

# **The work of intersubjectivity in the elaboration of traumatic experience through psychodrama**

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## **Abstract**

In this article is described how the elaboration of a massive traumatic experience can find some support and resources in the psychoanalytic process of group's psychodrama. The characteristics of the groupal psychoanalytic situation qualify for a psychic particular work whose modes, dynamics and economy profit by the work of intersubjectivity, the groupal associative process, the plurality of figurative references and the polyphony of speech.

**Keywords:** psychodrama, trauma, intersubjectivity, preconscious

## **1. The dispositive of group psychoanalytic psychodrama and the elaboration of traumatic experience**

I proposed the groupal psychoanalytic psychodrama to people who had experienced situations with a strong traumatic drive. I practised this sort of psychodrama in Latin America and Arabian countries with psychotherapists (psychodramatists, psychotherapists, group or family analysts, psychoanalysts) for the elaboration of particularly difficult clinical situations as the traumatic drive is associated with these clinical situations and is often very intense and counter-transference implications are important. These clinical situations are experienced as very difficult, due to the weakness of the Preconscious both in patients and therapists.

A typical feature of psychodrama is to provide a space for figuration to formations and psychic processes at the moment when they are repetitive unable to find those contents of thought and that signifiers predisposition necessary for us in order to cause a representation. It is particularly pertinent to the elaboration of traumatic experiences where the Preconscious and the Word fail. Yet, this dispositive is never to be used in the heat of the moment but just after a latency period of traumatism.

The method I use is as follows: the participants are invited to talk on a traumatic experience they had already faced then they can play. They never directly play one of the cases already related.

The play is organised starting with a theme they had in mind, here- and- now, later through the recollection of very problematic situations. I don't lead them in a direct dramatisation of the traumatic experience but towards the search for an imaginary situation, invented by the group chosen and then played out according to the classic rules of group psychoanalytic psychodrama. The session is organised into three times. A time in which the critical situation is highlighted, then the search for a theme of the play. A time for the play; a time of association and elaboration of the theme of the play, on the play and on the situations related at the beginning.

Even the space is structured: it is a space devoted to the play, the play can't be played where they usually sit. One can't speak outside the field of play.

The clinical situations proposed by the participants are often expressed with an intense traumatic effect. Some participants do nothing but inject into the psycho both of the group members and analysts the affects experienced in a traumatic situation. Others succeed in maintaining the chill of their emotions and their figurative thought. Others also pass to an excess of unconnected and compulsive representations.

## **2. A psychodrama session with the elaboration of a traumatic experience**

We deal here with a psychodrama group made up of seven clinical psychologists and psychotherapists. Most of them work with traumatized patients in a civil war context.

The psychotherapists could elaborate the difficult situations of their patients during the psychodrama sessions, but up to the session I am going to speak about, they haven't deepened yet the recollection of their own traumatic experiences during the war. One can understand how the presentation of the different cases of their patients, in accordance with the proposed methods of work, had the function of maintaining a certain protection of their intimacy in front of their colleagues. The presentations permitted, at the same time, to speak indirectly about themselves just through this way out. It is possible a change at a certain point, some participants say they feel uncomfortable in evoking the traumatic situations of their patients if they can't speak of their own experiences: "we have just lived in the same world and we behave as if we didn't know all this story, like Mr Kaës, but that is true for him, he has never been involved like us" (1)

During a session, taking place after that many participants had been absent, or had arrived late, Ana proposed, but she was not at ease, to talk about an event she had experienced as a child when she was eleven, during the war.

The alarm of bombing led families to take refuge in basements. During one of these alarms Ana reached the refuge alone, without her parents who were busy elsewhere. At that moment she had experienced a long and terrible waiting, in anguish that her parents couldn't reach her. Two seriously wounded covered with blood people had been carried into the refuge frightening the refugees. They tried to give these injured people some relief but they couldn't really nurse them or evacuate them. In a panic she felt alone and abandoned. She discovered that one of the wounded people was a neighbour of hers she knew well and he was going to die amid atrocious suffering. She looked at the scene exhausted. She called her parents. She perceived her neighbours taking care of her but she can't remember anything of what happened in the refuge, neither how long she stayed there nor how she get out of the refuge. On the following day she heard her parents would no longer arrive. They were torn to pieces by the fire of a mortar. She remembers no longer, even now, what was done for her parents' burial.

For the first time she is crying now. Even many group members are crying. I am myself very touched by this story reminding me of sorrowful memories of the Second World War. In the group there is a long silence and with some difficulty I bring them back to the search for a theme of the play. Can we play under the supremacy of terror, with the freezing of tears? The participants appear connected one to another in sharing a depressive moment. Everything happens as if after Anna's story a frozen time should be maintained without any word or thought. Bringing the group back to the play would mean to revive it inopportunistically and deprive it from something important that the participants feel both alone and together: a no defensive identification with the suffering of others permitting to attain to their own suffering. And it is just what had been long frozen by many of them. I think about all that and let time pass. Time when *words* destroy affections and lead to representations. But words can't even arrive like the parents Anna was waiting. Before being able to play we need to be able to speak. I press associations about what has just been said and the Silence which followed. Their first thoughts are connected to the group experience. Somebody remembers the absences during the previous sessions: "When somebody is absent or late I think at once about a crash or kidnapping" says a participant. Then they evoke similar situations experienced by patients or by they themselves: precarious refuges, the terror due to bombing, the proximity of the dead and wounded people, the knocked down buildings, the wanderings among ruins, the dangerous paths in the sniper fire. The group members emphasise Ana's despair and solitude in her refuge, but Ana doesn't want to be consoled. I propose to look for a theme for our psychodrama. Somebody protests against the idea to play starting from what Ana has just related: it would mean to hurt her too much, offending her and her parents. Ana says nothing. I tell them that speaking about our own patients is a way to carry out a Displacement from what they themselves have experienced because a good part of their anguish was left deprived from words. They start speaking about their despair in front of the suffering of their patients, the lack of a dispositive to elaborate what they feel and think by working as psychologists. They remember a case they spoke about on the previous day: a boy wandering amid the rumble, living alone in basements, which were already splayed. Their associations are chaotic and they are absorbed in their silence. I realise they have identified themselves with the boy, so as they have identified themselves with Ana and with those devastated boys they themselves had been: Ana's story has just united them in an identifying condition with the boy terrorised on the death of his killed parents. It is the final point of their shared depression but not only the determining one. In protesting against the play they have just met the intensity of internal violence against those adults who weren't unable to protect them and even against themselves. They are afraid of hurting Ana making her revive her frozen mourning and of hurting they themselves.

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For the first time Ana is speaking now about her sadistic movements and her consequential sense of guilt when she receives adults and adolescents traumatised by war. She feels ashamed. Ana says then, she would like to play but if she sees someone playing she would feel better. The memory of their devastated basement lead psychotherapists to associate again around a lack of containment of their anguish as clinical experts. Through their work, they face continually themselves with their internal disasters and with their sadist and masochist drives tearing and torturing *them*. A theme is elaborated: a group of psychotherapists should demonstrate in front of a doctor's office to protest against his incompetence to ask for a support to face this mistake. They would meet there another doctor who would support them in their request. In the transference I realise the ambivalence of this theme. The theme changes: the participants imagine to shoot a film like Being's "Life is beautiful".

Later another situation is proposed: a Nazi doctor carries out submission experiments on authority like Stanley Milgram's. Someone remembers the beginning of this experience and he sums it up like this: some people, recruited and paid by a university laboratory, participate in an experiment intended to determine from a scientific point of view the tolerance to pain. The recruited "experimenters" are preliminarily informed by the manager of the search plan of the high scientific interest in the experiment. As a result, a series of experiments is planned and each "experimenter" is asked to send stronger and stronger electrical discharges to a person; this last one is an appearance who pretends to suffer from pains up to the point he/she pretends to reach an unbearable pain limit and a vital hazard. Notwithstanding the experimenter's perception of this risk, he obeys the lab manager's orders exerting his growing influence on him. This last pressure will lead him to reach the threshold of death risk for the other person. In the play, imagined by the participants the plot of the situation described by Milgram is kept, but with a change: he who will be able to be the best to pretend the limit of tenability, will save his life and "his torturer" either will disappear or will be punished. Participants agree to play this theme. I really feel uncomfortable, I am very confused because of this scenario, which is so messy, yet, most of the participants seem to be interested in it, notwithstanding the reserves they had demonstrated about the chance of playing

after Ana's story. Slowly the game is playing with many precautions; it is difficult to find "the nazi doctor" and represent the violence of dilemma: "and if were electrical discharges true?" asks a participant who will say after the play he had stolen space from a patient in order to survive. The play is structured by alternating it with moments of acting. He who "sends" electrical discharges and he who "receives" them. They play with difficulty the roles of torturer and victim, they propose to exchange their roles, and don't understand any longer what they have to do until the protest bursts out against this theme impossible to be played. Some one announces, in

order to go out of the *impasse* where they are, that the concentration camp is going to be freed (like in the film *Life is beautiful*). The play suspension is followed by a great relief shared by all the participants. Those who have just played say they have felt frozen by all that has happened unknown to them. They have had the sensation to have been caught in a construction they don't understand the meaning of.

I underline the abyssal feature of the theme of the play I had not been able to perceive in the moment when it had been proposed as a play in the *play* a lab experiment including pretence, a false. Three dimensions appear in the scenario. The replication as a mechanism of defence against the unthinkable, its persecuting charge, its perverse drift. A solution was the magic way out of the *impasse* or, otherwise stopping the play arbitrarily. The participants work on this magic and arbitrary thought to go out of this frozen situation, they recognise two of the devices used to avoid the elaboration of a traumatic experience Yet the session of psychodrama has just permitted to go beyond the *impasse* and its magic solution; the participants have found the way to think what they didn't succeeded in representing.

The paradoxical overturning was produced during the psychodrama and was carefully analysed: the participants performed a play which represented the possibility of controlling sadist violence, they believed they could dominate a traumatic situation but experienced they were led by an understandable scenario which turned against them, an absurd context whose aim was the reward of the best victim.

As matter of fact, I had no idea about a similar evolution in the moment in which the representation was playing, in addition, I don't understand what could mean "a victim to reward" Yet, what started to appear was repulsive for me. And, if for the group members the best victim was just the one evoked by Ana? And if her story had been idealised in a heroic identification fluctuating between victim and torturer? And if I had to be the support of a transference I had learned to recognise posterior just in this work about a real trauma produced by social violence. I would like to pause about the analysis of the elaboration processes of traumatic experience through the groupal psychoanalytic psychodrama.

### **3. The elaboration processes of traumatic experience through the psychoanalytic**

#### **Psychodrama of group**

Among the different processes I'll analyse first of all the detour through the play and the imaginary, the dynamic effects of figuration, the transference, the work of intersubjectivity and the groupal associative process.

*The turning point through the play and the imaginary, its paradoxical experiences.*

*The dynamic*

*effects of figuration in psychodrama.*



After the stage of exposition of traumatic situations, the mediation *in play acting and the passage through and “ as if ”* compel the investments drive-related to connect to a shared figuration preventing the direct discharge into action, even if it were an act of word. The recourse to fiction causes the transference *of traumatic discharge on the present scene linking it to representation..* During the come on stage, those processes themselves are involved which had led to the paralysis of thought: competitive anguish, collapses , lethal phantoms, the experience of psychic emptiness and depression, the excess of excitement . The production of *a dynamic effect through the figuration* represents the specific moment of psychodramatic work. Excitement and the play of seduction are very frequent: groupal excitement protects from his/her own excitement, it anaesthetises it and abstracts it from the process of thought bringing it up to the breaking point and para-excitement due to the setting and groupal containment. Often, in this type of psychodrama (2) the movement between the centre and the outskirts (the edge) between the space devoted to the play and the space devoted to thought is difficult to contain. This movement, exceeding space and time limits, coming up again the confusion which is typical of trauma, between space and time, between the voice of your ego and your non- ego, it also competes with the work of the preconscious and with the constitution of thought. In this going and coming, in this “postponement” from one place to another coexists the reflection on the mirror going from the centre towards the edge and from the edge towards the centre; it is a process of thought reflecting on itself. In the conduction of this type of psychodrama is difficult to protect the function of the setting privileging the aspects of containment, fluctuation and transition, without permitting to be swept by the unconventional overflow of these movements. For most of the participants, the passage through the imaginary of the play is often accompanied by anguish. This twist accepted in the context of a positive transference causes some resistance. The analysis of transference both positive and negative is its motor. In these conditions the passage from the story of the case to the play is similar to what has been experienced during the therapy of a difficult case, as a result participation in the play itself is particularly intense, a source of pleasure and sometimes of guilt... During this session psychodrama has opened the way to the expression of the child’s despair, alone in front of abandon, death and violence. The therapists have experienced the impossibility of using recourse and rescue, powerless and abandoned in front of sadism and submission. The associations during and after the game permitted to Ana and the other group members to access to representations up to that moment inaccessible. During this session the psychodramatic play permitted to the participants to perceive the struggle of internal characters.

### **Transference, the work of the Preconscious and after**

The elements, which I have presented, show that, in the transference, the group and the psychodramatist represent different and contradictory places for the actuality of traumatic experience. The group is for some a scene of containment and deposit,

for others it is a place of freedom of repetition and finding of the capability to think with others. For others still, the group and the psychodramatist are objects potentially traumatic, sought after, as they are such. The transference uses a paradoxical defence, frequent in the treatment of traumatic experience: *a defence through a double attachment*; attachment to the traumatic object and attachment to the object of traumatic counter-invest (the therapist and/or the therapeutic group for example).

The turn through the play “loosens” these transferal contents, stake them and removes their unconscious subjective and intersubjective tactics. The method, I propose for this type of work, is important that the play derives from an imaginary situation, invented in group and not from a direct dramatisation of the case or of a traumatic situation. This method, as we have already seen, compels the participants to detach themselves from the exposed situations and to play with the relationships with affections, emotions, representations, phantoms, thoughts and the figures of speech where the body is constrained. Doubtless, some resistance sets in motion against the use of this dispositive. However, an intense activity is produced by all the elements constituting the activity of the preconscious with this peculiarity: the situation of group restores the connections between the work of the preconscious and the work of intersubjectivity. The analysis of transference is possible if one realises how the evocation of trauma and the change through the imaginary put the subject again into touch with all these preceding experiences, where ability to imagine, to play, to meta-morphise has been damaged. I am again into touch with a moment of their psychic life characterised by a breach in the activity of the Preconscious. Probably the confusion and the adherence to the play are in relation with the difficulty of elaboration of the psychic disaster of trauma: how can you detach yourself from the traumatic object and from the object protecting you?

*The Posterior effects* are the expression of psychic work of integration: a recurring re-organisation of those preceding events which have not been integrated yet in a significant context. It is exactly what doesn't happen in traumatic situation. The psychic work, taking place later, presumes the repression and a latent period before the return of that had been repressed: it implies the activity of the preconscious.

*The activity of intersubjectivity and the groupal associative process*

*The work of intersubjectivity* is at its roots of this groupal psychodramatic elaboration of traumatic experience. The work of intersubjectivity characterises the psychic work of the Other or More -than -another in the psyche of the subject of the unconscious. This work is traceable in associative processes developing in the group (3). The plurality of speeches and their circulation in associative processes, are a characteristic of group dispositive. The statements are inserted in a plurality of speeches ordered according a double synchronical and diachronic axe. When the members of a group speak under the effect of the rule of free association their statements are always “situated” in the point of knotting a double associative chain. The succession of single statements, determined by meta-representations

and by the ways of connection of each of the members produces a flowing original whole containing in itself the inscriptions of the effects of the unconscious. Associative processes organise themselves starting from a triple source: repression, denial, rejection. The first belongs to any subject considered in the individuality of his/her own structure and in his/her own story; the other one rises from the relationships among the group members to build the group connections; the third is produced by analysts, assembled in group, in their relationships with the group. Every content of the unconscious is connected in an original way and returns in the ups and downs of associative work. An association doesn't exist but through the other ones in the double weaving of the associations of the subject with those coming from another or more than another group member. In the group each one is, at the same time, interlocutor and stranger: It is a part of the Self and a part of no-Self. It is in the mutual weaving of these speeches the source of the speech that the subject will recognise as his own, through deviations, movements, variations, versions, reversals of a statement organising associative processes into the group. It is the statement of the fundamental language of any unconscious phantasm, organiser of group connections of common formations and shared but hidden in repression.

The groupal associative process opens the ways back to repressed experience. It puts into circulation signifiers deprived of sense or devalued or not available for the work of representation.. The speech made inside a group or even by a member alone is bearer of a word which some participants don't possess. A word missing one is at the same time a word important for others, these members resume it, invert it, change it, and without their knowing reveal the conclusions they reach. If the search for the sense is the problem of each one, the missing word will appear in the intersubjective chain of groupal speech. In psychodramatic work in group, specifically in this elaboration of traumatic experiences, the groupal associative process and its figurative polyphonic procedures bring to the subject the statements up to that moment not available to thought and ability to representation. The groupal psychic work of intersubjectivity permits to think what was unthinkable. This psychic work

confirms that after a collective traumatic experience, as for example a genocide or a so called natural disaster ( Mexico, Toulouse), is of vital importance rather than the "debriefing" the story-telling expressed by more voices and more listeners and for more listeners: some victims of the disaster, others witnesses, others strangers to all that. In this narration is important both the difference and the similarity of elaborated versions. I usually recur to the conceit of *pluri-reference* in order to specify this analysis. The pluri-reference characterises the intersubjective polyphonic structure of a speech to more voices, thanks to this is possible to rebuild traces often incomplete and despairing. It is the *pluri-reference* which rebuilds memory and history in the plurality of versions. The effects after are improved by this plurality of references.



The plurality of voices reminds us of the chorus in Greek tragedy: so that the collective psychic disaster might be thought it should be widened, find a resonance, arise witnesses and comments, evoking several stories causing vital researches in its fortuity. An audience is necessary to listen to these speeches made by more voices and some leading main characters to dramatize them. I am not speaking about *catharsis* but about what gets polyphony and the work of intersubjectivity when we try to elaborate, think, and give a meaning to catastrophic events. In this psychic work the mobilization of figurative and representative functions of The Preconscious is decisive because these are the most damaged functions in any traumatic experience: they are paralysed, out of order.

### **Conclusions**

The dynamic effects produced by representation in the psycho-dramatic work are evident in the elaboration of difficult clinical situations associated with traumatic experiences. Psychodrama urges the capability of representing making play, gestures, the disposition and the movement of the body in the psychodramatic scene the other fundamental psychic syntax. This dynamic effect, through representation is closely associated with dramatisation making possible rules, the setting and the psychodramatic process. What contributes in a particular ways the come on stage through psychodrama: the chance of acting in the internal space and in the psychodrama space, the multiplicity of psychic characters. the subject himself and the connections he weaves with his/her characters as they are a pregnant part of the action performed in the scene of the phantom.

Finally, I underline the effects of “*decondensation*” or separation of representations and affects concentrated by the deformation of the primary process. I would say in order to explain better that the group work is a work of separation of these “envelopes” concentrated in a trauma: it is necessary to connect what, on one side is a whole of affections and on the other side a whole of representations, but without any relation between these two containers.

### **Notes**

(1) An absolutely important question, an elaboration of an article by J. Puget and L. Wender (1982) dealing with the superimposition of the analyst's and the analyser's worlds. in war civil situations

(2) I deeply exposed in a paper on group psychoanalytic psychodrama (Kaës)

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