

Psychodramatic Approaches to Treatment of Resistant Clients

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The following is an outline to a presentation given at the Utah Domestic Violence Council's 12th Annual Domestic Violence Treatment Conference

Presentation Description:

Dr. J. L. Moreno (1953, p. 81), originator of the psychodramatic method, described it as follows, "Psychodrama can be defined . . . as the science that explores the 'truth' by dramatic methods. It deals with inter-personal relations and private worlds." Resistance is part of the personal truth of the client, or in Moreno's terminology, the protagonist. As such, resistance can be explored, understood, and resolved using psychodramatic methods. Psychodrama and related action methods allow direct exploration of attitudes and behaviors preventing spontaneity and creativity. Actions can be observed and measured and can become subject to study, hypothesizing, and intervention, the processes of science. The science of action begins by focusing on the warming up process, externalizing the unspoken dialogue one has with him/herself or with another person. This leads to externalizing the concrete situations, stories, and dynamics as if they are happening now. The experience can be expanded upon and played out clearly and fully and barriers can be confronted, studied, evaluated, and changed through introducing surplus reality or "what if" situations. Thus the canon of creativity can be effectively applied to problematic life situations. Moreno believed that what is learned in action must also be unlearned in action and since learning occurs in the context of other persons as interactors or audience it is "co-produced." This presentation will identify and demonstrate specific applications of psychodrama and action methods approaches to resistance.

Participation Agreements:

1. As a condition of attending these sessions attendees are asked to commit to keeping confidentiality. Part of these sessions (especially the second one) may consist of addressing personal material of one or more of the participants. If you cannot commit to honoring the confidentiality of what we do here please do not attend.
2. As a condition of attending these sessions (especially the second one) attendees are asked to participate in the experiential exercises only to the degree that they are comfortable. They understand that these experiential methods are powerful vicariously, that is, just observing can have a significant impact. If you have questions or concerns in this regard, please discuss these with the

presenter. He will be available before and after the sessions.

3. There shall be no contact in terms of physical violence in any way.
4. Attendees are encouraged to wear clothes in which they would be comfortable moving around, sitting on the floor, etc., and to avoid wearing jewelry that could become snagged or entangled should they volunteer to participate in an enactment.

Learning Objectives:

1. Participants will be able to identify a psychodramatic conceptualization of resistance.
2. Participants will be able to describe one or more psychodramatic intervention(s) in response to resistance.
3. Participants will be able to implement one or more psychodramatic intervention(s) that increases spontaneity and creativity and counters resistance.

Presentation Outline

- I. What is Psychodrama?
 - a. "Psychodrama can be defined . . . as the science that explores the 'truth' by dramatic methods. It deals with inter-personal relations and private worlds" (Moreno, 1953, p. 81). J. L. Moreno, the creator of the approach saw it as a religious revolution, a way to change society as a whole, not merely an approach to psychotherapy. "A truly therapeutic procedure cannot have less an objective than the whole of mankind" (Moreno, 1953, p. 3).
 - b. The five instruments, stage, protagonist, director, auxiliary egos, and audience (Hare & Hare, 1996, Moreno, 1953, p. 81-87, Moreno, 1972 p. a-e).
 - c. Stages: Warm up, action, sharing.
 - d. Moreno's seminal influence: "Group Psychotherapy," role-playing, Fritz Pearls, Eric Berne, Virginia Satir. "Psychodrama provided the ground out of which the third force of psychotherapy emerged in the fifties and sixties" (Johnson, 1992, p. ix-x.). Eric Berne (1970, p 164), reviewing Fritz Pearl's Gestalt Therapy Verbatim wrote, "Pearls shares with other "active" therapists the "Moreno problem: the fact that nearly all known 'active' techniques were first tried out by Moreno in psychodrama, so that it is difficult to come up with an original idea in this regard." Abraham Maslow (1968) commented, "I would like to add one credit-where-credit-is-due footnote. Many of the techniques . . .

were originally invented by Dr. Jacob Moreno" Will Schutz (1971) similarly acknowledges "virtually all of the methods that I had proudly compiled or invented [Moreno] had more or less anticipated, in some cases forty years earlier"

- e. Practicing psychodramatists include persons who identify themselves as holding a variety of therapeutic orientations and psychodrama is readily compatible with a variety of therapeutic orientations (Blatner, 2000, pp. 128 – 231).

II. What is resistance from a psychodramatic perspective?

- a. In an operational sense, "resistance means merely that the protagonist does not wish to participate in the production" (Moreno, 1972, p. viii). This could include opposition to justifiable and realistic shortcomings in the method or director/therapist.
- b. Resistance can be understood in terms of "the science of action" (Moreno, 1953, p. 73). "The science of action is concerned with preparation for action, barriers to action (resistance), inability to be in the moment, and therapeutic methods designed to assist the creative process in life. The task of action methods is to explore those events and situation in which a person has learned attitudes and behavior preventing spontaneity and creativity" (Hale, 1981, p. 7).
- c. "Resistance is a function of spontaneity; it is due to a decrease or loss of it" (Moreno, 1953, p. liv). It is a response to a situation that is novel, useful and adequate (Hale, 1981, p. 6) instead of one that merely results in conformity to role-conserves (frozen, habituated behavior) (Kellerman, 1992, p. 138).
- d. In psychodrama, resistance and anxiety are related. Anxiety, according to Moreno (1953, p. 42), results from "a loss of spontaneity," an inability to live in the here-and-now. "Protagonists become anxious and resist when they cannot find adequate responses to internal and external pressures" (Kellermann, 1992, p. 139).
- e. Resistance can be understood as a "counter-action," a protagonist's active or passive attempt to block their own spontaneous energy (Kellerman, 1992).
- f. Moreno (Moreno and Ennis, 1950) sees psychodrama as transforming and transcending psychoanalytic concepts, including transference and resistance, but not eliminating the useful part of the psychoanalytic contribution. Resistance is understood to be part of the interaction dynamics.

III. Manifestations of resistance (Kellerman, 1992).

- a. Expression of one feeling may be a defense against the expression of another such as expressing laughter instead of sadness.
- b. "I don't feel like acting" conveys they do not want to feel or express their feelings and thoughts.
- c. Resistance may be active or passive.
- d. First time participants may resist role-playing because of fear of being the center of attention, fear of public exposure/stage fright, and lack

- of sufficient emotional preparation (warm-up).
- e. Experienced participants may draw back from prematurely uncovered sensitive areas.
- f. Avoidance of personal and emotional engagement, not letting it matter or count in terms of "real life" (Korn, 1975).
- g. Difficult protagonists, including those who: narrate or intellectualize, can tolerate little participation, refuse to get on stage or who leave prematurely, or disrupt (psychotic hysteric, homicidal/suicidal) (Seaborne, 1966) or become confused, forget the purpose of the session, express themselves in short sentences, laugh inappropriately, inhibit body expression, or block their voices (Sacks, 1976).
- h. "Interpersonal" resistances, Moreno's (1972, p. 215) terminology for transference or barriers between members of the group or the member and director.
- i. Auxiliaries may refuse to take certain roles. Moreno (1972, p. xvi) identifies the reasons as "therapeutic" (the protagonist "uses" the role playing situation without any willingness to reverse roles with the auxiliary), or "private" (indicating personal difficulties with certain roles).
- j. Group norms, climate, or sociometric structure may cause resistance in certain group members.
- k. Resistance may be further categorized in terms of Bion's (1961) basic assumption groups (dependency, flight-fight, and pairing) or Whitaker and Lieberman's (1964) group focal conflict (the solution of a shared group conflict).

IV. Functions of resistance (Kellerman, 1992).

- a. Avoidance of uncomfortable feelings, e.g. anxiety, guilt, shame.
- b. Drawing on psychoanalytic theory resistances can be understood as defense mechanisms or security operations to cope with internal external threats.
- c. Protagonists presenting as "feeling nothing," or "empty" or "blocked" have chosen the defense mechanism of "isolation" as a way of escaping feelings and may strongly resist enactment preferring to be spectators.
- d. From a psychoanalytic ego-psychological framework resistances are understood to function to maintain psychic equilibrium. Protagonists have stronger or weaker egos and need correspondingly less or more rigid defenses. Ego strong protagonists, who use resistances to defend the status quo in their neuroses, need psychodramatic enactments that allow them to regress, abreact, progress to, and reach a new integration. In contrast, ego-weak protagonists, who use resistances to maintain a fragile emotional homeostasis to protect from excessive anxiety or ego fragmentation, need enactments that strengthen their ego functions and build up an independent ego-structure.

V. Techniques for resolving resistance.

- a. Warming up (to the group and the process)

- i. "The necessary conditions for spontaneous behavior include (a) a sense of trust and safety, (b) a receptivity to intuitions, images, feeling, and other non-rational mental processes; (c) a bit of playfulness – so one doesn't feel overidentified with the success of every move in the process – and (d) a movement toward risk taking and exploration into novelty" (Blatner, 1996, p. 43, see also Moreno, 1983).
 - ii. The process begins with the director. For examples of the process and warm-ups see Pramann, 2002, 2005c at <http://www.sccc.com/articles.htm>
 - iii. Within the enactment, scene-setting, role-reversal, and the other techniques serve to warm-up the protagonist as the psychodrama unfolds.
 - b. Soliloquy. The protagonist shares with the audience inner feelings and thoughts that would not be normally be expressed. By convention, other role-players don't hear or respond to these expressions. In so doing, the protagonist can become aware of his or her own motives and purposes.
 - c. Double and Doubling.
 - i. Doubling has been identified as "the heart of psychodrama" (Blatner, 1996) because it serves to bring out the protagonist's deepest emotions, one of the major purposes of psychodrama. Thus the double serves additional and unique functions: 1) To stimulate interaction by portraying the protagonist's experience to its fullest degree, 2) To provide support for the protagonist to enable him to risk and interact more completely, and 3) To effectively give suggestions and interpretations to the protagonist.
 - ii. An auxiliary may be appointed to double the participant and soliloquize their anticipated reasons for refusal, thereby drawing the participant in to "own" or "correct" the characterization and reveal the hidden reasons for their refusal to participate.
 - iii. The director may sit to the side of the stage and soliloquize. "I know that Jack (the patient) doesn't like me. I don't see what other reason he would have for not cooperation" (Moreno, 1972, p.viii).
 - iv. Doubling has been identified as perhaps the most effective psychodramatic technique for understanding resistance (Kellerman, 1992).
 - v. For further discussion of doubling interventions see Pramann, 2005a, <http://www.sccc.com/articles.htm>
 - d. Auxiliary Ego.
 - i. A participant may not be willing to play a protagonist role but may be willing to play an auxiliary role to help someone else.

- ii. The playing out of the auxiliary ego roles often servers the function of provoking the protagonist into action.
 - iii. For further discussion of doubling interventions see Pramann, 2005a, <http://www.scccc.com/articles.htm>
- e. Mirror or Mirroring.
 - i. Mirroring can be useful in portraying nonverbal resistance to communication.
 - ii. When a patient is unable to represent himself an auxiliary reenacts his role while the patient remains seated in the group.
 - iii. "The mirror may be exaggerated, employing techniques of deliberate distortion in order to arouse the patient to come forth and change from a passive spectator into an active participant, to correct what he feels is not the right enactment and interpretation of himself" (Moreno and Moreno, 1969, p. 241).
- f. Role-Reversal.
 - i. Resistance to portraying one's self, specifically to fully portray personal detail and emotional intensity, can be superseded by role-reversal.
 - ii. The patient, in an interpersonal situation, steps into the other's shoes.
 - iii. In the role of the other, emotional intensity may more easily be portrayed.
 - iv. Returning to their (own) role, personal involvement flows naturally in response to the other role.
 - v. Role-reversal with the psychodrama director may be effective with very resistant protagonists when other devices have failed. They are confronted with the therapeutic contract, challenged to be their own therapist, and to disclose how they may be reached. The director may take the protagonist role or designate an empty chair or auxiliary to play the role of the protagonist.
- g. Maximizing.
 - i. Protagonists can be asked to maximize their counter-actions, exaggerate their blocks, and to intensify their noninvolvement.
 - ii. Such "prescribing the symptom" results in the protagonist acting out their resistance and taking responsibility for their actions.
 - iii. If a resistance can be produced at will it can be removed at will.
- h. Concretizing.
 - i. Concretization makes abstract resistance tangible.
 - ii. Resistance manifest as physical symptoms can be portrayed directly by the protagonist role-reversing with that part of the body, e.g. trembling hands, tightness in the chest, difficulty breathing.
 - iii. Other metaphorical speech can be portrayed and explored through role-reversal, e.g. a "wall," cocoon, safety net, etc.

- i. The Symbolic Technique or Sociodrama (Sternberg & Garcia, 1989)
 - i. Moreno (1972, p. ix) suggested the use of the "symbolic technique" to eliminate the fear of "private involvement."
 - ii. A brief preface can be given about a conflict between a husband and wife, which effects their child. The group is asked to volunteer to play out the roles.
 - iii. Playing out roles that are noncommittal for the private lives of the members may more easily provoke some to participate.
 - iv. Sociodrama uses the same techniques as psychodrama but focuses on collective role components whereas psychodrama focuses on private role components.
 - v. A group may be convened for "sociodrama" as opposed to "psychodrama" with this social verses personal focus as part of the group contract.

- j. Diamond of Opposites (see graphic at end of this text).
 - i. The diamond of opposites can be used to address ambivalence in a direct manner (Carlson-Sabelli,, Sabelli, and Hale, 1994; White, 2002, p. 75).
 - ii. This represents a special kind of concretizing of the resistance.
 - iii. Both the pull "to choose" and "not to choose can be explored."

- k. Additional Techniques.
 - i. Moreno (1974, p. ix) alludes to several other possibilities
 - 1. Use of significant relations. If a rivalry is known to exist between two individuals, invite them to fight it out on stage and let the group identify who is fair and who is unfair. Hale (1981, pp. 105-108) describes a somewhat similar structured psychodramatic intervention for facilitating conflict resolution.
 - 2. Use of "leader tensions" or "ethnic hostilities." Sociodrama may be used to explore tensions within a group.

 - ii. Zerka Moreno (Moreno and Moreno, 1969, p. 235), in addition to techniques already mentioned, suggests the following:
 - 1. Ask the patient to choose another director.
 - 2. Ask the patient to choose another scene.
 - 3. Explain the rationale for choosing a scene even though it may not be enacted.
 - 4. Return to the avoided enactment if the director continues to believe the patient needs it.
 - 5. Insist on the enactment if the benefits derived thereby for the patient are greater than their resistance.

 - iii. Seabourn (1966) suggests the following for dealing with difficult protagonists:

1. Construct pleasant scenes. Moreno (1974, p. ix.) suggests using comical themes or caricatures to arouse the sense of humor of the members.
2. Facilitate participation in many different psychodramas.
3. Encourage the protagonist to play all the roles in a particular drama (autodrama, monodrama).
4. Utilize fantasy material or confrontation scenes.
5. Facilitate group or audience reactions.
6. Talk with the protagonist privately before the session.

I. Therapeutic Strategy

- i. As a drama unfolds, the director follows it, allowing the protagonist to lead the way. Each scene and interaction serves as a warm up to the next. In this way, "the warming up process proceeds from the periphery to the center" (Moreno & Moreno, 1969, p. 241). Blatner (1996, p. 78) states, "I find that if the director works with the resistances, she can often find a way to gradually explore the deeper conflicts. Moreno puts it this way, 'We don't tear down the protagonist's walls; rather, we simply try some of the handles on the many doors, and see which one opens.'"
- ii. Moreno (1972, p. ix) writes, "It is up to the resourcefulness of the director to find clues to get the session started and, once it is started, to see that it grows further along constructive lines."
- iii. Because the director is asking the protagonist to produce, exposing their whole inner drama, including the inner world of those to whom they are close, secrets and all, "a battle of wits" may develop. However this often dissipates as the protagonists recognize the production is of their own making. Transference is replaced by "spontaneity, productivity, the warming up process, tele and role processes" (Moreno and Ennis, 1950).
- iv. Auxiliary egos or auxiliary therapists, representative of persons within the protagonists' private world, are introduced with whom they can interact. Resistance in terms of "acting out" can then be used to therapeutic advantage. "By taking advantage of the aggressive feelings to which the patient is warmed up at the moment, a negative and resistant patient may be turned into a productive and clarifying agent" (Moreno and Moreno, 1959, p. 97).
- v. Special care should be exercised when addressing traumatic material. The addressing of it should be titrated to the readiness and resources of both the group and protagonist. See Pramann, 2005b, <http://www.sccc.com/articles.htm>

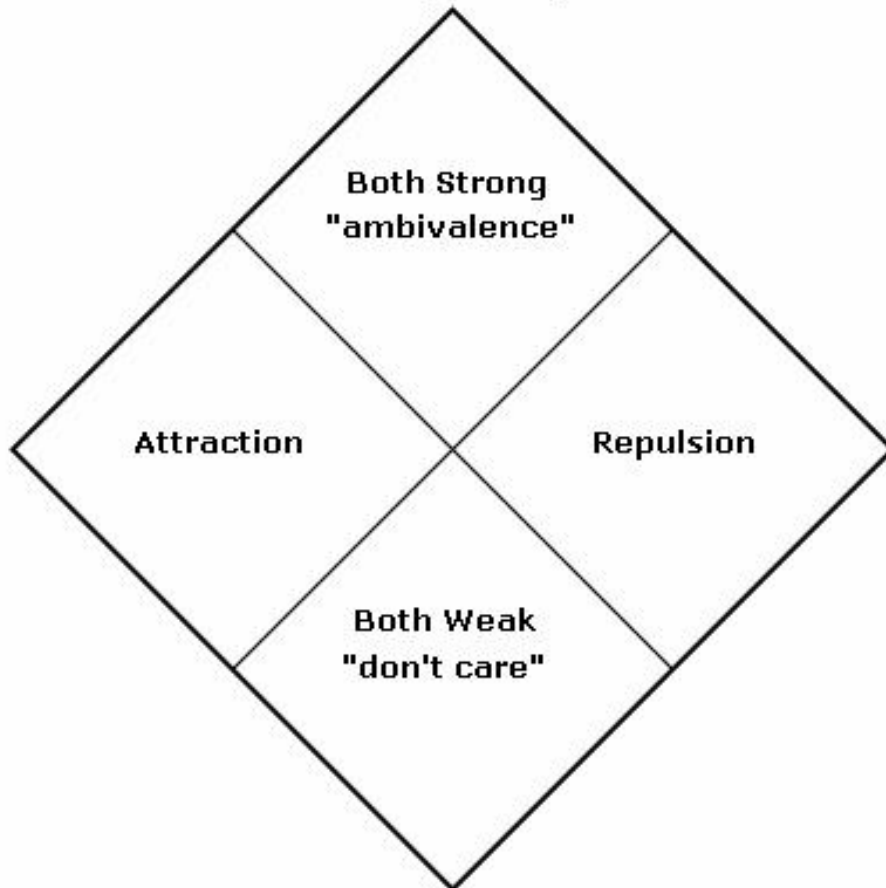
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Diamond of Opposites
Carlson-Sabelli, Sabelli, & Hale 1994



Diamond of Opposites

