a thunderbolt, I was dumbfounded. I had an insight I was unaware of. I would deal with this in my own psychodrama."

6. After an idea of what to work on begins to unravel participant observers begin to view themselves as protagonists and begin working out the issue. O stated "The first night I felt emotional, riled, ... aroused. As I thought about my drama, I could relive my scene, feel the anger, pain, agony. I felt connected with who I was in that incident. It was astonishing that as I imaged my family ... I carried that incident as I had experienced it, never looked at it as an adult, seen other points of view." O came to the realization that it was "essential to revisit myself at 7, the turmoil, the disappointment, the betrayal without the tears...In my scenario I asked, where is my father coming from, why did my mom do that etc. First I said I don't know ... trying to understand where they were coming from, but with an adult perspective." O began to expand her role by "moving from victim to something else" which she found "empowering" for it "gave me options and choices I did not see before." M began planning her work "I looked around, and no one reminded me of anybody. I was not projecting on people. That night, I looked for people to cast, ...I thought who would feel safe? ... play it central to myself, ...

Who do I trust, trust to not to interfere?" Trust and safety is also an issue with the

auxiliary egos.

7. There is a building of emotional intensity and anxiety around creating the piece.
M stated that it was an "immensely emotional experience." She become "emotionally

drained" so much so that she "got a sore neck and migraine. The emotional intensity of

that evening was amazing." B stated "I was being propelled forward ... could not see

where I would end up. A couple of moments where I felt very emotional and I did not

want to let it go. I thought to myself, calm down."

8. Participant observers soon become overwhelmed by the emotional component of
the psychodrama. Planning has taken place, but safety issues remain high. Participant

observers remain at the planning stage and feel unable to take the plunge or risk to

becoming protagonists. O stated "I decided I did not feel safe to do it. I needed more

preparation." There was a "sense of gradual withdrawal." B stated "If I were to got to

another psychodrama, I would want to do it by myself, ... like to finish unfinished work

... I would not want to expose myself to people I knew. It would have to be strangers." B

felt ready to become a protagonist, but with another group. Safety had not been

established with this group.

9. There is an intermittent awareness of the group and of the psychodrama.
Participants are filled with many thoughts - finding and planning their own

psychodramas, connecting emotionally and intellectually with other work, and finding

their place of trust in the group and with the director, and so that they are not always

conscious of the group and what is going on at the time. O stated "I was not always

present." The intermittent awareness is a common theme for both participant observers and protagonists.

Integration

10. There is a feeling of emotional exhaustion at the end of the encounter due to the intensity of the experience. The psychodrama experience is intensely emotional. The sheer intensity is emotionally exhausting. B stated "I had no idea what psychodrama was. I thought I could watch and learn and wondered if I should take notes. I did not expect that level of intensity. The thread of it caught me and a tension built that I was unprepared for."

After the psychodrama

11. There are insights gathered from the experience and from the universality of themes witnessed in the psychodrama. O stated " It changed me. I learned a lot. I'll go back for more. It was a valuable opportunity. We may think we are different but we share many things; loss, betrayal, desire to be loved. ... Some struggles rang bells. Experiences vary but themes reverberated rather than external particulars. A key recognition was the opportunity to step into someone else's shoes." B agrees, "There was something significant in each drama, but not in the same context. I incorporated each one."

Description for Protagonists

Before the psychodrama

1. Protagonists have been involved in personal development or counseling before this experience. This may have involved counseling or self examination. There is an understanding of the issue involved in the psychodrama to some extent. The impact of the psychodrama hinges on how one has dealt with the issue beforehand. This understanding entails knowledge of the issue and desire to change. There is a feeling that the time is right to understand the issue in greater depth. L stated "therapy feels unconnected, put on." He continues "I wanted to divulge unfinished business" in a "real" way. C stated "I was aware of a growing issue concerning my father." There is a developmental readiness to work on the issue. Later, after having read the theme statements C stated "The psychodrama was like a symbolic culmination." A stated "I needed to do this for a long time ... had avoided doing it ... afraid of doing it."

2. Personal and/or professional development has meant an exposure to psychodrama has occurred before the experience of being involved in a crucial psychodramas as a protagonist. This involvement may have included being a participant, a double, an auxiliary or a protagonist. The exposure entailed an intellectual as well as emotional understanding of the experience. The protagonists knew what to expect and were thus armed. There was a sense of safety in the knowledge. There was also a sense of being ready to work on an issue in this particular manner.

3. There is an idea already formulated about what the protagonist's experience will be. A skeletal structure is in place of how to do it. During the previous experience of being in a psychodrama the protagonists had begun working on developing their issue

into an enactment. A stated "I had rough sketches of what I wanted to do. The piece had been building. Other dramas were preliminary to that. It was a completion of a puzzle ... the final chapter of therapy." C stated "I had leading up to it the sense that I would do the piece around my father ... So I have been trying to get to work on this for quite a while ... I arrived at the workshop, with the feeling that I needed to do the work. And these issues around my father I have been looking at for a few years just in a more general way, ... feeling a lot of pain around that. So I thought at some point the father thing would happen." There is an idea formulated about what the protagonist's experience will be. A skeletal structure is in place of how to do it. Preparation was made for the experience. There was a feeling of "knowing what to do but not how to do it" L summarized.

4. Protagonists have an established relationship with the director that includes feelings of trust, safety and comfort before the psychodrama begins. Having worked with the director was an important element to creating a feeling of safety in exposing oneself. The nature of the relationship - working with him/her or having been directed in a previous psychodrama was not important. What was important was that the relationship created a sense of trust and safety for the protagonist. The protagonist could risk working on a intimate issue when there was a sense of comfort in the director. L stated of the two co-directors "I felt good about P and her talk with me , but I didn't trust her since I didn't know her. M, I feel safe with. I was familiar with M's approach so I felt comfortable. I felt M respected what I said." C stated "the one thing that's really neat and really important was M's presence. I do feel that I knew him quite well and I trust him. But he was there and that helped it to feel safe and it helped me to do the work. I was out there finding my way. It would have been harder if it was P because I didn't know her. I felt a compelling need to do the work with M. Party

because I'd shared with him some of the issues and my pain so I felt he knew him on that
level, apart form just knowing him as a person". A stated "I had done psychodramas
with M. I had a rapport with him. I need three times with him to get to the core issues
... needed trust ... our relationship was a key factor ... may not have done this with other
group." The safety factor with the director enabled protagonist to take the leap into
intimacy. This was a crucial factor.

Warm-up

5. There is comfort and safety in having a close friend/colleague in the group.
Initially it is comforting to have at least one person that is known to the protagonist.
This facilitates the process of feeling safe. C stated "It was such an intense experience to
go through and it was nice to know there were people there who were close to me, as
witnesses." C explains this is comforting because it allows a friend to understand her
better. Her friend said to her "I had no idea of the depth of your pain and I've been your
friend for a long time." C said this made her feel "really validated. I felt he has really
witnessed a different part of me." Friends allow the protagonist to initially feel safe to
begin their work and later friends affirm the vulnerable self that was exposed. A did not
share this feeling he stated "I became close but it may be threatening to a valuable
relationship."

**6. It is helpful to observe other psychodramas in the workshop to focus on how to
develop one's own.** Protagonists come to the psychodrama with an idea of what they
would like to work on, but at the workshop other psychodramas influence the shaping of
the enactment. L stated" Each person's work altered how I was to do mine." He
continues "My plan changed as I sat through other people's drama. Their drama's made
mine clear to me. I got more out of the workshop since I waited. I felt in charge of my

work, felt safer." C stated that a fellow protagonist's work "really paralleled my situation. What that did for me, and it kinda took me by surprise, was that it kinda just snapped me into the whole thing. It just unleashed all my pain around that issue. It caught me by surprise. I wasn't anticipating it to happen. ... The first piece really helped to just talk about the reaction and the emotions, and it helped me." But, C later stated "I had a sense of how my piece would unfold. A previous psychodrama on a father theme touched me emotionally, but did not alter my sense of how to set up my own psychodrama." Other psychodramas stimulated the protagonists to incorporate new structure or ideas, but they also enabled the protagonists to feel safe in exposing their vulnerable emotional side. C stated "I think protagonist X did her work before mine about her mother saying good bye to her mother and railing at her mother. That was the first raw emotion I had seen. I found it really validating because I was full of raw emotion. I was thinking there has got to be someone else getting into this too. Of course, more followed but I found that really comforting just to see her showing her pain." A confirms this factor, "The piece had been building. Other dramas were preliminary to that." For those who waited to do their dramas, the protagonists were able to incorporate aspects of work done, clarify where they were going with their work and continue working on safety issues about exposing their issue.

   7. There is a need to feel safe in the group. This need is felt initially in terms of feeling vulnerable about exposing one's issues in the group. C stated that she needed to "share with the group" her feelings concerning a previous psychodrama in order to feel heard and find her place in the group. C stated that she "...waited until day two. I did not initially feel safe."

   Once the protagonist's began their work the group continued to provide support. L stated "I was aware of the audience's reaction. It was validating ... that they were with me. Silence would have made me feel isolated. The audience being with me was

important." C stated, "I felt like I was in a cocoon. ...There energy was there; it felt warm and supportive but I really wasn't aware of people being there at all. And that surprised me because normally I'm a little self-conscious when I am in a group." There is a loss of awareness of the group as a body of people. C stated she felt "....literally no audience was there other than their energy. They just faded right back. It felt like I was in this cocoon and I was the only one in it. ... I felt them supporting me. ... I was aware of people and I think once people laughed and that felt kinda neat but I literally didn't see anyone. A stated "I was aware of them (the group) both as being viewed, judged, and sometimes supportive, sometimes like an anonymous mask. That could not have happened without people, if that had been me in the room. A reconstruction and deconstruction of society of players and people in it. You can't get that feeling by yourself. It was always there. That gave it context, which would have been absent if I was alone. ... Psychodrama only makes sense within the group, that's what gives it power. The coming together of the group, sharing, intimacy. The first psychodrama I went to we become lifelong friends." The safety in the group enabled the protagonist's to work. Once protagonists begin their work the group supports the exploration.

8. There is movement to an emotional level. C stated "I feel inward looking. Protagonist Y's psychodrama unleashed all my pain around this issue. It caught me by surprise. I was not anticipating it to happen. It was initially tough to do because we were still getting to know each other and people had been trying to understand theory. In some ways there was this disconnection from me. It felt like I was in this different place ... of raw emotion I was thinking that there has got to be someone else getting into this too." L's move into an emotional level began on "Saturday night I had a dream. I cried in it. It was quite vivid and related to the psychodrama. When I started getting into the psychodrama the feelings came naturally. I withdrew into myself, into the

feeling." G confirms this emotional intensity, "It scared me. I was afraid I would cry. It was too emotional an issue. Control was an issue." This move to an emotional level is an initial step in the building of tension that culminates during the work.

9. There is a growing tension, that is felt emotionally, cognitively, and physically, before the protagonists begin their psychodrama. This tension culminates in a readiness or need to begin work on the psychodrama. A explains how this process began for him. His "emotions were so heightened it allowed strong expressions of things there previously. " There was a "sheer grieving" that was "very devastating." C stated her issue was so powerful that she felt it physically, "I think with this issue around my father ... the pain sits all through here, through my chest and up into my throat. Before the psychodrama workshop, anytime I connected with that pain it was like this big heavy cement feeling. So it was sitting here and heavy and painful and at the same time I was keeping it choked down. So it was really lodged here and what happened Friday night was it got loosened up and wanted to come pouring out and I was still trying to choke it back. So I cried the whole way home and I got back here and I cried and talked about ... the pain. It was just really fresh. It had all come out and I was ready to go to the next day. I had the sense that I would absolutely have to do something with this the next day. I just couldn't wait until Sunday ... couldn't wait probably until the afternoon of the Saturday. It was time. ... I needed to ... do the work ... I said to M and P, I have to do this now. Don't hold me back. It really felt like that. It was already taking on a life of its own. Even if I wanted to say, I'm kinda scared, I think I'll pull back, there was just this force within me that wanted to get going. It was unstoppable at that point. I think I used the word 'inevitable' in there." C summed up stating that she was compelled emotionally, cognitively and physically "to do it. My Tension had been building up long before the workshop, in anticipation of doing the work."

There is a strong emotional energy attached to the need to do the work - a sense of being tormented by the need to do the work. L experienced this as "performance anxiety." He maintains, "It felt like that's what I had to do. There was a feeling of being able to get in touch with feelings in front of others more easily than alone."

G stated he was "nervous." He "felt it in his stomach ... felt anxiety. Part of me wanted to do it, part didn't. I felt a dead lump in my stomach when I started out. I was afraid. I was thinking I should do it." There is a powerful energy, a sense of urgency which builds in the protagonist. It is a combination of cognitive, emotional and physical tension.

Encounter

10. There is a lessening awareness of the group as one's psychodrama develops. For A there were many previous psychodramas he had experienced and been a protagonists in. This experience enabled him to feel safe in the group quickly. He was consumed with his work and much less aware of the group. The safety factor had been dealt with in his previous psychodrama work. C stated "I was just having this emotional experience ... raw emotion ... I was full of raw emotion" which took over her need for safety in the group. L began the workshop with some apprehensions. I came to workshop wanting to do personal work. I wasn't sure I would do work because everyone else had alot of stuff up top. Mine was an ongoing issue. I was afraid people would be disappointed in my work since my work wasn't as intense, personal." This need to satisfy the group became less important, he states "uncomfortableness receded quickly ... but I always knew people were there ... no pressure to put on a good performance. I was losing touch with what I was feeling to pay attention to what others were doing." In response to the theme statement C later stated "absolutely - they vanished." For G there was a strong feeling of being torn with the need to do the work and the fear of losing control in the group.

"Part of me wanted to ... part of me didn't" he stated. As his work progressed there was a loss of control and awareness of the group, to being engrossed in the emotional experience of his work.

11. There is a need to use setting, roles, and story to make one's psychodrama more focused and move into role. A stated "You don't have to know what you want to do. It comes when you're there. I had only rough sketches of what I wanted to do. I had no clue as to what was going to happen. I know physically lay out of room. Except I wanted to attack this guy. so I asked before I did." A's previous psychodramas enabled him to dive into his work. Tears began very soon after beginning his work. It was a continuation of his previous works. Setting, roles, and story had been established and thus easily facilitated immersion into role. C stated "I was really aware of M and the two people that I chose to be in my piece" before she could begin her work. L stated "Describing the setting, ... physical things were important in establishing a relationship with director, audience ... so I didn't have to explain later. ... His (director's) advice was helpful. It gave me time to choose players, chronological order, props. It was useful ... got me into the story ... a natural unfolding then occurred." G summarizes, "One to one counseling is more cognitive, this time it was feelings, actions first. That 's the difference, psychodrama deals with the body. Everything leading up to it, characters, yelling screaming make it powerful. Different than just telling it to a counselor. This is reliving. Emotions are building as you relive, until it breaks. ...The role players helped. ... You're aware of them."

12. Moving from talking about the story to acting it out in present tense facilitates the immersion in role/character. C stated "Going into it I had this idea that I had to say good-bye to the dream father. I had to give up on that. It wasn't going to be. I

articulated to P and M that it was kinda like there was two fathers and I needed say good-bye to one and then figure out what was left. And yet that's not what ended up happening. I ended up embracing the dream father and holding on to that and pushing out the colder version of the dad. That was a surprise to me. I think that was a better way to for it to go. I don't know whether that just unfolded that way or whether that's M's skill in directing and taking the core of what I was saying and perhaps moving it in a different way." The emotions take over at a certain point. Fears and the need for safety decline. L stated "when I started getting into the psychodrama the feelings came naturally. It feels real, not melodramatic. It is easier to get in touch with feelings in front of people. ... Later, I found it confusing to start addressing the family in the present rather than the past. Did anyone mention that there might be a potential time shift, that characters might carry over." Moving into present tense facilitates a reliving experience. Plans change in the process of reliving.

13. There is a growing consciousness and power of the director and the auxiliary egos. Listening becomes intensified and focused on the director. His voice and tone are powerful. C stated "I was really aware of M and the two people that I chose to be in my piece, but other than that there was literally no audience there other than their energy. They just faded right back. It felt like I was in this cocoon and I was the only one in it. But M was on the periphery. I could hear his voice, his presence which was very comforting. That was really fascinating, just to feel how immersed I was in this, wrapped up by it." L stated he was "familiar with M's approach so I felt comfortable. In the beginning I didn't know who was in charge. I did not feel pushed. I felt M respected what I said. His advice was helpful. It gave me time to choose players. But, L did not feel that there was a growing power of the directors and players. As a response to this in the theme statements L stated, "I don't particularly recall this happening. I

was aware of my own growing involvement and not that of the director and auxiliary egos." G stated that one "must have trust in the instructor. I would have resisted or stopped if there was no trust. In the back of my mind I was scared, but willing go with M. The role players help, ... some insights from observers and players are helpful, some are not. M's comment stuck out in my mind, and a few others." A stated "They (director and auxiliary egos) were important but I felt in control." One is overwhelmed by the emotional intensity of the experience. Memories remain of the power of the director.

14. There is a intermittent awareness of the group. As the protagonists become immersed in their work their awareness of the group diminishes or becomes intermittent. C stated "I felt like I was in a cocoon. Their energy was there. It felt warm and supportive, but I really wasn't aware of people being there at all. And that surprised me because normally I'm a little self-conscious when I'm in a group....literally no audience there other than their energy. They just faded right back. I felt them supporting me. L stated that his "uncomfortableness receded quickly but (he) always knew people were there. ... I would come out of my awareness and see the reaction of the audience. It felt supportive. That was validating, ... felt like I had backing, that I wasn't alone. That was important to me. As a reaction to the theme statements L agreed but stated "it was never completely out of awareness. The level of awareness fluctuated with immersion in the psychodrama, in the emotional experience and release." On the other hand G stated "The role players helped, the others, I didn't notice. You are aware of them. Audience did not really help." G felt "comfortable with or without them. You are not aware of the, aware of them all the time, but like public speaking. Lots of people out there but you don't focus on them, like hockey players ignoring the crowd. What any one is saying is the last thing you think of. You are too immersed in the role."

15. There is a feeling of a movement (fluctuation) from being in control of the experience to allowing the director to control the experience. C stated "I don't know whether it just unfolded that way or whether that's M's skill in directing and taking the core of what I was saying but perhaps moving it in a different way. What really stands out for me was pushing the ice dad out of the circle and I remember M saying "What do you want to do with him?" It just seemed to happen. It just seemed so clear that that was the gesture that I needed to do . I think it (directing or following) was a combination of both. All of it felt right. It felt like at some point I could lean back and let him give me a sense of what was next and at other points he was asking me, 'What do you want? Where do you want to go from here?' So I felt in control, like it was my work. But he was there and that helped it to feel safe and it helped me to do the work. I was out there finding my way." C later stated "I felt the experience took on a life of its own. I had some control and I did not feel the director controlled the experience. Rather he worked with the unfolding experience or energy." L stated "I felt in charge of my work. ... In the beginning I didn't know who was in charge. I didn't feel pushed. I felt M respected what I said. His advice was helpful. It gave me time." M said I was symbolic of a Christ like figure to others and P picked up on my Jewishness and incorporated it. It was part of the shame. Maybe not always appropriate but for me it was." Both protagonists maintain that by sharing the direction of the piece, they were able to go much further and understand their issue at a deeper and broader level. G Stated "I felt at one point pushed by M. We went farther than I would have gone. I felt like I had been hung by my toes and shaken. I would have resisted or stopped if there was not trust with M. In the back of my mind I was scared, but willing to go with M."

16. There is a sense of fear, or danger at taking the risk to fully experience the drama. Although there is a tension mounting that compels the protagonists to work

through their issue there is also a parallel feeling of fear of actually doing it. This fears builds on the tension. This is felt at the beginning of the emotional experience as well as at points throughout the work. For instance C stated "What I remember was I didn't want to take the chair, I didn't want to take my father's chair and become him; that was hard to do. And when I did I closed my eyes because I wanted to connect with what it would be like to be him. I had the sense of going down inside him and it felt really scary and really confusing to be him. ... Even if I wanted to say, I'm kinda scared, I think I will pull back there was just this force within that wanted to get going." C stated she felt the fear "more beforehand" than after the experience began. G stated "Nervous, felt anxiety. Part of me wanted to do it, part of me didn't. It scared me. I was afraid I would cry. It was too emotional an issue. Control was an issue. I had to trust other people. I felt a dead lump in my stomach when I started out. I was in control, however, ... scary."

17. Physical movement facilitates the experience. The protagonists stated that they enjoyed and needed the action as part of the movement into the therapy. By getting up and moving they were able to swiftly slip into an emotional realm. The action facilitated the experience. A had been involved in therapy and felt confined by it. He needed the physical movement. It energized him to work through his issue. A stated "A part of me could talk or cry but this (the psychodrama) was holistic. It was really important to move. I don't just sit. It used all parts of me. I don't think therapy could do it." L agreed, getting up and moving facilitated his movement into the work. He also needed action. G maintained that with the actions came feelings ... "reliving powerful emotions and the breaking." C also maintained that the action was a particularly effective part of the experience.

18. There is a feeling of being lost in role - a change in control, being in a trance. C stated "There was a force within me that wanted to get going. It was unstoppable at that point. I think I used the word inevitable in there. It felt like I started it and then it was over and that time collapsed. It was almost like being in a trance. " In response to the theme statements L felt that he was not totally lost or in a trance. "I became immersed/lost in the role, but not losing control or being in a trance. Loss of control only to extent of feeling free to release emotionally." G stated it was powerful feeling of letting go. "This is reliving. Emotions are building as you relive until it breaks. There is a loss of control over emotions." This is the moment of catharsis for the protagonists.

19. There is a feeling of actually reliving the experience - in touch with old feelings. A stated "Emotions so heightened it allowed strong expressions of things there previously." C named the feeling as "sheer grieving." L remembered the past again. He felt an "urgency to finish." He began "thinking about past." It became "accessible to me. I had cut myself off from the past since it was tainted. I don't feel suspended in the present. Because of everything in my life, but the psychodrama put it together." Later he stated that he felt a "movement in and out of that sense." G stated "This is reliving. Emotions are building as you relive." Protagonists are able to revisit their past and complete unfinished business. They are able to take on different roles or have different behaviors in their past. They gain a new perspective on the issue. It is felt on a cognitive, emotional, and physical level.

20. Pacing and silence have an impact on the process. Experienced directors are cognizant of this while doubles and auxiliary egos may not be. The actual effect they produced was different for each protagonist. What doubles contributed in terms of insight was mainly not considered helpful. In some cases the doubles presence was

supportive in itself. Silence from the group in terms of the doubles not contributing to the experience was felt to be isolating to some of the protagonists. On the other hand the protagonists uniformly felt that too many voices had a negative effect. C stated "I felt them supporting me." When there was silence from the doubles C "wondered why they didn't (support me)." For C "there was some awareness. I was most aware of the audience when I was doubling as my father and that was the hardest part of the psychodrama in some ways. For me to take on his role and there was a lot of voices. ... I got this impression of voices, voices coming in both sides and people were trying to help me make sense of what it was like to be this man and most of what they said I had already thought of over the last couple of years so the support was nice but the effort, I could have easily have done it without that." C later stated "I found the doubling voices intrusive. I had already considered many of the ideas that were offered. I would have preferred to have silence and truly experience what it felt like to be my father." D found the doubles could be a hindrance from fully experiencing role reversal, she stated "What I remember was I didn't want to take the chair, I didn't want to take my father's chair and become him. That was hard to do. And when I did I closed my eyes because I wanted to connect with what it would be like to be him. I had the sense of going down inside him and it felt really scary and really confusing to be him and then all these voices started as my sort of memory of it. In retrospect it was probably easier to listen to the voices than to connect with the scared and confused part. And I think he is scared and confused. I think that was really helpful for me to experience that. It might have been interesting to keep focused on that. So I was aware of people and I think once people laughed and that felt kinda neat but I literally didn't see anyone. ... There could have been a hundred people there, there could've been nobody there, I really didn't differentiate. It was very odd."

L stated "When people were doubling me it was overwhelming. I was losing touch with what I was feeling to pay attention to what others were doing." G stated "The role players helped, the others, I didn't notice. You are aware of them. I could have done the doubling alone. ...Some insights from observers and players are helpful, some are not."

21. There is a natural flow of events. Once the tension has been broken and the emotional context of the experience takes over all the protagonists felt there was a natural flow to the experience. It was like real life. One lived it. One did not cognitive process the experience at that time. C stated "there was a loss of time and loss of awareness of others. It felt inevitable. It felt like I started it and then it was over and that time collapsed. I still have no idea how long my piece took. A life of it's own!" L stated "Psychodrama feels real, not artificial. When I started getting into the psychodrama the feelings came naturally. It felt like that's what I had to do. Sometimes it came, sometimes it didn't . It had a natural flow to it." G confirmed this experience, "This is reliving ... immersed in role".

22 There is role expansion derived from the experience. Co-researchers who were not protagonists felt an expansion of role. O stated "The first night I felt emotional, riled, emotionally aroused. As I thought about my drama, I could relive my scene; feel the anger, pain, agony. I felt connected to who I was in that incident. It was astonishing that as I imagined my family ... I carried that incident as I had experienced it - never looked at it as an adult - seen other points of view. Essential to revisit O (herself) at 7; the turmoil, the disappointment, the betrayal without the tears. ... In my scenario I asked, Where is my father coming from? Why did my mom do that? First I said, I don't know. Trying to understand where they were coming from was gaining an adult

perspective. Moving from victim to something else. Empowering - gave me options and choices I didn't see before."

Protagonists had the same experiences. C stated "... when I closed my eyes because I wanted to connect with what it would be like to be him (his father). I had the sense of going down inside him and it felt really scary and really confusing to be him. ... I think he is scared and confused. I think that was really helpful for me to experience that. ... There were some clear moments in the piece that I did, one of them was taking on my father's role in the chair and how stiff and hard it was to be him and the second one was just how comforting it was to connect with this dream father and how warm and softening it was. And the third thing that really stands out for me was pushing the ice dad out of the circle and I remember M saying, "What do you want to do with him?' and it just seemed to happen - it just seemed so clear that there was a gesture that I needed to do and it was gently moving him. That image is really vivid. It's probably the core of what I was doing. I think that represents a letting go; that it is gentle. There was a lot of railing that I did in that work, but in the end that very gentle moving out, and not getting rid of completely this person and not killing him or doing anything violent. Just gently moving him out a bit and give some more space to me and that was important part. ... My relationship possibilities (with her father now) are interesting. I feel softer. He has not seen me since the workshop. On the phone there was not the loaded stuff there usually is. I heard his voice. I feel sad, soft. The psychodrama helps me to get to a relationship with my dad; different, more possible. I feel the softness as I talk. The more I talk, the more cleared out - soft I feel. ... I was rebellious when younger. I don't regret it. I don't remember feeling that depth of rage. I don't normally have that rage. I feel proud that I did it in real life." A stated "The first psychodrama I did was devastating to me - could not handle it - being placed in role. It was a catalyst as a parent; showed me what I should do. In this one, revisited the first drama; caught by the emotion.

Reinforced my commitment to parenting, very striking, good precursor. People perceive you for the roles. At first it was devastating. Now it is reinforcing (to be seen as a good father when he did not feel like one). Warm emotions, thankful, honored, proud! Strong good emotions. When chosen over again for a father role, I was unsure of myself in that part; overwhelming to be asked to do the role. I worked on issues from the past and so completed walls that were missing; reinforced my identity." L stated "It was coming out of myself to see other people realizing I am not separate. It helped; changed the meaning some of my life had. Change in the meaning of the story." G stated "Thought about stuff all day, drama - reliving the part I lost control in. How bad was I really? Was I just denouncing myself? I tried to be honest about it. ... not clearheaded yet. Everyday I get closer to back to normal. Some things I wish I could take back. I can't. A lesson about how to look at my life! I pray he will forgive me. Trying to forgive myself. Coming to grips with it; wondering if it is over. Don't know. I wish he was here; wish I could take back things; glad I did not say more. I could have been a better son. He a better father. I know I'll be a better parent. ... Trying to have more patience; not fly off the handle - like with my dad. Its caused a shift; gone back and thought about those forgotten years - made them present. I treated my father terribly. I tried to be better, then he passed away. Did not get to go to the hospital. He was not sick. I said, "have a good trip" and then eight hours later, he was dead. He was never sick. It was a shock. I could not cry. Then I felt guilty that I could not make it up to him. ... It was earth shattering. One thing in my life was unfinished. It was scary. I was getting butterflies in my stomach thinking about it. It would not have been so powerful if he was alive. I would have no after shock I think. I could talk to him. I could have brought this up. This down stairs incident was the big one. This was the first time I thought of him differently, up to now he was the villain. It was confusing. I was frozen. I could not

even say "dad are you alright?" I can only think so much before I let it go. Gotten strong as the week has gone past. I look at things differently now."

Integration

23. There is a sense of importance of the event derived from being a protagonists in front of the group. A stated "I was aware of them (the group) both as being viewed, judged, and sometimes supportive, sometimes like an anonymous mask. That could not have happened without people, if that had been me in the room. You can't get that feeling by yourself. It was always there . That gave it context, which would have been absent if I was alone. Psychodrama only makes sense within the group. That is what gives it power - the coming together of the group, sharing intimacy. ... He maintains it was "like a heroic thing." C stated that others had witnessed her piece which meant alot to her. I felt validated for others had witnessed a different part of her. She stated "I had a witness, community. On a whole other level." Later she stated "The witnessing was tremendously valuable. L stated "Having that kind of attention felt nurturing, energizing. It felt easier to get in touch with feelings in front of people. I was aware of the audience's reaction. It was validating, that they were with me. The audience being with me was important. ... felt like I had backing, that I wasn't alone. That was important to me." Later this backing made L feel "much more connected to other people after my work. I had a recognition that I wasn't the only one who suffered. I knew we were all okay, shared something. I no longer feel that I have suffered more. It normalized me. It's coming out of myself to see other people, realizing I'm not separate." G wrote the experience out in his journal afterwards and included remarks from the group in the discussion. He felt that he could have done the work alone and that the audience was not helpful.

24. There is a feeling of vulnerability from the swift change of emotions. The intense emotions were expressed at various times in and after the psychodrama leaving the protagonist feeling physically and emotionally drained. C began the experience with heightened emotion. She stated "I was choking back all this stuff. It unleashed all my pain around that issue ... feeling very emotional ... the pain got loosened up and wanted to come pouring out and I was still trying to choke it back. I cried the whole way home ... the pain was just really fresh ... having this emotional experience ... raw emotion." C later stated "I expected a range of emotions to emerge but would say I felt surprised at how quickly they changed." A concluded of his emotional experience "I went from a place of openness, vulnerability to absolute anger frustration. I was explosive after, devastated. Issues of anger, jealousy came up. Emotions so heightened allowed strong expressions of things there previously. It was a ... sheer grieving." L stated "I was emoting a fair bit Psychodrama was intense then ... crash. Feel high, then low, now middle." G stated it was "Too emotional an issue. Control was an issue. Scary. Earthquake, tremors, ... felt quite numb. Not totally out of it. Like a sad movie. I felt tired, shaky. I felt like a sponge, felt like I had been hung by my toes and shaken. I think you have to be emotionally strong for this. The early days were hard. Felt down reliving those feelings. ... At the end you are emotionally exhausted, not disorientated but not clearheaded. It was earth shattering."

25. There is a need to return to the group for reconnection, support, and sharing. This is on an emotional level as one is too depleted to cognitively process any discussion. C stated "Immediately after I felt a concrete feeling. All the pain was just gone. I remember feeling really calm, just peaceful, and that was as soon as I sat down, like I had emptied out. It felt really good, wonderful, drained, but a cleaned out kind of drain. I remember it was hard, somebody asked me a question about was I ready to push the ice

dad out and I felt like I couldn't analyze it. In the debriefing I just wanted to take it in and be quiet. I didn't want to explain. I only remember a few of the comments that people made. A lot of it faded. I just held on to things that seemed significant. I could only hear so much." L reiterated this feeling. He explains how he felt connected to the group through his experience, "The ritual was important, a way of taking away the psychodrama with me in a symbolic form. People coming to talk, symbolically leaving their circle to come to mine. It felt like I had given them something. It made my experience valuable. If felt much more connected to other people after my work. Its coming out of myself to see other people realizing I am not separate. Having that kind of attention is nurturing energizing. I felt calm, centered from the release." Later L stated I could process some discussion as long as it wasn't too analytical. G stated wrote some comments from sharing and felt too depleted to connect emotionally with the group.

26. There is an intensity of feeling which is different for all the protagonists at the conclusion of the experience. It ranges from feelings of peace, comfort, depression, vulnerability to grief. A stated "I was explosive afterward, devastated. Emotions so heightened allowed strong expressions of things there previously. The sheer grieving of that weekend was a catalyst for the emotion around, like I was kerosene, she threw the match. ... Very devastating at the time, then a little disequilibrium, then flattens out." C stated "I felt a concrete feeling, all the pain was just gone. I remember feeling really calm just peaceful ... I had emptied out. It felt really good, wonderful. Drained, but a cleaned out kind of drain. ... I felt very spacy, floating ... altered state peaceful. ... softer" L stated " I felt slightly drained in a good way. ... I felt calm, centered from the release. I was more in touch with things. I felt quite high, centered calm. I had sense of being here, and being okay with that." G stated "I felt numb ... not totally out of it ... like a sad movie ... didn't feel like talking...did not dream but couldn't fall asleep. The next day I

felt tired, shaky, a tremor was coming but didn't know when. I felt like a sponge; ... emotionally exhausted, not disoriented but not clear headed ... earth shattering ... can be a harsh thing". There is a range of emotions the protagonists feel, but there is a common intensity to those feelings.

27. There is a physical aspect to the understandings derived from the experience.

Protagonists experienced physical discomfort through the reliving process and a physical shift in its aftermath. C stated "before the pain sits all through here, through my chest and up into my throat. Before the psychodrama workshop anytime I connected with that pain it was like this big heavy cement feeling. So it was sitting heavy and painful and at the same time I was keeping it choked down. ... Immediately after I felt a concrete feeling. All the pain was just gone. ... In the workshop we did the animal image, and this was after I'd done my work on Saturday. I had thought of a snake immediately because of the movement, the softness, the curves. Because I felt so soft myself it fit. That's the opposite of the concrete block that would make me feel really stiff. I was left with energy after this experience. Tired but peaceful." L stated "I really felt the shifts in my body at first. Now they are here (he points to his head). I feel more energy in my body ... fluid feeling." G stated "I felt less pressure on his shoulders." L stated "I experienced tremendous tension in the left side of my neck and shoulders that lasted for a couple of days."

After the psychodrama

28. There is an increase in cognitive processing of the experience sometime later.

New insights, keep arising and connections made. Ideas about future psychodramas arise. For A had already been involved in other psychodramas where he had worked on his piece. This enabled him to be clear about his work. He stated that the "piece had

been building. Other dreams were preliminary to that. It was completion of puzzle, final chapter of therapy. Sense of completion, testing. Sense things happening underneath. Sense of inner shifting, thing still to come to the surface ... now I'm off to do other things. ... Maybe simple coming to terms, finding peace, Events large but ramifications subtle. Done dreams with M ... needed three times with him to get to the core issues. First one was destablizing, took longer to recover from, felt induced, had alot of impact on emotional expression, freedom, relationships. Four years ago we did 12 dramas, I was in 10. I was the good father ... showed them what I should do. In this one revisited the first drama, caught by the emotion. Reinforced my commitment to parenting, very striking good precursor. I worked on issues from past so completed walls that were missing, reinforced my identity." C stated "there had been a shift. I felt thankful to see other people's work. It continued to be around father things and that touched and moved me. ... I still feel my psychodrama. It pushed something out. I made space. It was completion. The psychodrama helps me to get to a relationship with my dad, different, more possible. I feel the softness as I talk. The more I talk, the more cleaned out, soft I feel." L stated "I may do some personal work. I have mixed feelings about the psychodrama. Part of me would do it. There was a completion of some things. You need time, after, between, months. The need comes and goes. Recognition of changes, consequences are part of the crash." G stated "you go home and then, relive, then go through cycles. You can only think so much before you let it go. ... would have been harder to talk about it earlier ... reflecting." G stated he thought of his existing beliefs and compared it to what happened in the work." He stated that he initially felt an earthquake and later felt tremors over the issue and the insights that derived from the experience.

29. There is a feeling of a shift having occurred; a reconnection of old feelings in a new way and of having completed an issue. Change has occurred. A stated "It was completion of a puzzle, final chapter of therapy. Sense of completion. Sense of things happening underneath. Sense of inner shifting, things still to come to the surface ... now I'm off to do other things. It's done, finally ... I worked on issues from the psychodrama so completed walls that were missing. reinforced my identity." C stated "After that workshop I wrote, I drew, allowing it to settle in. ... I still feel my psychodrama pushed something out. I made space. This was holistic. It was a completion." L stated "I had a sense of my life moving forward. It felt like my life turned around. It has helped change the meaning that some of my life had - change in the meaning of the story. A return of spontaneity. A sense of things shifting, emotionally. The sense of shame shifted. ... A sense of being okay in myself. I was aware of feeling comfortable with in between spaces. There was completion of some things. Recognition of changes." In response to this theme L later wrote "I'm not sure it is how I feel (although I might have at the time that I completed the issue). In a sense, I think the issue always remains, although it hold over me, its effects on my life are altered and/or diminished." G stated "I look at things differently now. Yes, there has been a shift. This is a reconfirmation of that shift. There was a change "It was a process a movement - completion never ends."

30. There is a need to act on the change - rescript one's life. A stated "It reinforced my commitment to parenting." C stated "The psychodrama helps me to get to a relationship with my dad, different more possible." Later C reacted to the word rescript stating "I would say I am working on integrating the change, which does not necessarily mean action but could in the future." L stated "I had a sense that my life was moving forward. ...I may do some personal work. " L stated that he needed to do changes to feel that the changes were real or old patterns would return." To L a return meant a

"crash." G stated "There is a need to change, but not until new experiences can be rationalized and sorted."

31. There is a need to reconnect and find support from the director after a few days. L stated M phoned and "it helped. It lifted that sense of hopelessness, triviality. The rush from the psychodrama made me feel everything had changed, but by the second day I realized it hadn't. Loss of euphoria. Speaking to M lifted me out. M called said there was a sense of loss had to give up a sense of being unique. I used to feel special - a wound, a handicap. It was a challenge from M. The psychodrama took that away from me. That is part of the crash, part of the grieving. It is a loss and you have to replace it." All protagonists felt at a loss and needed to reconnect for safety, and direction with M. They needed to understand what they were experiencing especially as they were feeling vulnerable.

32. There is a reprocessing of the experience through the interview which is helpful and supporting to the protagonists. Each protagonists stated that through the interview they were able to process the experience. Initially in the discussion the protagonists felt too drained emotionally and physically to analyze what had happened. But with time and some processing of the experience and their feelings, they were ready to come to a deeper understanding.

Essential Structure

Participant observers had similar experiences to protagonist before they had witnessed a psychodrama.

There is an intellectual understanding of what psychodrama is before becoming involved in this form of therapy. There is a need to have experienced psychodrama as a

participant observer before one feels ready to become a protagonist working on an intimate core issue. After experiencing a psychodrama, one becomes aware of the emotional content and its intensity. One also derives an understanding of the whole experience by being an observer. This provides the initial safety factors necessary to begin one's own work. In this study, the protagonists had this experience while the participant observers did not.

Protagonists are ready to begin working on their issue. They have been involved in some form of self work that enables them to feel ready to begin working in this risk taking form of therapy. Where one is in terms of working out the issue determines how well one is able to cope with the experience afterwards. Being ready has varying interpretations to the protagonists. This ranges from a need to work on a specific issue to understanding oneself better.

Having participated in some form of self development and a previous psychodrama, protagonists have begun formulating what they will enact and how they will enact it.

A pivotal factor in becoming a protagonist is the relationship with the director. Protagonists need to know and understand the director. This understanding of who he/she is and the relationship that develops from this is a prerequisite to feeling safe. Protagonists need to feel that they can trust the director. It is crucial to believe the director will be responsible to the protagonist during the intense emotionality of the experience.

Participation in a previous psychodrama allows one to continue working on formulating the enactment. Ideas, roles and situations of other psychodramas stimulate the protagonists into a creative development of their issue.

Participation in previous psychodramas also is a factor to feeling safe in a group. There is a need to feel safety in the group. This means different things to different protagonists, i.e. to some it means finding one's place in the group while to others it is

interpreted as feeling trust and comfort with group members. Having at least one friend in the group facilitates the process of safety.

Protagonists as well as participant observers quickly move to an emotional level once the psychodrama has begun. There is a definite shift, a movement inward that both protagonists and participants feel.

Alongside the emotional component there is a growing tension concerning the work that needs to be done. This is felt by both protagonists and participants. The tension is felt emotionally, cognitively and physically. As the tension grows so does the fear or need to take the risk of becoming a protagonist.

Once the protagonist feels ready to begin there is less importance placed on the need for safety in the group or an awareness of the group. The further one moves into the intensity of the experience, the less aware one is of the group. Awareness of the group becomes intermittent.

Once the important factors of safety are felt with the director and the group one can begin the work. To facilitate the process of creating the work using setting, role development for the auxiliary egos, and telling one's story, pave the way. The director sometimes uses movement (walking around the circle with the protagonist) along with these devices. The physical movement enhances the process. Along with the movement, the director guides the protagonist into the present tense. There is a transition from narrating the experience to living it. Protagonists soon feel themselves going beyond the cognitive level of the story to 'reliving' the experience.

Part of the reliving process is a loss of the usual control one has. There is a spontaneity to one's action and a natural flow to the enactment.

During this phase the director has a powerful effect on the protagonist. His voice and tone may be all that protagonists is aware of. Secondary to this is an awareness of the auxiliary egos and the part that they play in the enactment.

As the protagonist continues with the work there is an intermittent awareness of the group. This is evident by protagonists feeling a group energy, hearing their laughter or the double's dialogue as a form of support. Yet, at other times, protagonists report no awareness of the group.

At some point in the experience there is a feeling of a change in awareness and control. There is a physical aspect to this - a shock or shift or release of energy throughout the body. From the outside there is overwhelming emotion revealed. This can take the form of wailing or angry outbursts. The feeling is so strong that some protagonists refer to it as a trance state. The protagonist is lost in role in a real life experience. Many times this entails getting in touch with feelings one had in the past. This is a very strong emotion. It can be overwhelming. There is a sense of confusion when the protagonist attempts to change behavior or role. Learning or relearning is derived from this part of the experience. There is role expansion.

A feeling of vulnerability is aroused by the swift and intense change of emotions and course of events. Protagonists at this point need the assurance and affirmation of the group. In the discussion following the enactment this assurance and affirmation is sought. Any intellectualization on the part of group members is often not helpful. The need for rejoining the group is emotional. Protagonists are still overwhelmed by their experience.

There is a feeling by most of the protagonists that the experience was enhanced by being witnessed by the group. There is a sense of importance derived from enacting a personal intimate core experience in front of a group. This is an important element to the power of the psychodrama process.

At the conclusion of the work and the sharing period that follows it, protagonists continue to feel strong emotions. The kinds and intensities of the emotions depends on where the protagonist is in terms of dealing with the issue and their developmental level.

If the issue has been dealt with beforehand and the work was seen as its conclusion there is more likely to be a feeling of peace and calm at the conclusion of the piece. If the issue has only recently been discovered and a new perspective on it seen, the effect is more likely to be grief and intense vulnerability. There are a range of emotions felt.

No matter what the emotion felt, there is a corresponding change in physical feeling. Initially, the body takes on the pain of the experience. Where one held the pain or issue in the body is sensitive. Later there is sometimes a sense of lightness. Posture may change. There is a change that is felt physically for the protagonists.

Any where from a day after the experience to days, weeks, or months later there is a reprocessing of the work. New meanings are derived from this on a cognitive level. One protagonist referred to the change of meaning or catharsis as an earthquake. The ensuing weeks erupted in tremors. With each eruption came new insights. Patterns of meanings changed. If there was a sense of completion from this particular issue, other areas were then opened up for examination. New areas were seen as needing to be worked on. Future psychodramas were developed or the need for continuing self development was recognized in these areas. Change has different meanings for each of the protagonists.

There is a feeling that a shift has occurred. There is a feeling that one has truly revisited the past but now lived it in a different way. Possibilities are envisioned of how things could have been. Realizations are made of how this event has shaped one's life. The hold the issue held over the protagonist has diminished. There is a change in the meaning one gives to one's life.

With the change of meaning there is a need to act on the change almost as a means of proving it to be true. Protagonists develop ways of behaving differently," patterns of behavior" change. There is a rescripting of one's life.

The intensity of the experience continues to leave the protagonists, as well as the participants, with feelings of vulnerability. There is a need to reconnect with the director and to a lesser extent with other participants or protagonists for support. There is also a need to have further guidance or direction from the director. There is almost a need to have an explanation for what occurred and comfort in the fact that other protagonists are feeling the same.

Taking part as a co-researcher in the interview process is seen as a positive step in reevaluation and reprocessing the experience. There is a helpful working through of the issue in the process of the interview.

Chapter 5 Discussion

This chapter includes a discussion of the findings of the study in terms of theory and implication. Recommendations for further research is also noted.

Theoretical Implications

Introduction

The research study has attempted to understand the process of change that is undergone in a significant psychodrama. The understanding is viewed from the experiential perspective of the co-researchers. The examination includes co-researcher's perceptions before, during - warm-up, encounter, integration, and after the psychodrama. The primary focus is the experience of the protagonist in a psychodrama.

Each of the essential structures will be examined in light of the relevant literature.

There is no literature on the similar experiences of participants observers to the initial exposure or stages of a protagonist. In the selection of a group for psychodrama it could be worthwhile to know that potential protagonists prefer to have knowledge as well as experiential exposure to psychodrama before they feel secure to become protagonists. This exposure could be organized in preparation for the protagonist experience or group development could be longer or utilized to ensure safety before the psychodrama begins. There is no literature that examines why it is helpful to have experiential knowledge of psychodrama before one can be a protagonist. One can only speculate if exposure is necessary in order to develop and create the piece or for the safety that is involved with understanding the whole experience.

<u>There is a feeling of personal readiness to being a protagonist. This involves a level of</u>

<u>self-development.</u> Moreno believed and practiced that protagonists could be taken from

the streets and after an initial warm - up period be 'ready' to become protagonists.

Moreno referred to readiness in terms of a "warmed - up state of mind" (cited in

Martens, 1990,

p. 110). Davis (1987) points out that many of the protagonists that Moreno worked with

were part of a program of psychotherapy which included follow - up; "It is in this

context of the extended psychodrama workshop that classical psychodrama continues to

produce the best results with the fewest problems" (p. 112). Protagonists were patients

involved with ongoing therapy with the director.

For psychodrama workshops of the kind used in this study 'readiness' would have a

different meaning. Readiness was assumed to mean developmental preparedness,

intellectual understanding of psychodrama and experiential exposure to it. Co-

researchers in this study, as in Marten's study, felt developmentally ready to work on an

issue. They had also participated in previous psychodramas.

Bennis and Shepard (1970) and Gibb (1964b) maintain that individual and group

development are parallel. Hence the participants and protagonists in a group

psychodrama would be at the same developmental level. If this is the case it would be

important to select individuals for psychodrama at the same developmental level. Since

the participants in the psychodrama workshop were all either students in the counseling

psychology program or working in the counseling field the developmental level may be

assumed as similar.

Kellerman (1979) notes that a selection for the group is helpful. He states that

"selection must account for a measure of ego development or ego strength that is more or

less equal for all group members regardless of diagnostic disposition or role type.

Whether or not roles are interpersonally accessible or show great interpersonal

impedance, an equal measure of ego strength or personal resilience must be present in members expressing any roles"

(p. 56). He explains further, "Despite the fact that members enter therapy groups with different motivations, they must somehow be able to recognize that they all share a reasonable range of stability or ego" (p. 56). According to most authors, the single most important selection criterion is ego strength or ego equality among group members. Levine (1979) points out that "individuals only recapitulated their life experiences to the point of the own development" (p. 71).

But, Kellerman (1979) notes that "the group has a transformation environment" and therefore group behavior cannot "be predicted accurately from behavior during an individual interview" (p. 54). He notes that "not only has the group an effect on the individuals but it also perhaps expresses its own personality. This group personality is determined by the unique complexion of cumulative roles and behaviors of members. Members may shift and exchange role behavior and yet the group can maintain its basic personality because each of the basic role dimensions retains its presence in the group" (p. 54). Davis (1964)also states "There needs to be a detailed analysis of the individual psychological personality, for the dramatization helped to produce a group mind, in whose functioning the salient psychological traits and motivations of each individual are revealed (p. 9). If groups transform participants and create a group personality, personal developmental 'readiness' would not be important. .

Dr. Le Bon (1920) in The Crowd: A study of the popular mind states "whoever may be the individuals who comprise it, however like or unlike by their mode of life, their occupation , their character, or their intelligence, the fact that they have been transformed into a group puts them in possession of a sort of collective mind which makes them feel, think, and act in a manner quite different from that in which the individual would feel, think, and act, were he in a state of isolation" (cited in Davis, 1964,

p. 7). Davis goes on to say "It seems that in the functioning of a group mind, the conscious personality of each individual disappears, and the unconscious personality takes over, permitting asking of contagion of feelings and ideas. The partial disappearance of the conscious personality is accompanied by a corresponding relaxation of normal inhibitions and restraints, so that in a mob these ideas can easily and quickly be translated into action" (p. 7).

The literature is conflicting on 'readiness'. My findings seem to indicate that developmental level is important to being a protagonist. Co-researchers were at a level of self development where they felt ready to begin work in a psychodrama. Personality may also play a role in readiness. There is no research on this aspect as pointed out by Martens (1990).

 Before the psychodrama workshop protagonists have begun working out their piece. The process of creating the piece begins early. Creation involves spontaneity. Moreno believed that creativity and spontaneity are entwined and that both are necessary for health. These factors initiate the reliving experience which is the healing force in psychodrama.

Protagonists become involved with the creative process of defining and working out their issue before the psychodrama workshop. Once safety factors are in place in the psychodrama workshop, spontaneity may arise. The spontaneous state, which is part of creativity is a "distinctive psychophysiological condition" (Moreno, 1946, p. 141). Moreno maintains, it is a "life energy working through the body and personal organism" (Moreno, 1946, p. 146). The original idea for the enactment continues to be recreated before the enactment and during the enactment. Spontaneity and creativity combine.

Gestalt principles of 'figure and ground' are evident; "Needs move in and out of the figure and ground fields. At a given moment a particular need may emerge and direct

the person's behavior. The need moves from ground to figure. After this need is met it recedes into ground, and the most pressing need in the 'new' now emerges from the ground as figure" (Passons, 1975, p. 15). The process of figure and ground begin early in the psychodrama experience for the protagonists in this study.

Protagonists need to feel safe with the director. The psychodrama workshop may be seen as developmentally at the dependency stage (Bion, 1991). In this stage the director or leader is the sole authority figure. There is great importance derived from the relationship of each participant and protagonist to the director. The co-researchers stated that the director was of extreme importance to them in terms of creating safety, in the reliving experience, and for reassurance after the workshop.

Moreno maintained that the relationship between people in the psychodrama experience was crucial. He used the term tele for this experience. It "denotes a deep insight that occurs in the encounter of one person with another. It is an insight into the actualities of another person, whether these actualities are physical, mental or both. It is based on the bond that lies at the root of all two way communication. It refers to a bond of perception a bond of affect and a bond of love or object relationship" (Davis, 1964, p. 30).

Davis refers to this relationship as tele - transference - rapport. He believes it comes very much to play in the relationship of the protagonist to the director and can be useful in psychodrama. The deep bond that the protagonists feel for the director may be a result of transference. One protagonist stated the director knew her and her issues well. In fact, she had only taken a course with him. Perhaps transference made her feel the deep bond.

Davis notes that "transference should be studied carefully, analyzed, and understood and then fully utilized (p. 33). Blatner uses tele to create an awareness which makes "it

possible to discuss, negotiate, and find creative alternatives regarding areas of conflict" (1984,

p. 129). Transference and projection on the director is an element that can be usefully used in the initial stages of psychodrama as well as throughout the process. The authority and power given to the director by the protagonists can facilitate the psychodrama experience.

The relationship of the protagonist to the director is crucial during the reliving experience. Gilbert (1992) points out in her study of three cathartic therapies that having trust and safety in the director is paramount to the reliving experience. This entailed various components according to Gilbert (1992).; qualifications of the director, being "well trained" and having "undergone his/her own therapy"(p. 152). Director qualities that were necessary, according to Gilbert's study, were honesty, trustworthiness, and indulgence with firmness. Warmth, caring, and unconditional positive regard were also noted as important.

Janov in particular, stressed that the therapist must be "relatively free of unresolved pain"(cited in Gilbert, 1992, p. 153). Gilbert points out that "The literature on catharsis emphasizes that trust must exist between therapist and client. Twelve of the therapist-subjects in Gilbert's study specified that trust and rapport between the therapist and client is a necessary factor in the facilitation of reliving" (p. 153).

Gilbert's study included the issue of emotional safety and boundaries. This included "Providing an environment in which the client feels in control, supported and protected (p. 154). In primal therapy, Janov "stressed how imperative it is that the counselor does not interject inappropriately in the therapeutic process" (cited in Gilbert, 1992, p. 154). A hypnotherapist stated "you are not going to do anything you do not want to do." (p. 154). A primal therapist said "The therapist should be unobtrusive. Don't push clients around" (p. 155).

Each cathartic therapy used a different way of inducing the reliving experience. "The reclining body position, the monitoring and directing of the client's breathing, of the client's body, of the client's speaking/behaving in present tense, and monitoring of the client's emotions" (p. 159) were all found to be common factors/behaviors /conditions in Gilbert's research and supported by the literature. In psychodrama the director uses unique means of entering the reliving experience, but the factors of safety, emotional support, and direction are similar to what Gilbert found in her study.

Gilbert (1992) found "the general tone of voice used by cathartic therapists as gentle, relaxed and calm" (p. 160) was an important factor to the reliving process. This factor was also noted as important in my study. The literature does not note this fact.

There is a need to feel safe in the group. An initial stage in safety is having a friend in the group. Protagonists stated that this was very helpful to the process of safety necessary to being protagonists. Blatner (1984) points out "One of the potential contributions of sociometry is the idea that people who like each other often work better together than do people who are grouped according to other criteria. It is entirely possible that more work and learning could have occurred if people with positive reciprocal tele were encouraged to sit together, work on projects together and in other ways have those informal relationships validated. This dynamics has been extensively confirmed by using sociometric testing in schools, military, organizations, and industry" (p. 145). This dynamic was also proven in this research study.

Levine (1984) also maintains that identification is as important as transference in the group. He states "Different levels and forms of identification operate in therapy groups. In a fundamental way identifications arise from one person perceiving others as having qualities that are similar to oneself or perceiving oneself as having qualities similar to

others" (p. 264). Having a friend in the group is a step to building group cohesion as was the case in my research study. Levine notes that "Early and ready identification with another in the group often makes the difference between a person staying in a group or dropping out early". When forming groups it is important to have "at least one other member with whom he can easily and readily identify" (p. 264). Having a friend in the group may help in establishing safety and enabling participation.

A very important component of psychodrama is that it takes place in the group. The special forces in the group combine with the psychodrama experience to form a unique reaction. An examination will be made of the group in this light.

Ackerman (1966) notes that in psychodrama there is "an involvement of individual members of the group directly in interaction with the protagonist, without playing the roles of auxiliary egos or doubles" (p. 313). Group dynamics are thereby continuous; "First they (participants) created the problem by stimulating the discussion in the warm-up; then they aided the protagonist as auxiliaries and doubles; then they become directly involved in the action by interacting as themselves; and finally, in sharing their experiences, they identify with the problem and form a common bond (p. 314). All participants in psychodrama therefore play an active role in the group.

The dynamics of the group have a powerful effect on the psychodrama experience. Davis (1964) states "It is important to remember that a group being strongly influenced by the unconscious is impulsive, changeable, and irritable. Reality and consequences are not as important to the group mind as to the individual mind. The conscious mind constantly weights evidence and means at least some use of the intellect in determining course of action. The group mind on the other hand has little critical faculty. The ego and super ego are forgotten, and the logic of the group mind is based not on the intellect, but on the associations of the id as they arise and is therefore almost unpredictable in its

course. The feelings of the group are always primitive simple and very exaggerated (p. 7). The protagonist tension is heightened by this experience. Participants also noted the intensity of emotions and emotional reactions they saw and experienced.

The psychodrama workshop, being a one shot group session, may be viewed as in a dependent developmental stage. In this stage a great deal of power is invested in the authority figure - the director. This helps to facilitate the psychodrama experience for the director is given the power and trust to allow intimate experiences to be exposed.

The group itself provides a safety net for this exposure to take place. There is a need to feel trust and safety in the group before this occurs. It is for this reason that the warm up phase of psychodrama is so important. As many in this group had previous exposure to psychodrama, and a relationship with the director, and other participants there was already established a sense of community and safety. This entailed that the warm up phase did not need to be extended.

When safety and trust is established in the group, participants can move quickly to creating their work. The first step in this process is allowing for spontaneity. "When a sense of trust is established in a group, spontaneity is possible" (cited in Martens, 1990, p. 119) .both Gibb and Blatner state. Blatner (1973) maintains four conditions are necessary for spontaneity:

1. "a sense of trust and safety

2. norms which allow for the inclusion of nonrational and intuitive dimensions

3. some feeling of tentative distance, which is one element of 'playfulness'

4. a movement toward risk taking and exploration into novelty" (p. 36).

These conditions were part of the co-researchers reported experience in the psychodrama. The warm up phase allowed for the development of the norms.

As pointed out in the literature review, group dynamics parallels family dynamics. Original roles are displayed and acted upon through the group and family dynamics are

worked through. Role expansion becomes possible. But psychodrama itself is recreating the original family situations. It therefore is occurring twice with twice the emotional impact. Hence, the intensity of psychodrama. The three cathartic therapies that Gilbert researched included catharsis without a group present. Catharsis in a group setting has a unique value.

Through the group, one learns to be accepted as part of a new family. The sharing stage at the conclusion of psychodrama is a time where this can be done. It is during this stage the protagonists, as well as other members of the group, can support and validate each other. The co-researchers needed the final coming together, not for analysis, but for emotional acceptance and support.

The sharing stage contributes to feelings of community. For example, shame can be revealed, witnessed and validated There follows a feeling of acceptance.

In the group there are many different kinds of people and problems. It is easy to find someone to identify with. Identification with group members' problems' "is facilitated because they find themselves powerfully moved in a way no professional performance moves the spectator. For the tears these actors shed, the cries they utter, arise from real anguish"(D'Amato & Dean, 1988, p. 308). Members come to understand others better and "frequently recognize certain of their own problems, patterns of behavior, or motives; and this recognition may help them solve or handle their own problems" (D'Amato & Dean, 1988, p. 308).

There is a tension that builds as part of participation in a psychodrama. It involves emotional, physical and cognitive components. The tension is initially experienced as fear. Benne (cited in Bradford, Gibb, Benne, 1964, p. 264) states that "when anyone comes into a new situation with unknown potentialities, he becomes anxious." He continues "when someone is beset by anxiety in a new situation, the natural response is

to seek help form experts or people who seem to know what is going on" (p. 313). Hence the importance of the director.

This tension is used in psychodrama to enhance the emotional experience and paves the way for catharsis. Benne (1964) states "The concept of optimal anxiety implies discomfort somewhere between ... extremes; some anxiety or discomfort is needed for change" (p. 314). Benne maintains that some regression promotes change.

. The anxiety is felt at a neuromuscular and hormonal level. It is part of the psychophysiological correlates of the psychodrama experience of spontaneity (Del Nuovo et al, 1978, p. 88). It is necessary for creativity. May (1975)states that "genuine creativity is characterized by an intensity of awareness, a heightened consciousness" (p. 44). Martens (1990) finds this to be part of anxiety and creativity.

Part of the tension is a "sense of urgency" to do the enactment. This sense of urgency illustrates one of the basic principles of psychodrama, 'act hunger'described by Blatner (1973) as "the drive toward fulfillment of the desires and impulses at the core of the self" (Martens, 1990, p. 113).

Guldner (1983) found that the sense of urgency develops and intensifies during the warming up period. The therapist begins on a superficial level allowing self involvement of the client to carry him deeper to the core" (Martens, 1990, p. 114).

Gilbert (1992) also found there was a build up of tension before the reliving experience in the three different cathartic therapies she studied. There seems to be no major difference in this tension build up for psychodrama.

There is less need of group safety and less awareness of the group as the protagonist's piece develops. Moreno's (1971) concepts of time, space, reality, and the cosmos as well as his action concept of role combine to create the focus and heightened emotion that culminates in the reliving experience (p. 128). Passons (1975) states "Needs move in and

out of the figure and ground fields. At a given moment a particular need may emerge and direct the person's behavior. The need moves from ground to figure. After this need is met it recedes into ground, and the most pressing need in the new now emerges from the ground as figure" (p. 15).

Gestalt theory focuses on the awareness and responsibility clients develop by looking inward at their own direct experiencing. Clients do their own seeing, feeling, sensing, and interpreting and do not passively wait for insight or answers from the past or in psychodrama from others. By focusing on immediacy, an awareness is derived. (Corey, 1991, p. 232). According to Gestalt theory, awareness is curative.

The Gestalt process outlined by Zinker (1978) results in:

1. "a move toward increased awareness of themselves

2. gradually assume ownership of their experience

3. become more aware of all of their senses

4. learn to accept responsibility for what they do, including accepting the consequences of their actions

5. move from outside support toward increasing internal support" (cited in Corey, 1991, p. 239).

It is the gradual focus of awareness from the group to the self that is curative. Awareness allows for one to "face and accept denied parts of their being and to get in touch with subjective experiences and with reality. They can become unified and whole" (cited in Corey, 1991, p. 239).

There are various factors that combine and result in the reliving experience. Tension is the foundation upon which the reliving experience evolves. There is an inward pull to an emotional level. A sense of urgency or act hunger results from the initial tension.

There is a transition to real life. "This element illustrates the core of psychodrama theory, the real life aspect, the experience of what Moreno called surplus reality (Moreno, 1969). Moreno (1969) defines surplus reality as the "protagonist's truth, as he feels and perceives it, in a completely subjective manner (no matter how distorted it might appear to the spectator)" (cited in Martens, 1990, p. 122). At this point real life takes over; roles become people. Kellerman (1984) states that "No adequate therapy is possible unless all actions, whether emotional, cognitive, or behavioral, are allowed to emerge within the therapeutic setting" (p. 202). This is a core principle of psychodrama theory and for the protagonists, it was this wholeness of experience which seemed to have the most impact on them" (Martens, 1990). The co-researchers in this study also found the wholeness of experience crucial to its impact.

Physical actions are imperative to the experience. Starr (1977) describes this as the experience of "moving from narration to motor representation" (cited in Martens, 1990, p. 129). This element is unique to psychodrama and is a central factor in the real life experience. Yablonksy (1976) states that "Most people require an active vehicle for expression, either exclusively or as an adjunct to an individual-verbal approach. It is apparent to many individual therapists that many clients, when embroiled in the discussion of deep emotions, either have the urge or actually get up off the therapeutic couch or chair and begin to physically move around. It is precisely at this point of action that psychodrama comes into play" (p. 21).

Greenberg (1974) suggests that in "acting out a difficulty, the problem in living is crystalized. ... Because it involves the body ... it ... becomes the most universal of all ways of communcation. Going above any language barrier, it widens the spread of links ... it invites the deepest language, one antedating verbal communication in the infant's development, the body language" (p. 47). Through the body one may slip into the past.

Gilbert (1992) points out that there are various means of entering this experience depending on the therapy used. An important initial factor is time. For all three cathartic therapies she found there needed to be a beginning section in which the client talked "about an issue in the past tense for 10-30 minutes" (p. 168). This is similar to psychodrama. The warm up phase begins this process. The director facilitates the reliving experience by coaxing the story from the protagonist.

There are different techniques which can be employed to facilitate the reliving experience. In the three used in Gilbert's study cognition's, emotions, and the body were employed.

For the reliving experience in psychodrama other factors are used. The protagonists stated that telling their story, physical movement, creating roles, and the setting initiated the way. Changing from past tense to present began the experience.

Gilbert (1992) found that reliving begins by using the present tense and monitoring such things as breathing, the body, and visualization. Monitoring of emotions was prevalent in the cathartic therapies (p. 163). She found that therapists begin by having clients talked (in the past tense) about a symptom/issue or past scene for about 10/30 minutes. As their clients are talking the primal therapist/subjects are waiting for "something old" -- a feeling "to come up. The Hypnotherapist -subjects usually are searching for an incident they can trace back. The Bioenergetic therapist - subjects watch the body for signs of repressed emotions" (Gilbert, 1992, p. 163). This is the first stage of the reliving experience.

Secondly, the unique techniques are applied - i.e. relaxation or guided imagery, focusing on feelings or the body. If there is trust in the therapist, reliving begins (p. 164).

The third stage involved in the reliving process the client speaks/behaves in the present tense regarding a past scene. Clients then began "squirming, tensing, moving about in

extreme agitation; flailing their arms and holding themselves rigid in terror" (p. 165).

Therapists direct and comfort clients during this time. During the reliving, clients move

in and out - coming out of reliving into the present and then back into reliving (p. 167).

There are many similarities in the reliving experience of psychodrama to other

cathartic therapies, although each has a unique entry into the experience. Directors may

be creative in their choice of techniques employed during psychodrama.

There is a natural flow of events once the reliving experience has begun. Control is

no longer necessary on the part of the protagonist or director. This natural flow is part

of the spontaneity process.

Moreno (1920) maintains that spontaneity occurs in action. Shearon (1981) points out

that spontaneity "... manifests itself in bodily change just as anxiety does. In the

spontaneous state, the body is motivated and energized - 'centered', free flowing.

Spontaneity paves the way for the creative act" (p. 115). Shearon states that

therapeutic change happens through the spontaneity process (p. 126). Greenberg (1974)

also referred to this process when he described psychodrama as a "tension reduction

type psychology"

(p. 11).

Gestalt theory has similarities to psychodrama in this aspect. Passons (1975) explains

how change is neither "planned, programmed, or coerced" in Gestalt therapy, but

"allowed" (p. 20). Perls (1969) states "... you can let the organism take over without

interfering, without interrupting; we can rely on the wisdom of the organism" (pp. 16-

17).

Catharsis takes place. "Moreno defined catharsis as "blocked energy being released"

(1946, p. 16). Nicholas (1984) describes how catharsis is experienced in psychodrama as a

"corrective emotional experience" which is "the reenactment with satisfaction and favorable consequences of an emotional situation which in the past was painful and/or ended unfavorably" (p. 36). Moreno claimed that catharsis is essential to the final outcome.

Mann (1966) stated that "Moreno's concept of catharsis is focused on the healing effect - not only in the spectator, but primarily in the producer (actor-patient) who creates the drama, re-experiences a particular event, ventilates and liberates himself form it" (p. 340).

Moreno used psychodramtic shock to enter the healing process of catharsis. Moreno states "The patient is asked to throw himself back into the hallucinatory experience when it is still most vivid in his mind. He is not asked to describe it, he must act. He puts his body into the position as it was then and acts as he acted then. He may select any member of the staff to recreate the hallucinatory situations. The patient usually shows a violent resistance against being thrown back into the painful experience from which he has just escaped. His natural bent is to forget - not to talk about it. He is full of fears that his new freedom may be shattered. The mere suggestion, and still more the actual process, frightens him. The psychodramatist is encouraging the patient to act, to throw himself into the psychotic state, to lose himself entirely in it, however awful, ugly and unreal it may seem to him at that moment." (p. 340). Mann reinforces that psychodrama shock does not necessarily have to be used for rexperiencing a hallucinatory delusion. "It can also be used as a cathartic element in a dramatic confrontation" (p. 340).

Kellerman (1985, 1987) found that catharsis was one of three elements which facilitated change in psychodrama. Kellerman believes that "While emotional, cognitive and actional release are central to the psychotherapeutic process, they are curative only in combination with other factors" (1984, p. 9). Looking at the experience of catharsis

in context with other elements in the study, Kellerman's findings are at least supported, if not confirmed, "What is unknown is the role each element plays individually and how they combine as a curative element" (Martens, 1990, p. 127).

Blatner (1984) defines catharsis as a "recognition and expression of feelings previously disowned" resulting in "an expansion of the sense of self, physical and mental relaxation" and a "sense of belonging and acceptance from the group" (p. 49).

The results of my study reveal that catharsis, as Blatner defines it, did occur. All the protagonists had a "recognition and expression of feelings " previously disowned, "an expansion of the sense of self, physical and mental relaxation and a "sense of belonging and acceptance from the group". The protagonists who had dealt with their issue extensively had also "an even higher level of integration that has to do with an individual's relationship with ultimate values and beliefs" (p. 49).

Gilbert examines the process of catharsis in a different way. Her definition of the reliving process also adheres to my findings. The co-researchers in my study did reexerpience a deep repressed emotional event in front of the therapist, consciously expressing the emotions in the present tense. Her detailed findings from three different cathartic therapies help clarify the cathartic experience in psychodrama.

Gilbert found seventeen factors that contributed to the cathartic experience. There were differences to the cathartic experience in psychodrama. The need to be alone with the therapist was the most outstanding difference. The therapist's manipulations, in terms of breathing, body movement and visualization, were also not noted as necessary in psychodrama. The need for soundproofing and mats and recliners are not necessary in the psychodrama experience. The setting changes with each psychodramtic creation.

Qualities that were similar were more common. The importance of the relationship with the therapist (director) is crucial. This relationship aspect was stated repeatedly in my findings. In Gilbert's study clients needed to have seen the therapist for at least two

months, for between one to two times a week, before the cathartic experience. There is an established feeling of emotional safety provided by the therapist. The client feels that the therapist will be there for them in terms of time during the session and after the session. The protagonists in my research stated that there was a need to be in touch with the director after the experience for safety and direction.

Gilbert has several factors that are included in what she entitles the 'general therapeutic techniques'. These are: tone of voice is calm/gentle/relaxed, warm up period of about thirty minutes prior to catharsis, talking about the issue in the past tense, therapist directs client to behave and speak in the present tense, the therapist monitors the client in this procedure, and the therapist monitors the client's emotions.

In my study each of these factors was also necessary; the tone of voice, the need to warm up through telling the story, choosing roles and setting, and the need to have the director move the protagonist into present tense.

Gilbert 's results reveal that there were four crucial factors necessary for the cathartic experience to occur; qualifications of the therapist (in my study this could be looked upon as belief in the therapist), qualities of the therapist, trust/rapport in the relationship and emotional safety provided by the therapist. These factors were noted in this study in the theme statements.

Gilbert pointed out that each cathartic therapy relied on specific techniques; hypnotherapy used imagination and relaxation, primal therapy focused feelings, and bioenergetics concentrates on the body. For psychodrama other techniques come into play, but the cathartic experience in terms of the reliving process is the same. The cathartic therapies involved a more intense experience than the reliving experience in psychodrama in this workshop.

The level of the cathartic experience may be different in psychodrama. Gilbert maintains that to achieve true catharsis one needs to relive the initial traumatic

experience many times before change can occur. The psychodramatic recreation need not be the original trauma and the experience is conscious to the protagonist. To Gilbert (1992) the "specific or general primal pain can be repressed so that it is completely lacking form the conscious memory or else exist in an abridged form" (p. 59). But she maintains the experience must be remembered with the feelings intact. In the experience, the defense must first be processed. In psychodrama this is attained by reliving the experience and then to "relive the actual trauma and express the emotions he/she did not communicate at the time it occurred" (p, 59).

To complete the cathartic experience Gilbert's research revealed that "the whole process of reliving a primal pain must be analyzed" (p. 101). This process begins in the sharing phase in psychodrama. It continues on after this experience in the need to talk to the director, the interviewer and an intimate partner and/or continued psychodrama or further therapy.

Catharsis can be tapped into through different techniques. The process of catharsis is similar although the techniques are different. The trance like state and loss or intermittent awareness of the group experienced by the protagonists in catharsis in psychodrama is similar to the loss of awareness or intermittent awareness that patients have to the therapist in other cathartic therapies in which only the therapist is present.

But, there is a consciousness of the group that is present in psychodrama which is not present in other techniques of catharsis. The group has forces of its own. Combined with the cathartic process, a novel experience is induced. The power of psychodrama may be in part this combination.

<u>There is role expansion during the cathartic process.</u> By emerging into the past and reliving an experience, the protagonists are able to recreate a past role. An expanded role repertoire results. Moreno (1964) describes spontaneity as a new response to an old

situation or an adequate response to a new situation (cited in Martens, 1990). Through spontaneity then, one can deepen and expand one's role. Possibilities arise where once there was only rigidity. Moreno stated that optimal health is the ability to be spontaneous and creative.

Blatner's role dynamics, in particular role distance, and using the role to direct other roles (meta roles) seem to be uses role could be used when one has enacted many psychodramas.

D"Amato & Dean (1988) point out in their study of psychodrama research that role is the only area of psychodrama research that has been empirically proven beneficial. Role playing has the "potential to change both attitudes and behavior" (p. 309).

There is a need to rejoin the group for support and acceptance after the cathartic experience. Group cohesiveness is an important factor in change, according to Yalom (1984). This factor has to do with the "sense of nurturance and need satisfaction" (Levine, 1979, p. 266) that members receive from each other. It also has to do with the identification that members have toward each other and toward the group as a whole. "The deeper the sense of belonging the more the individual incorporates the group as part of self" (p. 266). This, Levine (1979) believes, leads to an "expanded sense of self" (p. 266). One can relate differently to others. Yalom states "it is the affective sharing of one's inner world and then the acceptance by others that seems of paramount importance. Being accepted by others despite one fantasies of being basically repugnant, unacceptable and unlovable is a potent healing force. One can be accepted despite the perceived past failing" (p. 38). Protagonists in this study found acceptance to be particularly important. A validating experience is created by reliving a shameful experience or emotion in front of the group and then be accepted.

Receiving affirmation from the group appears to be a powerful part of the

psychodrama process. According to Shearon (1981) it gives the protagonist the courage

to be himself or herself, and eliminates feelings of rejection or isolation. It creates a

"group 'we' feeling"

(p. 131). Moreno (1969) stated that there are no spectators in psychodrama, for

everyone benefits form the process. For the protagonist, there is also the experience of

group members as witnesses and this is a factor not addressed in psychodrama literature.

It apparently has to do "with being heard and being seen for who you are. " (Martens,

1990, p. 132).

Corey (1985) found that protagonists "need to be able to count on the support of the

group in order to be able to integrate psychologically what they have just experienced"

(p. 205) and ..."if no such opportunity is available through discussion and sharing, the

protagonists may leave the session feeling rejected and lost instead of feeling freer and

with greater sense of direction" (p. 205). The processing of the experience with the

group was considered by Moreno and other psychodramatists as being an essential part

of the process and a necessary element in achieving closure (Kellerman, 1988).

Gilbert pointed out that time is left in each cathartic therapy session after reliving so

that the experience can be analyzed. "For, one of the important elements of

psychological catharsis is that the reliving process must be discussed with the client;

clarified and interpreted and the client must be helped to understand the experience

intellectually and emotionally" (Gilbert, 1992, p. 168). This is similar to the

psychodramatic sharing stage.

The findings indicate that people need emotional support after undergoing an intense

emotional experience.

There is a sense of importance derived from exposing oneself through the cathartic

enactment in front of a group. Davis (1964) states "But every person who acts out parts

of his life on a psychodramatic stage finds that in some measure he becomes better

understood. Equally, he acquires a deeper understudying of himself and others, so that

he can direct more of his emotional energy toward finding satisfactory solutions to his

daily problems, thereby relieving some of his tensions and anxieties" (p. 31). Being a

participant in a psychodrama, the co-researchers maintain, allows them to feel that they

are witnessing something important and by this witnessing providing support to others.

This is a helpful feeling for participants. "I felt honored" was an expression used many

times. Yalom (1984) states that altruism is an important component of the group

experience.

The aftermath is an intense emotional period for protagonists. Only Kellerman (1988)

and Blatner (1973) addressed the issue of closure in psychodrama. Kellerman believed

that closure appears to be borrowed from Gestalt theory. It "describes the process in

perception and personality organization, where an integrated and whole gestalt is

completed" (p. 21).

The emotional intensity relates to the developmental level of the protagonists.

Protagonists who felt the experience closed an issue that had been worked on felt less

emotional intensity than those protagonists who were first exposed to the issue during

the psychodrama. Developmental level, my findings indicate, relates to the experience of

closure.

There is a physical change from the experience. Protagonists felt a physical change

that was first experienced as painful and resulted in a sense of relief or lightness.

Protagonists also noted that physical movement enhanced the reliving experience.

Janov (1980) states that the mind and body are all part of one system and therefore what affects the mind will affect the body. He believes that to feel is to be healthy.

Neurosis begins when one cannot deal with the full intensity of pain and one disconnects from the event or becomes unconscious of it. But, when pain is repressed "something the brain and body do together, it remains in the system as unresolved grief" (p. 13). He maintains that "while repression saves, it also begins to destroy" (p. 13) for "there comes a time when we are so repressed that we hardly feel anything intensely anymore except the indirect evidence of pain - anxiety, depression, compulsions, obsessions (p.13).

Neurosis, Janov states, is a wound which has to hurt in order to heal; "And so you hurt like hell, you may cry, whimper, or writhe, but now at least you heal. ....Only the revival of feeling - of pain - saves you " (p. 49). Therefore "for healing to occur, suffering must be converted into pain"(p. 48).

Janov works toward this process in primal therapy; "the patient begins the session suffering. His nervous system mobilizes every part of him in a natural attempt to ward off the pain, he is suffering to keep the pain away. The vital signs momentarily are very high, the epitome of the suffering state. The body knows the pain is near, and retreats to the threat just as it has in the patient's life except that the reaction is much stronger now that the patient is actually allowing the pain to rise. The only other time the patient has suffered this acutely is the time the pain originally occurred and was repressed" (p. 51). Finally "when suffering reaches a crescendo the defense system fails, and the patient drops into the very opposite of suffering - feeling the pain. Afterward the body relaxes, the vital signs drop, the patient is feeling and expressing the pain as it connects the consciousness and the healing begins. The actual experience and resolution of pain brings a profoundly expansive feeling of relief after the acute suffering which precedes it ...feeling equals healing (p. 52). This is a biologic state as "less and less cortex becomes

involved in pain, defenses diminish, the mind clears, perception is lucid, and one sees the world as it is" (p. 121).

This biological change can now be measured according to Janov (1991) "Brian functions and brain structure change, blood pressure and heart rate drop, there are changes in numerous hormones. More importantly, our recent research indicates a significant change in the immune system of those who relive pain (p. 5). His most recent research findings indicate that resolving pain changes personality. It changes "brain function, muscle electrical potential (electromyography), blood circulation (our infrared photo studies), hormones (our stress hormone studies), and blood pressure, heart rate, and body temperature. These changes found in systematic empirical research in the biological process, indicate that neurosis is embedded throughout the system" (1991, p. 364).

Janov (1991) summarizes;

1. "Pain is at the core of mental and physical illness, pain that comes from trauma and unmet needs.

2. There are three distinct levels of consciousness dealing with this pain.

3. Early traumas leave a permanent imprint in the system.

4. It is possible to relive these imprinted memories and resolve neurosis and physical disease" (p. 8).

During catharsis healing occurs in the mind and body, according to Janov. Co-researchers in this study noted physical changes after their reliving cathartic experience which may prove Janov's theory.

There is a reprocessing of the experience that is emotional and cognitive.

Protagonists found that the psychodrama experience left them continually feeling and thinking in a different way. Cognitive restructuring is an outcome of the psychodrama

process (Nicholas, 1984). Kellerman (1988) found that the protagonists will experience ongoing insights after the psychodrama experience. He stated "If properly understood and managed, psychodramatic closure conveys the truism that something ends and then begins again and again and again. That's about the only thing we can be sure of" May (1985) states "It is as if the psychodrama, although completes one level in the same way that a story in literature or drama ends, remains an incomplete Gestalt at other levels, and becomes completed in stages" (p. 65). He claims that the completion of the Gestalt is also dependent on the individual's level of commitment. For him "...the idea, the new form which suddenly becomes present, came in order to complete an incomplete Gestalt with which I was struggling in conscious awareness" (p. 66).

There is a feeling of change. Kipper (1988) developed a model which he called a "behavior simulation paradigm" which illustrates both the principles and the experience of psychodrama as described by Moreno (1969) and the co-researchers in Martens as well as this study. The behavior simulation paradigm rests on these assumptions and principles:

1. The ability of human beings to act (and role play) is part and parcel of the process of living.

2. Human beings can plan such acts (behavior) in advance and produce the behavior volitional as the result of either a conscious decision or the request of others.

3. That ability is a manifestation of people's effort to master the world that surrounds them.

4. When such an effort fails, corrective measure, for example psychotherapy, might be required. The above - mentioned ability may be utilized in newly created miniature environments, namely simulated conditions aimed at facilitating better coping. Actually this principle is congruent with the basic premise underlying the psychodramatic

method. It is a method that provides new opportunity for a psychodynamic and socio-cultural reintegration (through) therapeutic cultures in miniature...in lieu or in extension of the unsatisfactory natural habitats (Moreno, 1964, p. xxii)

5. Simulated conditions involve patterns of interactions between particular sets of behaviors and the characteristics of the situation.

6. It is a hypothesized that these patterns of interactions constitute distinct phenomenological (experiential) states that activate or emphasize different psychological processes; therefore, they are expected to produce differential outcomes (Kepper, 1988, p. 166).

Moreno (1969) believed that the holistic experience of psychodrama created its powerful healing qualities. The real life aspect of the experience was the foundation for change. Gestalt theory (Perls, 1969) maintains that awareness creates change. Change, according to the results of this study, reveal that group dynamics, role expansion, catharsis, and awareness at an emotional, cognitive and physical level all factor into the change process of psychodrama.

There is a need for support after the psychodrama which entails reconnecting with the director and other support systems. Gilbert revealed in her study that there is a need to be supported by the therapist after a cathartic experience. Time is put aside for this support to occur. After the experience sessions are provided for continuing support. This same need is evident in the cathartic psychodrama experience as well. The need to reconnect with the director, an intimate partner, and/or the researcher in this study provided support in addition to the sharing stage of the psychodrama.

Summary

What is unique and powerful about change processes in psychodrama is that it is multifaceted. Psychodrama recreates the real life experience. It incorporates individual as well as group therapy dynamics. It includes catharsis with its emotional, cognitive, and physical dimensions. Behaviorist theory is implemented with the use of role and role enactments. Gestalt 'awareness' as well as psychodrama theory of the real life experience combine. The power of psychodrama is the combination of many different kinds of change therapy.

Implications for Counseling

This study reveals that there are many factors which combine to create a positive psychodrama experience. There are a number of conditions that are crucial as well as those that may be helpful to creating that experience in counseling based on the findings of this study.

In selecting a group for a psychodrama there are a number of factors one could consider in order to facilitate group cohesion and the psychodrama experience. This study indicated that people in similar developmental levels will work best together. Having at least one person who is a friend in the group is a first step in creating safety and a feeling of community. If any member of the group has any negative or fearful feelings toward the group, safety cannot be established. Having experiential as well as intellectual knowledge of psychodrama enhances confidence to become a protagonist and stimulates creativity.

Establishing a relationship with the director is a necessary prerequisite to becoming a protagonist in this form of psychodrama. The director is crucial to the experience and a relationship with him/her is the foundation for a sense of belonging, safety, facilitating

the encounter and support in the integration phase. The director's expertise is therefore crucial. Because psychodrama is powerful it should be used with caution.

Group development and dynamics play a fundamental role in the psychodrama experience. An understanding and use of this dynamic may facilitate the process. Most psychodrama experiences are short term and therefore the group will not develop beyond the dependency stage (Bion, 1991). Directors can make use of group members need for authority in that members are open to being drawn into the psychodrama process with less resistance.

Protagonists need to feel safe both with the director and the group. If either the director or the group does not provide safety protagonists felt unable to create their piece.

Members of groups feel initially anxious. Anxiety is felt by being a part of the group as well as part of the creative process of encounter. Too much anxiety impedes the process of spontaneity and creativity. On the other hand there is a need to have a certain amount of anxiety in order to heighten the reliving experience. Anxiety is a part of the creative act which directors may make use of. Anxiety is present in cathartic therapies in which only the therapist is present. Anxiety has a greater impact in a group. What is the balance necessary to create safety and risk?

The creation of the protagonist's piece, in the form of psychodrama used in this research, begins before the psychodrama experience. Time is necessary for the working out process. Time is also enhanced the piece during the workshop. The creative process continued with exposure to other protagonist's work. Time, observing others, and the director's expertise all facilitate the creative process of the reliving experience. Physical movement, telling the story, setting the stage, and creating roles for self and others allowed the process of reliving to occur. When are participants ready to begin?

There are specific techniques that one can use in order to facilitate the reliving or cathartic experience. But within the techniques there is great flexibility. The director's expertise in leading enhances the experience. Part of this direction may include prompting, doubling, or the use of auxiliary egos. Doubles were found distracting. My research, as well the Gilbert's, point to the fact that during the reliving experience it is important to not be disturbed or distracted. Reliving needs focus and intensity. Expert direction can assist this; anything other than that may prove to be detrimental.

During role reversal it is important to use pace and allow the emotional intensity and cognitive insights. Time and the silence of the group facilitate this. The reliving experience results from the use of thinking, feeling and movement. The actual living of the piece creates it intensity.

The sharing phase of psychodrama is an integral part of the experience for emotional support. Techniques could be incorporated that facilitate emotional support. Another session may need to be incorporated into the psychodrama that includes analysis and emphasizes group support.

There is a strong need to reconnect with the director after the psychodrama. The connection of the protagonist to the director, evident in the cathartic therapies with the therapist and client, was also a prerequisite in psychodrama. There is a strong feeling of vulnerability - a rawness of emotion for the protagonists as well as the participants after the psychodrama. Since the director was the safety net during the experience, it seems only the director can provide the necessary support afterwards.

There is also a need to reconnect with the group. There is a need to discuss the intensity of feelings as well as the ongoing insights that occur after the experience. There is a need for validation from other protagonists - a need to feel that others are going through the same emotional and cognitive eruptions. Having an intimate support

system is also a necessary element to feeling safe. Feelings are so vulnerable there is a need to have a safety net in some form to facilitate closure.

The director's role is crucial in psychodrama. The tone of voice is powerful. It is his/her expertise which enables the experience to happen, safely facilitates its flow and allows for a smooth landing. His/her role in the aftermath of the experience is also imperative. The director's role may also be helpful in making sure protagonists have a support system immediately after and for a period after the experience.

Implications for Further Research

Kellerman stated that a new form of research needs to be put in place in the study of psychodrama which includes both qualitative and quantitative research methods. I have included quantitative and qualitative studies as comparisons in this research project. Studies that combine both methods may prove beneficial.

More studies that use the existential phenomenological method need to be undertaken using different populations and different educational backgrounds.

Group dynamics have an effect on the psychodrama experience. By examining how the group effects the experience many questions may be answered. Is group selection necessary in terms of personality types or developmental level? Is group cohesion necessary for the protagonist? How does the group effect short term psychodrama workshops as opposed to long term group sessions?

Further research may be undertaken on the need for group selection. If similar developmental level is necessary for a successful group dynamics in psychodrama, as looked the case in my study, how was Moreno able to work with people 'off the street'. Moreno maintained that protagonists could be taken from the streets and, after a warm up, create a reliving experience. Are there different forms of psychodrama - in one form there is a need for a selection process, a relationship with the director and similar

developmental level and in another form of psychodrama these elements are unnecessary?

Studies of group dynamics indicate conflicting viewpoints. Some researchers have found that the group creates its own dynamics and it is not necessary for group members to have similar developmental levels. Other researchers maintain that individual developmental level is important to the experience. Further research could examine this conflict.

If having a friend in the group proved beneficial to the protagonist's experience, would creating a mentor system in the group prove even more beneficial? If the mentor system is initiated prior to the workshop and included a relationship after the workshop would there be less a need to find support from the director or in follow up sessions? Would there be a connection already providing the safety net in the mentor?

Protagonist co-researchers felt different levels of completion to their issues. Protagonists who had worked through their issue for sometime found the psychodrama to be a completion, with new areas opening up for examination. The aftermath was not difficult. On the other hand, protagonist who had just begun to work out their issue found the aftermath a difficult emotional process. For the director, would understanding the protagonist and his/her issue beforehand help? Realizing that the protagonist may have difficulty in the aftermath, could the director provide further support. Would it be helpful to combine psychodrama, as Moreno did, with long term individual and group therapy?

Research that focuses on the role of the director would be beneficial, especially as a means of realizing qualities and direction that are helpful in creating group dynamics and the reliving experience. The necessity of having a relationship with the director before the psychodrama could also be examined. Comparison studies could be examined

in which the director has some form of relationship with protagonists beforehand to a psychodrama in which the director is unknown to the protagonists.

What is the role of catharsis in the whole psychodrama experience? How important it is in terms of change? How does it combine with other components to compliment the experience? Within catharsis itself what aspects are the most profound for the protagonists - insights or emotions? If catharsis is a powerful experience in individual therapy, what are the differences and similarities when catharsis is created within a group experience?

Janov points out that there are physical changes as a result of the cathartic experience. Future studies may examine the physical change that occurs as a result of the psychodrama experience. Co-researchers noted a physical component related to the reliving experience as well as a physical change in the aftermath. What are the immediate physical results of the experience and what are the long term physical changes resulting from the psychodrama. Does movement enhance physical change?

An examination could be made on the varying impacts of emotions, cognitions and behaviors as a result of psychodrama. Which, if any, experience is the most profound?

What are the long term effects of psychodrama? What is the difference between having one psychodrama experience and many? What is the difference between a psychodrama experience and follow up therapy or no follow up at all?

There are stages to change or transitions according to Bridges (1993). There is an ending, a neutral period and a new beginning. To experience change in psychodrama are these stages enacted? If endings combine both concrete losses as well as identity loss, does the reliving experience recreate these stages. The neutral period is a period of depression. The majority of the protagonists seemed to experience some form of depression after the psychodrama. Is this the neutral zone? This research did not take into account long term effect which could have taken into account new beginnings. The

interviews and follow up were all within a four month period. Research that looks at long term effects of psychodrama could answer questions about Bridges; 'beginning stage'.

How does the use of role enhance loss and change? The theory of role dynamics could be further enhanced by examining how role effects significant change.

What is the meaning of being a witness in psychodrama for both observers and protagonists? How does psychodrama enhance a sense of community? Do people become more community oriented after this experience? How do feelings toward family change (if the group situation recreates the family, and if the family itself is recreated in the reliving experience)? How does the double experience of family impact the experience?

Summary

The purpose of this study was to explore the meaning of change for participants involved in what they felt to be a significant psychodrama experience. The process of change in psychodrama is complex. Blatner (1984) points out that psychodrama incorporates both psychoanalysis and object relations theory. But, it also integrates and can be integrated with cognitive therapy, behavior therapy, Gestalt therapy, the creative arts in therapy, play therapy, the body therapies, imagination therapies, hynotherapy, Adlerian therapy, Jungian therapy, family therapy, group therapy as well as many other less known forms of therapy (pp. 115-122). The power of psychodrama is that it incorporates many areas necessary for change. It is a 'real life' experience.

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Consent Form

Title of Project: Change Processes in Psychodrama

Principal Investigator:	Committee Chairperson
Ms. Susan Baum, M. A. Student	Dr. Marv Westwood
Department of Counselling Psychology	Department of Counselling Psychology
U.B.C.	U.B.C.
985 - 4330	822 - 6457

Psychodrama is an effective psychotherapeutic group process. This study will examine change processes in a psychodrama workshop. If you feel that the psychodrama experience was significant to you in terms of change you are asked to participate in the study as a volunteer.

There will be one interview which will take approximately one hour. The interview will be taped. You will be asked to describe your experience of the psychodrama. I will transcribe the interviews and formulate themes from them. This analysis will then be given to you for additional remarks. This second interview will take place within six months of the first interview.

I will be available to answer any questions concerning the research procedures. Confidentiality of interviews will be guaranteed by the use of codes for names of all volunteers. You have the right to refuse to answer any questions and to withdraw from the study any time without affecting your academic standing or your personal reputation.

I,..consent to participate in the above-described study under the conditions outlined, and acknowledge receipt of this consent form.

Researcher:

Date:

APPENDIX B: Participant Observer Theme Statement Forms

THEME STATEMENTS - Participant Observers

1. There is an intellectual understanding of what psychodrama is.
Agree

Disagree

2. Participants have a relationship with the director before the psychodrama.
Agree

Disagree

3. There is a need for trust and safety in the director which is not yet fully established.
Agree

Disagree

4. There is a need to feel trust with the group which is not yet experienced.
Agree

Disagree

5. There is a focus on observing the psychodramas to better understand one's own issue and develop it into a psychodrama.
Agree

Disagree

6. There is a focus on planning what one would do as a protagonist.
Agree

Disagree

7. There is a feeling of not being ready to be a protagonist.
Agree

Disagree

8. There is a building of emotional intensity and an anxiety about that.
Agree

Disagree

9. There is an intermittent awareness of the group and of the psychodramas.
Agree

Disagree

10. There is a growing understanding of the issue one would like to relive.
Agree

Disagree

11. There is a feeling of emotional exhaustion at the end of the psychodrama due to the intensity of the experience.
Agree

Disagree

12. There is a surprise at the emotional intensity of the experience.
Agree

Disagree

13. There are insights gathered from the experience that last for a while after the conclusion of the psychodrama.
Agree

Disagree

14. There is learning that takes place form the universality of themes witnessed in the psychodrama.
Agree

Disagree

APPENDIX C: Protagonist Theme Statement Form

THEME STATEMENTS - Protagonists

1. Protagonists have been involved in personal development or counseling before this experience.
Agree

Disagree

2. Protagonists have already experienced being a participant, auxiliary ego or a protagonist previously.
Agree

Disagree

3. Protagonists have an established relationship with the director.
Agree

Disagree

4. Protagonists have a feeling of trust, safety and comfort with the director before the psychodrama begins. There is also a belief in his/her direction.
Agree

Disagree

5. There is an idea already formulated about what the protagonist
s experience will be. A skeletal structure is in place of how to do it.
Agree

Disagree

6. There is a need to feel safe in the group.
Agree

Disagree

7. It is helpful o observe other psychodramas in the workshop to focus on how to develop one's own.
Agree

Disagree

8. There is a growing tension, that is felt emotionally, cognitively , and physically, before the protagonist begins his/her psychodrama.
Agree

Disagree

9. There is a movement to an emotional level.
Agree

Disagree

10. There is a lessening awareness of the group as one's psychodrama develops.
Agree

Disagree

11. There is a need to use setting, roles and story to make one's psychodrama more focused and move into role.
Agree

Disagree

12. Moving from talking about the story to acting it out in present tense facilitates immersion in role/character.
Agree

Disagree

13. There is a growing consciousness and power of the director and the auxiliary egos.
Agree

Disagree

14. There is an intermittent awareness of the group.
Agree

Disagree

15. There is comfort and safety in having a close friend/colleague in the group.
Agree

Disagree

16. Listening becomes intensified and focused on the director. The voice and tone of the director are powerful.
Agree

Disagree

17. There is a feeling of a movement (fluctuation) from being in control of the experience to allowing the director to control the experience.
Agree

Disagree

18. There is a sense of fear, or danger at taking the risk to fully experience the drama.
Agree

Disagree

19. There is a feeling of being lost in role - losing control, being in a trance.
Agree

Disagree

20. Physical movement facilitates the experience.
Agree

Disagree

21. There is a feeling of actually reliving the experience - in touch with old feelings.
Agree

Disagree

22. There is a feeling of support from the voices of the doubles. What doubles are
actually saying is not always helpful. Silence from the group is equated with not being
supported. Too many voices has a negative effect.
Agree

Disagree

23. There is a natural flow of events.
Agree

Disagree

24. There is a sense of importance of the event derived from being a protagonist in front of the group.
Agree

Disagree

25. There is a feeling of vulnerability from the swift change of emotions.
Agree

Disagree

26. There is a need to return to the group for reconnection, support, and sharing. This is on an emotional level as one is too depleted to cognitively process any discussion.
Agree

Disagree

27. There is a feeling of physical and emotional exhaustion at the conclusion.
Agree

Disagree

28. There is an intensity of feeling which is different for all the protagonists. It ranges from feelings of peace, comfort, depression, vulnerability to grief.
Agree

Disagree

29. There is a physical aspect to the understandings derived from the experience.
Agree

Disagree

30. There is an increase in cognitive processing of the experience sometime later. New insights keep arising and connections made. Ideas about future psychodramas arise.
Agree

Disagree

31. There is a feeling of a shift having occurred; a reconnection of old feelings in a new way and of having completed an issue. Change has occurred.
Agree

Disagree

32. There is a need to act on the change - rescript one's life.
Agree

Disagree

33. There is a need to reconnect and find support from the director after a few days.
Agree

Disagree

34. There is a reprocessing of the experience through the interview which is helpful and supporting to the protagonists.
Agree

Disagree