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The psychodramatic role test: An examination of the science



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ABSTRACT

Part of a psychodramatic session was formulated as an experiment. The psychodramatist posed a hypothesis that certain functioning that been achieved as a result of a therapeutic intervention. A psychodramatic role test was devised to test that hypothesis. This instance of a role test was then used to reflect on and examine the 'science' of the role test. The role test was found to be scientific in that: a hypothesis is submitted to its greatest challenge; ecological validity is approached by seeking to have all significant factors in their actual dynamics; all factors can be arranged in different configurations. Limitations from a scientific perspective were: replication is not possible, generalizability is limited, dependent and independent variables are ill-defined, and claims to causality are debatable. The article may offer ideas on how therapists could scrutinize the methods within their own practice as to scientific worthiness and not solely rely on external ideas of evidence and science.

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Some within the psychodramatic field lament that the psychodramatic method does not receive the recognition it deserves. The call to subject the method to scientific appraisal has been persistent and some work has been produced (Wieser, 2007). Many reasons for a conflicted warm-up to this area can be imagined: the founder, J.L. Moreno, was a maverick attracting mavericks; most psychodramatists are practitioners and not taken to academia; many are satisfied with keeping the field small; psychodrama while devised as a group method is not clearly defined as a psychotherapy at its heart but has had wider ambitions; and, satisfactory methods of outcome assessment have already been developed within psychodramatic practice.

This paper takes up the last point and puts it up for examination, namely: psychodrama already contains methods and approaches that can be defined as belonging to science. The psychodramatic role test is used as an example. This inquiry could be of interest to other modalities and practitioners because the elements of the role test may be in their own methods or be modified to do so. In addition, the approach of this study may model how a modality may put up its own methods for an evaluation of scientific worth. Practitioners need not solely seek external methods for validation but can build up scientific aspects from within their own practice.

Psychodrama has many enthusiastic practitioners and seriously-minded training institutes throughout the world and a considerable practice tested theory has been built up over the one hundred years since Moreno (1953, 1983, 1985) first formulated it. Psychodrama offers a place where almost all the complexities of human behaviour can be presented within a controllable environment. The empty stage and dramatic methods reward the psychodrama clinician with an almost unlimited scope to what can be arranged, isolated, added, slowed down, paused and replayed. The part can be isolated within the whole and introduced back into the whole. Interpersonal interactions, sensory input, and language can be regulated using dramatic methods. Various tests and techniques have been formulated to assess behaviour and guide clinical interventions. As well as subjecting the method to external assessments and instruments, progress can also be made examining these internal means.

The role test is one technique used in the psychodramatic method that could be examined from a scientific perspective. The role test is a reintroduction of a presenting situation of difficulty after a therapeutic intervention has been considered to be successful. The presenting difficulty of a protagonist is portrayed with group members enacting the different people and important elements involved in the situation. Interventions are made psychodramatically and then the role test of the protagonist's functioning is done. In order for the protagonist's functioning to be tested, they must warm-up to the situation, produce their internal representation of the people and elements in the situation, and interact with them.

The psychodramatic role test focuses on the ability for a protagonist to sustain functioning under a particular situation of duress. In a role test "...the person is confronted by some difficult situation to test our their new behaviour and strengthen it so that it can hold

up under stress. If the new functioning is not maintained, the role training may proceed and with further practice an individual may develop a much greater confidence and inner strength" (Clayton, 1992, p. 6). It might be considered a subset of the psychodramatic spontaneity test which is an umbrella term for all assessments of a person's response in terms of novelty, appropriateness, readiness and vitality (Moreno, 1985). The role test appears to have been developed by J.L. Moreno in the 1930s as part of a suite of tests to assess behaviour and develop interventions (Hare, 1992; Moreno, 1953). "The role test measures the role behaviour of an individual; it reveals thereby the degree of differentiation which a specific culture has attained within an individual, and his interpretation of this culture" (Moreno, 1953, p. 61). Here, role is considered to be a 'culture', a way of being, "centred on the basis of a guiding principle" (Clayton, 1993, p. 11). A role can be considered to be the internalization of a significant other. Moreno (1953) saw "role emergence is prior to the emergence of the self" (p. 47) which is in line with the latest findings in interpersonal neurobiology (Badenoch & Cox, 2010; Schermer, 2010; Siegal, 2010) demonstrating that the social self is formed before language, reasoning and identity.

In psychodrama, the term 'role' has also been used to refer to the traits or characteristics of a persona. Defining role as "a purposeful act created by an individual" (Clayton, 1992, p. 58) is useful and congruent with the psychodramatic stage because the new actions of a protagonist in response to another 'role' are 'concretised' or enacted on the psychodramatic stage and then the instruction 'reverse roles' is given.

'Role' originated in drama and began to be applied to the social and behavioural sciences in the late 19th century (Biddle & Thomas, 1966). George Herbert Mead's work in the University of Chicago from 1911 to 1924 emphasized taking the role of the other and incorporating that into the self. His team's work was influential in following decades on research in role theory and also in the formation of symbolic interactionism. J.L. Moreno was also working and forming his ideas in a similar time period. Like Mead (1934) with the posthumous publication of Mind, Self and Society, Moreno's (1934) influential work Who Shall Survive was not published until the 1930s. Moreno emphasized self emerging from role and the use of dramatic methods to understand and reconfigure role constellations. Linton (1936) was the other main influence. From the 1930s, role theory was taken up and furthered developed by many theorists and researchers (Landy, 1993). The rise of role theory is well detailed in Biddle and Thomas (1966).

The role test used in this paper is part of the approach to role theory and role training as practiced and refined by Clayton (1992, 1993, 1994). He originally learned this from Dr. Max Clayton and Zerka Moreno at the Moreno Institute in Beacon, New York from 1967 to 1973. Dr. Max Clayton did not explicitly draw attention to what he might have further developed of the Morenos' theories and practices but there was much novelty in his teaching, training methods and application of role theory, including his work with Clayton (1977, 1982) and with his co-trainer Chris Hosking who "has been responsible for many creative applications of role theory and has been a source of inspiration" (Clayton, 1993, preface).

This paper focuses on the science of the role test. How robust is the role test as an assessment of therapeutic outcome? What characteristics of the role test move it towards being scientific and what are its drawbacks? This paper takes a novel approach by considering an 'experiment' to be occurring within a psychodrama enactment. Within the psychodrama enactment, an area of desired change is identified for a protagonist and an intervention is made. The hypothesis, or in-session clinical analysis, is that therapeutic change has occurred. A role test is then done and is considered a test of that 'theory' of change.

Relevant constructs and techniques of the psychodramatic method are outlined within the description of the session. The term psychodramatist (PD) is used as one consistent term to stand for practitioner, director, producer, clinician and therapist. The enactment is typical of the style of psychodramatic work that has been maturing in the region of the Australian and New Zealand Psychodrama Association, particularly under the training and guidance of Dr. Max Clayton, the pioneer in that region. For more illustrations of this approach and how the psychodramatist is trained see Clayton and Carter (2004). The following enactment is not verbatim but a reconstruction. Much of the coaching of the auxiliaries has been removed from the script, as have many of the repetitions, half sentences and other fillers of natural discourse. Other details have been removed or changed to protect the privacy of the participants. The enactment occurred sometime into the work with the psychodramatist. A workable atmosphere of cooperation and trust in the group had been built up through careful attention to safety concerns and ample opportunities for group members to present themselves and become involved with each other.

A psychodramatic intervention

Aim

Therapeutic change for a protagonist in a specific area of interpersonal functioning.

Hypothesis

Therapeutic effect occurred in a psychodramatic enactment.

Instrument

The role test.

Method

- Step 1: *Identification of desired change*. Identify an area of functioning in which change and alternative behaviour is desired. Produce on a stage area the internal world of a protagonist using a psychodrama producer and group members as auxiliaries.
- Step 2: *The psychodramatic intervention*. A therapeutic intervention is made to the satisfaction of the protagonist and the psychodramatist.
- Step 3: *The role test*. Apply the role test. The role test is the dramatic reintroduction of the presenting difficulty. The protagonist's functioning is assessed to gauge the strength of the intervention.

Step 1: Identification of desired change

Michael is distressed about his inability to hold his own with his wife, Carol, when in conflict. A scene is produced in a car and Michael loses his spirit and confidence in the face of criticism from Carol about his driving. He is also unable to bring out his experience with her. The psychodramatist notices he looks young and thoughtful. He inquires into whether Michael is remembering something and Michael says yes he is remembering an event in his childhood with his father. A scene is produced of young Michael. It is a yacht race. Michael chooses a group member to be the role of the father. First, this auxiliary (AUX) takes up Michael's role and Michael becomes the father. The psychodramatist interviews Michael for that role so that he can come into the thinking, feeling and behaviour of his father. He is invited to make an expression to his son Michael.

MICHAEL as DAD: How did you manage that?

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