

Teleodrama

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For years the writer has been evolving group methods which have their impetus in attempts to foster staff agreements on the exact "illnesses" of patients, the behavioral denotations of "mental disease," and the interpersonal methods to be employed to reach treatment goals (O'Connell, 1963; 1966; 1967). The setting for this continuous exploration is now on a hospital ward which refuses to swallow completely the bait of momism, calls itself the Patients' Training Laboratory, and emphasizes Developmental groups for patients (Hanson, Rothaus, O'Connell, & Wiggins, 1969). Members of such leaderless groups engage in feedback and exposure throughout their four weeks hospitalization. The writer's therapy, "Action Therapy," fits well into this here-and-now orientation.

Originally, the search for theory and methods was lumped under the term "Psychodrama," then called by various permutations of "Adlerian," "Reality," and "Action." At times this atypical group approach might be called Teleodrama (Rice, 1967)—Brechtian as well as Adlerian. It cannot be called psychodrama for many reasons, only one of which will be mentioned. From even limited experience with the Morenos, one develops great admiration for their tactical presence but the subtle reliance of orthodox psychodrama upon mechanical energies can depersonalize. Therefore patients are often granted easy justification for hating others because of supposedly objective frustrations. But to an Adlerian, "catharsis" can mean a creative relief resulting from finally feeling safe enough to disclose one's "negative nonsense" to others. As such, abreaction is merely the beginning and not the end of treatment.

Much of Bertolt Brecht's genius as a playwright stemmed from his efforts to portray social interactions in such a way that the audience did not lose itself by complete identification with the actors in an overly aesthetic production (Kantor & Hoffman, 1966). Incongruities of setting and character were employed to highlight hidden truths beneath passively accepted realities. Since Adlerians expect no psychotherapeutic breakthrough from interminable analyses of external and noncentral factors, they share with Brecht this desire to help man overcome his blindness toward his own needs, demands, and goals. Brecht did not favor perfect reproductions of "reality" which led to the audience identifying completely with the actor's overt style and losing the detached onlooker quality. Brecht's unconcern for perfection fits the style of Action

Therapy and should help the neophyte therapist whose own drive for perfection usually needs no added reinforcement from the environment.

A method such as teleodrama in which staff members, by necessity or therapeutic choice, assume all the psychodramatic roles is worthwhile when the audience is avoiding both the process and content necessary for change. These times are quite frequent with what are called "unmotivated" chronic psychiatric patients (Adlerians translate the "unmotivated" to mean motivated to enhance and maintain "sick" self-esteem and social interest by habitual hidden movements toward power, revenge, and special service). When patients are avoiding a commitment to Action Therapy through inaction, the director and auxiliaries can use the benevolent shock techniques of Brecht in teleodrama to show simultaneously the hilarious yet tragic contrast between mere verbal cooperation ("Doctor, I'll do anything to get well 'cause you're my only hope") and hidden goals (an aside: "This Doc looks like a sucker. He needs me more than I need him"). When no movement of the patient is free from a purposive interpretation, the sick role frequently falls victim to the Brechtian distancing effect (which separates a potential audience response of massive sympathy, pampering, and rejection toward patients into respect for their subtle and tragic creativity).

Certain content areas are generally neglected by patients in groups. Homosexuality, for example, is habitually avoided, so the staff can move into the vacuum by acting out the hidden goals of patients (hence the label "teleodrama"). Adlerian theory focusing upon nonsexual and nonconstitutional causes of homosexuality provides the theoretical framework. Psychodramatic techniques (e.g., asides, doubling, mirroring, role reversal) open the hidden goals and fears of all life styles for tender exploration. Patients actively assume doubles and the roles of others, replacing staff, as the teleodramatic plots develop. Frequently a patient will remove himself from his life style presentation in a flood of tears or anger. The alert director will not let these emotions be an excuse for avoidance and will merely ask the patient to please be the double while the director or auxiliary will mirror the patient. As yet there has never been an incident in which a patient did not return to his role as protagonist after the temporary doubling in which a concerned staff member mirrored the patient empathically and teleodramatically. The spirit of mirroring is hopefully democratic. Staff request permission to "see if I know how you are feeling," and add, "Please tell me if I'm wrong when we finish."

Often new staff members become talented in the immediate portrayal of life styles by acquainting themselves with Adlerian writings. For example, all auxiliaries may be given a short summary such as the following from a Dreikurs' book (1957):

"It is quite possible that Mrs. R. is a typical 'drunkard's wife.' Such women are so good that nobody can live up to their standards. Consequently,

the husband feels his deficiency more and more, and then either finds consolation in liquor or uses it to gain the strength to fight back. His drinking is both an expression of discouragement and of rebellion. And Mrs. R, like a typical wife of a drunkard, always gives in again and takes him back. She is too 'good' to let him down completely—she just constantly pushes him down a little bit" (Pg. 97-98).

All actors are told to identify with three facets of the characters they are portraying in teleodrama (Brennan, 1967). In the soliloquy or double, there is animation in words, gestures and postures of hidden life style. That is, the auxiliary speaks of feelings and purposes of the behavior. He then moves to the significant others in the scene and tries to maneuver them to reward the style. In the third mode the actor moves throughout the audience, like the Ancient Mariner, trying to justify his behavior to others—usually blaming others, heredity, environment, etc. The actors' reactions to rejection and acceptance elicit much laughter, sufficient to reduce tension, but not enough to negate the message.¹ The members of the audience always have their homemade remedies which they jump up to try. Usually they are based on mechanical solutions, devoid of understanding of the actor's purposes. The main message is that individuals can select from almost any behavior their "reasons" to justify hatred, rejection, hopelessness—and unfortunately the rarity, social interest. This Adlerian approach fits in so well with the Brechtian distancing effect and Brecht's belief that the smallest social unit was not one person that I am wondering if anyone has tried to use Brechtian techniques in an Adlerian frame.

¹While on the subject of laughter it is appropriate to note that Adlerian theory gives wit its due. The therapist, not being bound by the pity inherent in the view of the patient as a passive victim, is free to shock benevolently and educate by witty behavior. Once mutual respect and cooperation have been developed in the therapy situation, the therapist has freedom to playfully over-and under-reflect in his guessing at the patients' efforts to hide and enhance low self-esteem and narrow social interest. Wit and humor in the therapy interaction are our most neglected interactions. Wit might be assumed to arise when the patient with expanded self-esteem and social interest suddenly experiences the simultaneous presence of two conflicting actions at the same time. As he pleads passive victimizations he realizes his foolish and delusional fashioning of the world to suit his desires to put others in his will. The incongruity in a nonthreatening world blossoms into laughter.

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