

The Role of Psychodrama in a Child Guidance Center

ADALINE STARR
Chicago

For the past two years psychodrama has been used in three child guidance centers in Chicago as supplementary therapy for the children registered at the center. It has shown itself to be an effective instrument in assisting in the diagnosis of the action-pattern of the child and an important technique in teaching the child new roles of social behavior.

Most playroom therapy is centered around the child and an object on which he works: art, music and crafts. This is important in developing the skills and proper attitudes of a child and is in use at our centers. However, such projects are limited in their efficiency for developing and training group participation. Free and organized play are important in releasing the tensions of the group, but are slow to effect changes in the structure of the group. Psychodrama, in the guidance centers, is designed to give the child an insight into his action pattern and to help him learn other and more acceptable roles to meet his social situation. The response of the child in psychodramatic action, through the playing of roles, is the measure by which the director determines the child's response to his environment; an increase in the number and kind of roles he can develop in the acting situation indicates the change taking place in the child's response to his social scene.

Example: When Mrs. R brought to the center her three children: Alice, a nine-year-old girl, Bert, a six-year-old boy, and Chris, a three-year-old boy, the children were not able to develop roles which would lead to a spontaneous drama: Alice would play the director (not join in, but stand outside the action and tell others what to do). Bert would choose the leading role but be unable to fulfill it and would resort to bucking his little brother in the stomach or to pulling the molding off the sidewall of the room. Chris wanted the same role as Bert and would cry if he didn't get it. Then both Alice and Bert would rush to console him. The psychodramatic action had to please Bert or he

would fight. After seven or eight sessions in which the group was structured around Bert, without Alice, his behavior change was shown by his being able to play a secondary role—"Tonto" to the "Lone Ranger"—and to stay within the situation long enough for the role requirement. Finally, after more sessions he was able to participate in action scenes completely developed by another child and to accept subordinate roles assigned to him. Alice moved from the role of director (domineering) to the taking of animal roles, refusing to play the "princess" in any situation because she wasn't pretty enough, preferring to be a horse. Her range was limited to this development; she never accepted a "mother" role and more often than not refused to play at all. Chris moved from the "baby" to messenger roles. The most observable change took place with Bert. The enlargement of his role range was verified by the change toward his real life situation which showed in a double promotion at school (he was considered retarded by the teachers), an increase in the number of friends in the neighborhood, and a decrease in bed-wetting and fighting at home.

Psychodrama differs from creative drama in that the goal of action is the development of the self, not a fictional figure. Since the child is always inter-acting with someone in life, in psychodrama he interacts with other children in the group. The choice of roles, the progression of the role, the production, the measure of spontaneity of the role are all observed by the director and interpreted to the counsellor. The counsellor and psychodramatist work together. The counsellor uncovers the life style and the purpose of the actions of the child and explains his goals to him. The psychodramatist puts the child into action, and the child acts out scenes in which his goal is made obvious to him. Then he is given a chance to try other roles of behavior.

A free area in a room is referred to as "stage." The properties are few, usually only chairs and a table. "Role" is a term to define the social interaction of the child player. The group is composed of players and audience, varying in number from two upward. Not being designed to entertain but rather to provide freedom of expression in relationships, no regard for principles of dramatic presentation is needed. The primary object is to replace stereotyped responses with spontaneous action, without an outside author's scenario.

When a child in the group chooses a role to play, "Mother," or "Superman," the other children forming the group play the auxiliary or secondary characters.

EXAMPLE

The director asks, "What would you like to be when you are grown up?"

K: I want to be a doctor just like my uncle.

D: Fine. Will you come up here and show us how you are going to be a doctor?

K: Old Sawbones, that's me. I need a patient and a nurse. (He grabs Janice for the nurse and Gerry for the patient.) There, you get on the table, I have to operate on you. (He starts to make sawing gestures and gurgling and sawing sounds.) There goes your heart! There's your liver! You don't need your stomach, either. (He throws each organ on the floor.) I guess I'll sew you up! (He tosses the patient off the table, and lunges for another patient.) Just keep my sister, that little angel, out of my way. . . . Come on, you, Peter.

His distorted role development of surgeon is discussed by the auxiliary characters in the scene:

D: How did K play the part of the doctor?

J: A doctor doesn't throw his patient off the table.

A: A nurse is supposed to help the doctor. He didn't let me.

P: He acted like a butcher cleaning a chicken.

D: What kind of a doctor would show so little concern for his patient?

K: A big-shot guy who wants to push guys.

The scene is played again, changing the character of the doctor.

The role of audience is omitted in our use of psychodrama for children at the playroom. After a series of experimental situations, it was found that unlike the schoolroom where formal or informal authority obtains, the playroom group at the centers will not serve as an audience, because anarchy and explosive behavior results. After a period of orientation to this type of spontaneous drama, which may require from eight to ten sessions, the active group itself can be structured to serve as an audience to the actors. If six children are referred to psychodrama, all are used in the situation. An examination of the group structure of the three centers will further clarify the validity of the approach to group work.

In the table listed below the total child-attendance and the number worked with in psychodrama differ; not all were referred to psychodrama. Also there was more than one category of difficulties for one child.

	<i>Lincoln Center*</i>	<i>North Side†</i>	<i>Henry Booth‡</i>
Number of Sessions	32	31	26
Number of Enrolled Families	38	42	26
Total Child Attendance	420	415	217
Number of Children			
—enrolled families	90	82	64
Problem Situation of Children			
Speech difficulty	4	2	2
Poor school work	12	9	2
Stealing	2	5	3
Mental retardation	2	1	0
Temper tantrums	6	8	5
Enuresis	4	4	3
Truancy	2	1	7
Eating difficulties	3	4	2
Over dependency	2	3	1
Behavior at school	6	11	5
	43	48	30

* Abraham Lincoln Settlement House.

† North Side Center, a community formed center of above average income.

‡ Henry Booth House, a settlement house of much below average income.

The number of children in a problem situation is smaller than the number of children in attendance because as far as possible all the family is in attendance at the center. The age range is from two to fourteen years. A parent presents the problem and the entire family is invited to attend. The wide age range, the difference of race and economic background (the centers draw from the richest to the poorest communities in Chicago, both white and negro), present an interesting challenge to the worker. The variety of the symptoms of the children, their sibling and peer relationships, the contact among the children limited to the weekly session, the facilities available for working out the drama, must all be taken into account; yet the group must be structured in such a way that the children are free to creatively enact and develop the roles they are eager to try out and to increase their spontaneity in accepting other roles.

The Sibling Relationship: It has often been said that one can choose his friends, but not his relatives. In psychodrama strong sibling rivalry prevents the acting out of new social roles. The siblings repro-

duce the roles they have accepted in life. The first psychodramatic action retains the sibling relationship for purposes of diagnosis: to determine the role the child has assumed and to report to the counsellor the pattern of behavior observed. Later sessions will permit the child to experience a group which is more encouraging to him.

Grouping According to Symptoms: Similarity of symptoms has nothing to do with the structure of the group; all speech difficulties in a group slow down the action of the group. Having too many children who have been referred because of destructive aggressivity in one group results in fights, and does not permit any group cohesion. Equally, forming the group of all the over-dependent or timid ones results in the children being unable to warm-up to action, and the director is compelled to assume the role of actor and be very directive in the warm-up to action.

According to Sex: Here again no hard and fast rule can be observed. However a boy from seven to ten is usually not interested in "playing house" while girls of this age are. Boys of this age choose roles of dynamic character: outlaw, policeman, engineer, pilot, Indian or cowboy. As the action progresses, girls of similar age find it too wild. Even the girls with a strong desire to be boys will, after the first enjoyable experience of tussling with the boys, refuse to be in psychodrama with the boys of this age range. The boys who are afraid to compete with other boys in this situation will play domestic scenes with girls younger than themselves until they are ready to assume their place in a group of peers. Boys and girls from twelve to fourteen seem to be anxious to work in psychodrama together.

Choosing: Psychodramatic action departs from reality in affording the actors a wider choice in relationship, and in the role to be played in the relationship. After the initial situation, the child has the right to choose with whom he wishes to act. If he is not ready to choose, the director helps him form the group around him.

The sociogram (choosing chart) shows an exclusive family choice at first. There seems to be a tendency to choose members of the familiar (family) situation, even though it may be uncomfortable and full of tension. The siblings choose the safer, more tense situations rather than the less familiar but perhaps more constructive and eventually comfortable situation.

One criterion of assignment choice used is, "With whom do you want to go into the psychodrama room?" Each child is afforded the

choice of his cast. It is important to see how his social atom (range of relationship) enlarges, and toward what kind of child.

Example: A family of three: Gladys, nine, Alvin, seven, Larry, three, made choices of each other. After the third session, Alvin was not chosen because he was too noisy. Gladys made choices outside the family, usually younger children. Alvin rejected Gladys and has not been able to extend his choices beyond the family. He "allows" Larry to come along.

In addition, a good criterion for growth is the increasing ability to establish a constructive relationship with at least one member of the family.

For boys from the age of five to eleven, the choice of a fighting partner, someone with whom they can compete in physical skill, seems to have a positive choice value.

Director: The goal of the director is to help the child to form better relationships through acting out the problems of everyday living. Children warm up slowly to enacting roles within the actual area of their difficulties. Psychodrama with adults differs considerably from psychodrama with children in this respect. Children seem to work more readily in fantasy, and feel very threatened by the problems that are really facing them in their environment, so that the director must move from the general area to the specific, waiting patiently until the child is really ready to deal with the specific area of his difficulty. With full knowledge of the structure of the group, it is possible for the director to assign roles that will help the child to understand inadequate responses. Even after the group brings in everyday happenings which they are unable to cope with and which they wish to work out in the group, the director continues to close the session with a general subject with the emphasis on the interrelation of the roles being played in the group. Children become exhausted from too long a period in which highly volatile material is being enacted. The director, also, can be included in the action if it is necessary, as when a child has a badly formed idea of relationship with adults. The director then may play the role of an adult who is very accepting of the child, or any role in which the child would have an opportunity to reformulate his feelings toward adults.

Material: Dreams are used frequently to warm the group to action. This permits a child who is reluctant to interact with other children to have a "successful" role, since the child narrates and the chil-

dren act it out in pantomime. Real situations and fantasy are enacted to produce spontaneously a play of the group's making. Scenes on the playground, in the home and in school, release inhibitions and permit the child to try, without fear of punishment, a different role.

SUMMARY

This paper deals with the use of psychodrama in a child guidance center. Some of the considerations in the sociometric structuring of a group differing widely in age, socio-economic background, and difficulties were presented, with brief indications as to how they were handled. The effectiveness of its diagnostic applicability and the means by which change in behavior is measured were pointed out. The differences between psychodrama for children and for adults were indicated. The practical, rather than the theoretical, application has been the goal of the writer. We believe that psychodrama extends the work of the counsellor and acts as a reliable source of information on the progress of the change taking place in the child.