Group and Play. Analytic Psychodrama with Children

Renato Gerbaudo

Abstract

In this article, the author gives an account of the treatment stages that a child and his family may undertake, starting from the initial request for help to the child participation to a Psychodrama Group and the parent’s consultations with other therapists.

The characteristic of child psychotherapy is that the initial help request is brought by the adults and not by the child. Hence the importance of a preliminary work, designed to untangle the parents request in order to have access to the child subjective demand.

The entry into the group gives to the child one of the possibilities to access to the experience, which is shared with other peers, in order to recover the symptomatic root in his discourse, as a subject in the relationship with the familiar Other. The child’s symptom is in essence a response to the desire of this Other. Therefore group and Play will assume a particular dynamic through the sessions.

The references to Freud and Lacan, followed by the description of two clinical vignettes, highlight the participants’ emerging issues that develop around the construction of the family romance according to the founding father of psychoanalysis and the reinterpretation of the French psychoanalyst on The Neurotic’s Individual Myth. Through the structural categories of Imaginary, Symbolic and the Real, the child’s discourse is analyzed in its relationship with the sexuation, which recalls Freud’s Infantile Sexual Theories (IST). (Renato Gerbaudo)

Keywords: preliminary work with the family - other/ Other- Imaginary, Symbolic and Real - materialization and signification of the discourse

The Question of Childhood and the Social Link

The request for help by children always originates from an institution: family, school or a social or otherwise legal institution. Childhood questions therefore concern the shift from a request for the child, in the form of disorder, to a request of the child, in the form of a subjective demand. This transformation sometimes requires a complexity of interventions, taking into account both the forces involved and the institutional strategy, in order to create for the child a personal space, not entirely occupied by a previously established knowledge.

In this perspective that also implicates the training of psychotherapists, psychodramatic work starts from a theory of the unconscious that is specific in its relation to social links. Psychodrama does not favour the level of affective communication nor group dynamics; instead it favours the level of the discourse that
is integral to the subject’s structure, i.e. his way of symptomatic jouissance in relation to the social pact. Structurally, the child turns out to be a knot\(^1\) that links several institutions around the matter of care and intervention.

How then does a child’s *dis-ease* manifest itself as a disturbance of the social link? When a child comes for consultation, recommended or not to treatment by an institution, the most evident aspect – and perhaps the most disregarded one, at the time – is the difficulty of the transition from family to society (school, relationships with friends and adults, etc.). Language difficulties, learning disorders, inhibition or aggressive behaviour, physical symptoms or diseases represent a collection of traits that impel relatives to ask for help from an institution or a practitioner.

Child symptoms appear above all as a message to the Other, a message whose decipherment escapes the recipient, who needs a translator who is an “encryption specialist”. Then it is a matter of proposing a path in which knowledge is on the side of the subject and not on that of the operator, that is, a path that imposes a shift in the ethical dimension of treatment. The clinic thus delineated is a clinic under transference: the configured route (preliminary interviews with family and child, individual or group treatment) indicates a “discursive” scanning and not predetermined phases, in which the question of psychoanalytic differential diagnosis makes its way, directing and aiming the necessary manoeuvres of operator’s interventions. For example, you should not decide in advance that the child will necessarily be the subject of care, but you will need to identify, within the family, the place in speech that the child occupies and the interpretation the child himself brings by means of his construction of the symptom.

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What then is the path undertaken by the child in a psychodrama group? What are its specific scansions? Here, I will try to outline briefly the ways, times and the particularity of the analytical approach in this methodology\(^2\).

As I have pointed out elsewhere\(^3\), the family’s meeting with a psychologist (public or private) develops through a narrative of their own *family myth* in which the symptom of the child constitutes a dissonant element of *real* compared with the *imaginary* construction. The child is caught in a collective discourse that does not

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\(^1\) In *Psiche, Dizionario storico di psicologia, psichiatria, psicoanalisi, neuroscienze*. Vol. I. by Barale F., Einaudi, Torino, pp. 484-488

\(^2\) In Foucault’s philosophical meaning.

\(^3\) R. Gerbaudo *Lo psicodramma analitico di bambini* Ed. A. Armando, Roma 1988
R. Gerbaudo *Gruppo e Gioco* Ed Libreria al Segno, Pordenone 2014
fully realise the will of the parents, from whom the *symbolic* source of this symptomatic production escapes.

In turn, the child - as Freud taught us - begins to develop a phantasy construction about his origins called the *Family Romance*, through which he interprets his filial position. If the mother is certain, the father is not and any sibling could be a half-sibling. Surely noble in origin in the ideal sense, this identificatory line allows, on the one hand, a beginning of the separation from the parents and, on the other, his connecting himself to the unconscious signifiers of the *infantile sexual theories* (IST). The latter concern the principle of *sexuation* that takes place from a single signifier for the two sexes, namely the question of the phallus: there does not exist in the unconscious a distinct signifier for male and for female. Following different routes, each has to manage to take on a sex: this is the basis of human castration. *Sexus*, cut, separation, reveals the structural dimension of the human condition.

The relation between the Oedipus and the Castration Complexes is articulated in a particular form that Lacan called “The Neurotic’s Individual Myth”\(^4\) which is, at the same time, a derivative and a defence arising from this articulation. Its main characteristic is to operate a splitting both in the parental couple and in the subject, as the author explains through the two examples of Freud’s case of the Rat Man and the autobiographical text by Goethe in *Poetry and Truth*. In the first, the subject tended to repeat his own family constellation based on his father's marriage to a rich lady and to the disadvantage of a poor girl who was abandoned in order to remedy a gambling debt, which was in fact never honored. The Rat Man was also in love with a poor girl and contracted a debt with a fellow soldier concerning eyeglasses. In the second, a young Goethe was in love with Friederike Brion; in order to avoid a prophecy of evil he went to amorous encounters disguised as a seminarian or a bellhop. In both cases, it is useful to note that the narcissistic question is an obstacle to the elaboration of a personal desire that is considered dangerous and misleading. In other words, the dimension of myth on the side of the individual prevents a progression towards the collective dimension that is open to the question of the third and to subjective desire. This avoidance of the desire of the Other attributes to the myth the impossibility of accessing the question of the phantasy.

Returning then to psychodrama we can reveal the first scansion, the one related to the shift from the preliminary interviews to the group, according to the following considerations:

- A preliminary work is required to separate the child’s discourse from that of the parents, an operation that takes place in the gap created by the symptom as reported,

the inexplicable appearance of which has become relevant to the child himself. In some cases, a direct therapeutic engagement of one or both parents could dissolve the enigmatic dimension of this problem.

- The individual interviews with the child are indispensable for the emergence of the elements of the Family Romance; they are likely to take an interrogative form, typically centered on criticism of the ideal images that have appeared through its unveiling.

- The entry into the group will take place on the basis of the connection between this interrogative level and the level of representation kept open by the therapists. In the group, you play only scenes of real life and never the so-called fictionalised scenes in which this contrast disappears and opens instead into a realization on the imaginary side of the Ideal Ego.

- The Group of children varies from three to six participants, of not more than two years difference in age. Parents, in turn, will be involved in discussion or in role playing groups or in consultations with other therapists.

These considerations affirm that the mode of representation in psychodrama is based on the possibility of working through the signifiers of the imaginary construction of the elements of the Family Romance. In other words, a direct explanation of symptoms is not possible, but you need a way to make them enter discourse. The themes posed by the child could be shown to be very far from the problem observed. The relation between the elements of reality, which designate the impediments encountered, composes itself step-by-step within a subjective narrative, that is confronted with elements of the drives. Gradually, the child has to perceive that his stories concern him specifically.

According to the structure indicated by Lacan in the “Neurotic’s Individual Myth”, the passing through Family Romance and its construction makes public – publishes as S. Gaudè says5 – the private theatre in a collective dimension. Only the presence of others does not make it possible. The intervention of the psychodramatists is necessary to regulate the dialogue between participants according to the signifying dimension, that is to say, supporting the representation of the subject as symbolic, as an effect of discourse. The shift towards constructing a Family Romance is the equivalent of what happens in analysis in shifting towards unconscious formations which reveal the analytical symptom of the subject, namely how it is represented by the signifiers of the Other.

The specificity of psychodrama with children is the subject’s relation with infantile sexual theories, since the question of sexuality at puberty is still missing i.e.

5 S. Gaudè De la représentation. L’exemple du psychodrame Ed. érès Paris 1998
the presence of a sexual object different from the parents implies a real for which the adolescent does not have words to speak. For children, the real is actually inherent to the question of the phallus that does not absorb all their explanations about the origin of babies (procreation and birth). Indeed the IST are a defense against this unspeakable real (the denial of women's hole, anal childbirth, the violence of genital coitus) and lay the foundations of the desire to know as a horror of knowing, which will be faced again in adolescence.

In short, it is a matter of passing from the required step of the mirror relationship with the other, to the symbolic dimension of the Other, exemplified by Freud in his grandson's play, Fort-Da. Each participant is confronted with the words of others in an associative chain that condenses discourse into the themes of the group. The method of psychodrama does not introduce any common ideal in the sense of mass, as described in the Freudian schema where ideal and object coincide. On the contrary, if the two elements seem to reach an agreement in the development of common themes within the group, the question comes back to who launched a topic by means of playing (representing) a personal fragment (dream, event, match). This is possible only if the psychodramatist supports the function of a barred Other, leaving empty the place of knowledge that would otherwise close the circle in a fictional unit.

You could think of the unoccupied seat at King Arthur's Round Table as a figurative example of this place of knowledge that is left empty. Though the Knights were supposed to be without blemish and without fear, the seat was considered to be “perilous” since it represented the ideal form of a Knight. The psychodramatist must be able to maintain that empty place in order to leave it for the ideal figures of parents or other important adults.

With regard to children, you have to take into account some specifics of the group work as compared with that of adults. One of the most common situations occurs when starting a new group or when new children join: chaotic, indistinct movements often prevail and confusion reigns. There is an acting that usually has the quality of attacking the setting and the established rule in particular: you can say anything, but not do anything.

This chaos is an expression of the transference addressed to the therapists, who are taking on threatening characteristics in the eyes of children. First, the therapists do not have a known social role (not relatives, nor cultural leaders, nor teachers). Although information is provided in the preliminary interviews, the situation could produce a distressing uncertainty that translates into a passage to the act or temporary inhibition. This chaos is a demand that requires an interpretation of the Other in either

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6 S. Freud (1920) Aldilà del principio del piacere §2 [Beyond the Pleasure Principle], vol. 9 Ed. Boringhieri Torino 1980
sense, an objective or a genitive one. In fact, it does not represent the unconscious but rather a form of defense against it, as if there were a fear that the desire of the Other could be pursued without mediation, making its real aspect appear. Devouring and fragmentation fantasies echo in screams and phrases thrown in the air, the children become a single body defending themselves against the big bad wolf or the killer whale. One day a child put a sign on the door of the treatment room, saying «Attention, Gerbaudo danger!».

It is important that therapists are able to tolerate the mess and do not react with Super-Egoic interventions drawn by the uncertainty of the situation, but try instead to capture the effects of words and of speech in these regressive manifestations. Of course, the tolerance of confusion and uncertainty is proportional to the level of analysis and education achieved by each therapist in his or her path7.

Another characteristic is the disparity of the positions of adults and children in the group: there is a symbolic disparity between the therapist’s position and that of the participant as in the group of adults, but it is doubled at imaginary and real levels. It is possible to choose an adult to play the part of a child in psychodramatic play and vice versa. In addition, the difference in the status of child sexuality compared to that of adults requires the discretion of a particular operator when dealing with the questions of childhood in the language of tenderness and emotion in play. Finally, I would add that in a session there might be observers, in addition to therapists, who could be used to represent various characters in children's play. Therefore, the eventual choice of the child or an adult would not fall only on the two psychodramatists but also on auxiliary-Is, allowing the particularity of choice to be caught according to the case.

The real disparity also concerns the status of the object in question, since the object (in the Other's phantasy) and the child coincide in the imaginary by means of the symbolic equation phallus = child. The child has thus the symbolic need to find himself in the symbolic signifier of the idealising I (I), constructed on the Oedipal necessity of the Paternal Metaphor. The Name of the Father (NF) works to signify the Desire of the Mother (DM), in order to disconnect partially (but effectively) the child from the jouissance of the mother, thus allowing a subjectivity through the triangulation of Oedipal signifiers.

If this operation failed because of the paternal signifier is foreclosed, that is, it does not intervene, we are in the presence of a psychotic structure where the phallic key does not orient the subject that is then prey of the jouissance of the Other.

7 A. Baruzzi Presentazione. (Il lavoro con i gruppi di bambini) GFA, anno XI, n. 1, Gennaio-Aprile 1990
The Group

The group, as it is said, is "imaginary", linked to the mirror relation between its members: the children participate on the basis of a personal question, conveyed by the desire of an Other, in relation to a transference established by a psychodramatist to whom the request was addressed. Each participant, at the time of entry into the group, finds himself developing his question in a context with other children (whom he meets only during the session) working as "objects" onto whom he could transfer his own projections and with whom he could also identify himself. This way "imaginary horizontal" transferences are established, which have a direct or indirect relation with the "symbolic vertical" transference headed by the therapists. The Ego of each one, in its specular dimension, encounters the Other’s word which emerges in his own speech and constitutes him as a speaking subject.

A little girl of about ten years old brought to the group a problem that haunted her. She had gone with her mother to the dentist who told her she had to have braces. The girl had reacted very badly to the announcement, making a scene in the dentist’s office that was somewhere between the seductive and the hysterical. I proposed that we see this episode.

To represent her mother she chose the other little girl in the group (even smaller than herself) and for the dentist one of the boys, a very cute and smart one. In the play, at the time of doctor’s announcement the little girl clung to the curtains, crying desperately and trying to convince the other with seductive behaviour; then she pushed away her mother abruptly and finally tired, she lay down on the mat.

The boy, in the part of the dentist, looked at her from top to bottom. He approached and said with a Roman accent «Hey girl! Doing that is useless. You must wear braces for your whole life!». I interrupted the play at this point.

The involvement of partners in the play worked here as an interpretation of the girl’s difficulties in accepting oral castration as a narcissistic injury to the beauty of her speech and her appearance. Although it was aggressive as an intervention, the little girl accepted it as limit coming from an equal. In short it operated as “signifi(c)ation”8 of her manipulative relation to others, that she employed consistently with both her equals and with her mother.

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8 In Italian significantizzazione is a neologism created by mixing significazione (signification) and significante (signifier). In Lacan's theory, the signifying dimension is in fact not linked to meaning and sense.
The characters of reality, chosen and described in narrative and representation through "unary" traits (physical or psychological), gradually reconstitute the “internal group”, the family and the social Other. Psychodrama constitutes itself therefore as the field of speech, in what speech has of the signifier to bring out the subject of the unconscious.

In this sense, psychodrama is not the place of acting but of symbolic action, where the group is from time to time immersed in a narrative of a text that is not pre-established. The plot of the various stories condenses itself in the necessity of a play, always individual, that collects a moment of impasse for the narrator, thus shifting the representation to the level of the signifier: what place in this question do I occupy? This is an aspect that specifies how the child symptom already stands as an answer to this question.

In the group there is not a switching from a narrative (the story) to a representation (the play) that takes place sic et simpliciter, as you might move from words to facts – thus an "acting" – but from one discourse to another that specifies something of the other scene (Der Andere Schauplatz of Freud). If a child says something, another replies in an unconscious associative chain that, on the imaginary plane, founds the social link to which he is subject at the level of speech (discourse).

At the time of playing, the group splits in two: the players called up by the protagonist and the observers who watch the scene and listen to relational exchanges. In the play you do "as if", you mimic the gesture or the acts. Making them signifi(c)ant is the analytic function of the therapist who intervenes with his punctuations, scansions, the proposed play, silence. At the end of the session the Observer's words will be similarly important as they will highlight the 'gap' between the narrative and the play.

The consequences of this approach become evident in the apparent confusion of fragmented stories and rumours, the spontaneous playing and acting that participants offer to be listened to and looked at when the psychodramatic play picks up what "speaks" in these communications. The psychodramatist should not make children express or convey them at a level of emotional learning, but rather allow a place in which their speech is heard in all its meaningfulness. Therefore the direction of the treatment takes place not on a pedagogical or relational level, but only through the possibility of a transition from repetitive play to play in which the child discovers his own speech.

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The symptoms, due to which children are brought to therapy, should not be corrected or deleted; instead, they have to be considered as the vehicle of what the child cannot say about himself, an unsaid that is often also an intricate knot of family relationships. Representing them through the choices of the peers present and the accepting adults, forms a scene that has the value of an interpretation of the relation with the Other. In this act, the psychodramatic action has a linguistic value that, just like Freud’s cotton reel, makes the play a resource that can deal with the trauma of separation anxiety.

The transition from the family group to psychodrama group, as "heterotopic" with regard to known contexts, is a preliminary path that gives the child an orientation in order to construct his neuroses in peace and reinforce his experience of relationships by means of relational therapeutic effects.

Play

Already Freud\textsuperscript{11} had remarked that play is not the opposite of seriousness, as commonly believed, but of reality, since play aims at the subjective truth of the construction of the world. Whether adults and children are capable of entering into a ludic dimension constitutes a diagnostic signal about the severity of the disorders presented, from complete inhibition to manic excitement.

In psychodrama, as in child psychotherapy, there are many instances where, even before psychodramatic play could be achieved, the “spontaneous” playing is disrupted either by currents of excitement or inhibition or by repression of unconscious fantasies. Here, it is worth mentioning Freud’s text, Das Unheimlich\textsuperscript{12}, where he attempts to define this phenomenon in psychoanalytic terms. According to the author, the Unheimlich is in relation to castration anxiety and the infantile desire to animate what it is not.

The Unheimlich, what is not familiar, known, belonging to the “hearth” (Heim), has a root in the known, in the familiar. Because it was unendurable, it was repressed and shows itself as something alien and unexpected. It appears in children’s games and fables, and today, also in cartoons and dreams in the form of deformed monsters, cruel and menacing, which can be identified as a defense against the annihilation of the ego. As the child progresses with its "personifications", in M. Klein's sense\textsuperscript{13}, he thus attributes his internal demands to a masked character; here a series of faces and

\textsuperscript{11} S. Freud (1907) Il poeta e la fantasia [Creative Writers and Day-dreaming], in Opere vol. 5 Ed. Boringhieri, Torino 1980

\textsuperscript{12} S. Freud (1919) Il perturbante [The Uncanny] in Opere vol.9 Ed. Boringhieri, Torino 1980

\textsuperscript{13} M. Klein (1929) La personificazione nel gioco infantile in Scritti, pgg. 227-237 Ed. Boringhieri, Torino 1981
figures unravel, now cruel and menacing, now good and ideal, which assume the function of semblants that are increasingly similar to the real people in the child's environment. Unlike Klein's theory and technique, in psychodrama these characters are not performed as they show themselves in phantasies, but in reference to some real-life experience of the child, to which he associated. Typically, these scenes of the personification of horrible monsters who dominate and threaten are played spontaneously as preliminary to a psychodramatic scene. The play has the function of representing, *re-presenting*, the event described in forms that are typical of children's stories. In this second presentation, the play reveals what the child is missing but also what the child desires, which constitutes it as subject separate from the Other.

In psychodrama the protagonist “distributes” all the characters among the participants at the time of performing. It is however important that the psychodramatist, organizer of the session, can accept a given role for him or herself, returning, in the play or in interpretation, the symbolic aspect of these "representatives" of the parental imagos. In any case, the "cathartic" and emotional representation is interesting only as the effect of a change of discourse. That can happen only if the expressed emotion reaches the repressed representation (*Vorstellung*) in the unconscious. Psychodrama remains a *talking cure*, although the body will play an essential role. In regard to this, I will give a fragment of a particularly significant session:

> Leaving aside the two girls, a group of three boys argued loudly and excitedly about the spontaneous production of burps and farts. At a certain point, one of them started a “burping” dialogue with another child. He called it the “secret language”. The dialogue took place along with all the other fun and what is interesting is that the purpose of this experiment was not in understanding the said words, but in the jouissance produced by these guttural sounds, not officially allowed.

> Questioned about this, the protagonist stated that he used this “communication technology” (sic!) to upset his mother and teacher. We performed the second case. In the play, he was disappointed when the teacher (played by an observer) asked him what he meant rather than punishing him, thus subtracting the jouissance. It was even more interesting when the roles were reversed: in the part of the adult, this child started to burp at himself, which was interpreted by the therapist, as a derisive form of himself.

> In the second play, the sound expressed by the belch, as a material fragment mixed with jouissance and without a precise sense, drew the child close to his anger, which was manifested, beyond the words that were heard, in the sense of the derision
of the Other, a characteristic of his relationships that made him suffer a lot. Also in the following sessions, the passage of communication through the body, a trait of his speaking body, would succeed in coming out in the form of a question about his relation with the Other of language.

In the group and in playing, the symptom as body event takes on a particular importance due to the presence of aspects of the drive that are struggling to find their way into speech as subjective representations. In this way the emotional and irreverent aspects have the possibility of turning into a narrative what would otherwise remain imprisoned in the child’s body.

I will return, with no claim to having exhausted the complexity of psychodramatic play, to the cotton reel that I mentioned previously. Unlike the cotton reel as inanimate object, in the group the cotton reel-object is played by another person (adult or child) who inserts his or her subjectivity in the representation, as we saw in the first clinical vignette. While lending himself as a personification of the object and being therefore able to have a function of the transitional object in Winnicott’s sense, the other has also the possibility of changing the script or being affected by a role that touches him particularly.

An important therapeutic effect can occur by using the technique of role reversal in which the child plays the part of the problematic interlocutor, as we saw in the second fragment. The other is the place where, you most often encounter something of your own desire and where the child experiences and finds its own projections, with an effect of surprise.

What has been said is transformed by the effect of return in each participant, caused by the associations of the audience and the representation in the play. This connection between the private and the collective space is a topological operation concerning the entering of personal signifiers into a group dimension that turns them into common themes, which we call the session themes. Now, the entering is not a dispersion of signifiers in the imaginary register of sense; to the contrary it is a process of going and returning (fort-da), which establishes a symbolic connection between collective themes and individual signifiers. In other words, you have to cross the imaginary and ideal side of communication expressed by the mirror relationship between participants. This projective aspect, forming the illusion of group consistency, is interrupted by the impossibility of a unitary representation valid for all and is questioned by the impact of the symptomatic real.

The relationship with others originates on an identificatory level that links people together, using the coinciding of the Ideal trait with the collective object, as illustrated by Freud in Massenpsychologie. The extrapolation of personal signifiers
from the group themes puts into operation – in the gap between narrating and playing – the question of the demand of the Other to which the child symptom answers.

As we have seen in the clinical vignettes, you will move from the collective statements to the subjective enunciation in which the subject’s question in relation to the demand of the Other appears. This step is facilitated by a possibility included in the psychodrama methodology: the doubling of the imaginary (which makes the participants partners of the protagonist, his mirror others) can make way for the cut of symbolic elaboration, i.e. the way in which the subject is represented by the signifier of the Other. The signifier, for Lacan, is what represents the subject for another signifier ($S_1$, $S_2$, $S_n$)\(^{14}\).

This operation leaves a remainder (object $a$) that is represented by the emergence of the drive object, a piece of real, which escapes both imaginary and symbolic capture, but which is crucial in the choice of the symptom and in the construction of the phantasy. This is why psychodramatic play represents only

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individual scenes and does not use a scenario, or only as a preliminary exercise to catch the subject of the unconscious in the questions that the Ego is asking itself.

In conclusion, the methodology of psychodrama operates a symbolic scansion across the group that collects the participant’s’ statements and transforms them, with the help of therapists, into themes. In turn, the play works as a signifying cut to the imaginary unity of the group, bringing the theme to the individual storyteller for the emergence of his subjective relation with the Other. You can share the statement, but the enunciation remains the responsibility of the person.

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About the author
Gerbaudo Renato. Psychoanalyst, psychodramatist and associate member of EPFCL. 
email: rennygerby@alice.it