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ROLE THEORY AND ROLE ANALYSIS IN PSYCHODRAMA: A CONTRIBUTION TO SOCIOLOGY

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Abstract
This paper discusses the contribution made by psychodrama role theory to sociology. It is well known that role theory was founded and disseminated in sociology, and specifically in social psychology; our goal therefore is to indicate the ways in which psychodrama can act as a bridge between sociology and psychology. J. L. Moreno, as the founder of psychodrama, strongly believed that psychodrama was more inclusive than sociology, particularly since it has practical and therapeutic aspects of role playing, and role reversal especially. Our idea is to emphasize and demonstrate how role reversal, role development, role analysis and the theatrical background of psychodrama are practical elements that result in therapeutic effects. Along with the theoretical elaborations of these aspects and contributions, we use examples from our ongoing weekly psychodrama group, which we have been leading as directors / co-therapists since 2014.

Keywords: psychodrama, role theory, Moreno, sociology (Mead, Linton, Goffman), role reversal, role analysis

1. INTRODUCTION
Role theory is the core theoretical and practical element in psychodrama. Although Jacob Levy Moreno, the founder of psychodrama, did not leave behind a coherent role theory, its importance remains for psychodrama theorists and practitioners. Moreno’s role theory refers to a pluralistic model of the mind where each person plays many roles which can be identified, named, reassessed and modified. Each role is a combination of individual and social components, since each person is defined by his or her individual past experiences and the cultural patterns of a given society. As a result of this combination, roles are simultaneously psychological and social; both psychologists and sociologists, and even social psychologists, have found this to be a potent field for research. Psychodrama, on the other hand, sheds light on roles in a somewhat different sense, which is at the same time dominantly practical and therapeutic. The practical and therapeutic aspects of roles enable people to (re)consider their perceptions of themselves
and others through psychodrama action. Consequently, this can be an agent of change in people’s lives.

The purpose of this paper is to highlight Moreno’s contribution to role theory in social sciences, particularly sociology, bearing in mind that during the 20th century, sociology was the most noted field for the development of role theories (Mead, 1934; Linton, 1936; Cottrell, 1942). In addition to analyzing classical sociological texts that deal with role theory (Mead, 1934; Linton, 1936; Goffman, 1956), this paper will show how psychodrama contributes to, expands and transcends sociological role theory, revealing the practical and therapeutic aspects of role playing, namely role reversal. Role reversal is the most important psychodramatic technique where the protagonist of a psychodramatic session reverses roles with an auxiliary (his / her mother, father, sister, friend, etc.), enabling him / her to be seen from the perspective of the other. Psychodrama role theory has its origin in Greek and Roman drama (Moreno, 1946). Moreno was interested in the semantic origin of the word “role” and focused on the Latin word “rotula”, which dates back to ancient Greece and Rome when parts of theatrical scripts were written on “rolls”. Actors used these rolls in order to memorize their parts in a play.

This paper also deals with Moreno’s definition and the various types of roles (Moreno, 1961/1987), their relation to the “self” (Moreno 1946), role development, as well as Adam Blatner’s concept of role dynamics and meta-role (Blatner, 2007). Focusing on role development, Moreno argued that the self emerges from the roles we play (Moreno, 1946). Therefore psychodrama is a creative modality in which participants enact roles in order to access the spontaneity needed to bring these roles to optimal functioning in their present lives.

Role analysis (Blatner and Cukier, 2007; Blatner, 2000; Bustos, 1994) is also a very important practical aspect of psychodrama enactment. It is a systematic method for examining roles and a practical extension of role theory which helps in examining role dynamics at the intrapsychic, interpersonal, group, and sociocultural levels of interaction (Blatner and Cukier, 2007). The goal of role analysis is to examine systems of roles, and on the basis of that to see whether and in what way these roles can be further developed. It shows the essence of role theory in psychodrama, which is described through the theoretical and practical examples in this paper. In some cases, we have used examples from our ongoing weekly psychodrama group, which we have been leading as directors / co-therapists since 2014 in order to illustrate crucial theoretical points.¹

¹ We have protected the confidentiality of our clients in accordance with the “APA Ethics Code Standard 4.07, Use of Confidential Information for Didactic or Other Purposes”. We have taken steps not to disclose confidential and personally identifiable information concerning our clients by disguising some aspects of the case material so that neither the subject nor third parties (e.g. family members, employers) are identifiable. We have changed our clients’ names and limited the description of specific characteristics. Since the Ethical Standard 4.07 gives us therapists a choice between obtaining consent or disguising personal information, we have not taken informed consent from our clients, since all personal information is concealed and not included in the text.
2. CLASSICAL SOCIOLOGICAL VIEW OF ROLE THEORY: ITS ROOTS AND FOUNDERS

In this section we will discuss the way classical sociological theory refers to role theory. We need to establish a solid ground in sociological theory in order to thoroughly move to the psychodramatic perspective. Psychodramatic role theory will be discussed in more detail in the following sections, where it will be further explored and compared with the sociological theory elaborated here. By choosing such way of structuring this paper, we hope to achieve a kind of dialectical view on role theory, first proposing a detailed classical sociological view, then introducing and elaborating psychodramatic role theory, and finally comparing these two perspectives by assessing the contributions that psychodramatic role theory has made to sociology and to social sciences in general.

Social psychology deals with social experience from the psychological standpoint of individual experience. It studies the experience and behavior of the individual in his or her dependence upon the social group (Mead, 1934). G. H. Mead was a social psychologist and behaviorist who wrote the notable book *Mind, Self, and Society. From the Standpoint of a Social Behaviorist* (1934) in which he argued that mind is not a substance located somewhere separate from the person, and transcendent, or merely just a part of the human physiological structure. Rather, he held that mind developed from the interaction between a person and the social environment, as he strongly believed that it was through participation in the social act of communication that individuals develop symbolic behavior (Mead, 1934). Mead is considered to be the founder of symbolic interactionism as a distinct and influential social theory, and therefore he had a strong influence on sociology, even though he is regarded as one of the founders of social psychology. His view on the *self* is also important and is relatively congruent with psychodramatic role theory, especially with Moreno’s view of the self. Mead argued that “the self is something which has a development; it is not initially there, at birth, but arises in the process of social experience and activity, that is, develops in the given individual as a result of his relations to that process as a whole and to other individuals within that process” (Mead, 1934:135). Therefore, Mead regards the self as an essentially social structure, which arises from social experience, and he argues that we can take the perspective of other people, which enables us to become objects to ourselves, and that this is very

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2 Since this article uses both terms (sociology and social psychology), it is necessary to differentiate the two. Social psychology is the study of people in a group, while sociology is the study of groups of people. In that sense, social psychology studies the connection between an individual and a group, namely how the group affects the individual and how the individual can affect the group. On the other hand, sociology is more interested in the connection between groups, how they interact with each other and with society in general. Historically, and more precisely, social psychology is a branch of psychology, and therefore a sub-discipline, unlike sociology, which is a discipline *per se*. Field pioneer of social psychology, Gordon W. Allport, proposed a classical definition of social psychology: “Social psychology is the scientific attempt to explain how the thoughts, feelings, and behaviors of individuals are influenced by the actual, imagined, or implied presence of other human beings” (Allport, 1985:5).
similar to role reversal in psychodrama. Like Moreno, Mead was very interested in children's games, as we will touch on in the following sections, particularly in the change in positions where children are “in a game where a number of individuals are involved, then the child taking one role must be ready to take the role of everyone else. If he gets in a ball nine he must have the responses of each position involved in his own position. He must know what everyone else is going to do in order to carry out his own play. He has to take all of these roles” (Mead, 1934:151). Mead was aware of the importance of role reversal, although he did not use this term, and the effect that it has on the self, which thus becomes an object. By taking on the attitudes, or more precisely the roles of the other, the me appears. “The attitudes of the others constitute the organized ‘me’, and then one reacts toward that as an ‘I’” (Mead, 1934:175). We can see that me for Mead is the social aspect of the self, and this can refer to the ways in which others see us and our awareness of this. Me here becomes a sort of “meta-role”3, that is, an object, where I is a subject. Mead also proposes the term “generalized other” regarding children's play, where children learn to understand what is expected from them and what kind of role they should play in a given situation (game), and which prepares them for the maturation and development of the social self.

Ralph Linton was an American anthropologist whose work was influential in social sciences in general. His major work was the book The Study of Man (1936) in which he distinguished and analyzed the terms “status” and “role”. These terms, like Mead’s “mind”, “self”, “I”, “me” and “generalized other”, are also very significant for the current paper, since they shed light on certain aspects of roles and show their connection within role theory in psychodrama. Linton argued that “a status, as distinct from the individual who may occupy it, is simply a collection of rights and duties”, whereas “a role represents the dynamic aspect of a status” (Linton, 1936:113). Status is therefore somewhat “outside of” an individual, like abstract norms and expectations, something that is within a social space. Thus, when an individual acts upon his or her status, his or her distinct, concrete and individualized action is displayed – a role. Linton emphasizes that role and status are inseparable, because there are no roles without statuses or statuses without roles (Linton, 1936). Through this view, Linton's work was closely linked to social psychology, and his dynamic aspect of role contributed to social role theory. It is now becoming very clear how his ideas on status and role correspond with role taking, role training and role playing in psychodrama. This connection will also be explored in the following sections.

Erving Goffman was a sociologist whose work corresponds closely with the ideas of psychodrama in general, and not just with role theory. Reading the preface from his famous book The Presentation of Self in Everyday Life (1956), it becomes very clear how his intention in writing this book has a clear and solid grounding in theatre and perfor-

3 We use this term in Adam Blatner’s sense, where “meta-role” enables people to see themselves from a distance, to enhance self-awareness and self-reflection (Baim et al., 2007).
mance: “The perspective employed in this report is that of the theatrical performance; the principles derived are dramaturgical ones. I shall consider the way in which the individual in ordinary work situations presents himself and his activity to others, the ways in which he guides and controls the impression they form of him, and the kinds of things he may and may not do while sustaining his performance before them” (Goffman, 1956: Preface). Goffman was dedicated to showing how face-to-face interactions work, where individuals who present themselves to others try to manage the impressions that others may make of them. That is why “presenters”, “actors”, or “protagonists” in terms of psychodrama on the one hand try to discover how they appear to others, meaning they must be able to see themselves from the perspective of the other, and on the other hand must be able to change their appearance as they gather information on how others see them. This is exactly what happens in psychodrama through role naming, role taking, role playing, role rehearsing, and of course, role reversal, which will be discussed later in the text. Goffman’s dramaturgical analysis enables us to see connections between everyday interactions and theatrical performances with actors and the public. He describes “performance” as “all the activity of a given participant on a given occasion which serves to influence in any way any of the other participants”, and a “social role” which, similarly to Linton, he describes as “the enactment of rights and duties attached to a given status” (Goffman, 1956:8-9). Goffman wrote about a “front region” or “frontstage” in everyday interactions where people try to maintain and present a positive aspect about themselves to others, whereas in the “back region” or “backstage” people are preparing for a role, relaxing, setting their role aside and stepping out of character (Goffman, 1956). In the back region there is no audience, and the performer can reflect on their role. Perhaps there is a chance for the performer to decide what kind of a role s/he wants to play, which roles are developed and underdeveloped, and which role is congruent with the performer, the one he/she sees as more authentic. This is a place where psychodrama can contribute, and this may be a position where people can find a way to change their perspective on their roles and themselves. However, Goffman was a sociologist, and he saw individuals as being deeply interconnected with the givens of a society; he therefore felt that “if the individual takes on a task that is not only new to him but also unestablished in the society, or if he attempts to change the light in which his task is viewed, he is likely to find that there are already several well established fronts among which he must choose” (Goffman, 1956:17). In the following sections, unlike in Goffman’s view, we will explore the potentials that individuals possess in order to change the roles they are playing.

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4 There are of course alternative ways of presenting ourselves apart from solely trying to maintain a positive appearance, such as situations where we do not want to be liked by others, if that is in our best interest; where we want to show our distance from the roles we are playing and are cynical about our performance; or where we misrepresent ourselves, etc. What matters is not the content of the role, but the idea of us playing a role by which we want to create, achieve, change or simply govern the impression of ourselves to others.

5 Examples being the kitchen in a restaurant, space for repairs in a shop, washrooms in a company, etc.
3. ROLE THEORY IN PSYCHODRAMA: HOW CAN WE CROSS THE BRIDGE BETWEEN PSYCHIATRY AND SOCIOLOGY?

In his book *Psychodrama, First Volume* (1946), Moreno elaborated on the origin of the term “role”. He explained that the word “role” has its roots in old French and is derived from the Latin word “rotula”. In ancient Greece and Rome parts of theatrical scripts were written on “rolls” from which actors memorized their parts in a play. “It was not until the sixteenth or seventeenth centuries, with the emergence of the modern stage, that the parts of the theatrical characters were read from paper fascicles, whence each scenic part becomes a ‘role’” (Moreno, 1961/1987:61). In the middle of the 1920s, the ideas and concept of role came from Europe to the U.S.A. where modern variations of the role concept were developed: the role player, role playing, role expectation, acting out, and finally, psychodrama and sociodrama (Moreno, 1961/1987). Moreno concluded that “role” does not have its origins in sociology or psychiatry, but in drama (Moreno 1946). Moreno was determined to show how the sociological concepts of role in the writings of G. H. Mead (1934) and R. Linton (1936) did not include and were not aware of the dependence of the process of role upon drama. He even denounced American sociologists, including T. Parsons, as “having monopolized the concept of the role, as if it were sociological property” (Moreno, 1961/1987:62). In his paper *The Role Concept, A Bridge Between Psychiatry and Sociology* (1961/1987), Moreno argued that psychodramatic role theory could be that very bridge between psychiatry\(^6\) and sociology. More particularly, he saw psychodramatic role theory, with its foundations in dramaturgical actions and operating with a psychiatric orientation, as more inclusive than a sociological or psychological concept (Moreno, 1961/1987). He argued that roles are:

\[\text{(...) the actual and tangible forms which the self takes. We thus define the role as the functioning form the individual assumes in the specific moment he reacts to a specific situation in which other persons or objects are involved. The symbolic representation of this functioning form, perceived by the individual and others, is called the role. (Moreno, 1961/1987:62)}\]

Therefore roles are a combination of past experience and social patterns, and of individual and collective sides; however, sociological and psychological perspectives are not enough. Moreno insisted that there is something more in between the societal and the

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\(^6\) We are using the term “psychiatry” because Moreno was a psychiatrist with a strong interest in sociology and psychology, and was aware of the fact that sociology is interested in role theory. Therefore, he wanted to emphasize that psychodramatic role theory offers a broader and more practical perspective on the effects of playing roles than sociology does, and even psychiatry which, at that time, did not offer clear ways of applying the role concept in its own theory. Psychiatry deals primarily with diagnosis and psychiatric medication, and Moreno was interested in psychotherapy as a practice that is oriented towards personal interaction as a modus for change. He found it in psychodrama as a distinct psychotherapy (action) method that uses roles as practical tools for personal change.
psychological, something that is dedicated to practice and even therapeutic. He found this in psychodrama, since it offers certain forms of role playing: role identification, role naming, role training, role reversal, mirroring and a double, which offer individuals a chance for mental growth and change. He saw a great value in that and this is why he argued that the psychodramatic concept of the role is more inclusive than the sociological or psychological one. Moreno argued that role theory cannot be reduced only to social roles, but has to include the three aspects of the role: social roles that reflect the social dimensions; psychosomatic roles that reflect the psychosomatic dimension; and psychodramatic roles that express the psychological dimension of the self (Moreno, 1961/1987).

For example, psychosomatic roles are physiological, such as the role of a sleeper, eater, etc., and they are common to all people. Social roles show how we connect to others, such as the role of the mother, student, employer, sister, friend, etc. Psychodramatic roles, although referred to as psychological, have a psychodramatic aspect which is based on imagination and growth and on role playing such as role reversal, role identification, double and mirror, and they “contribute to the mental growth of an individual” (Moreno, 1961/1987:63). They refer to the roles we develop through psychodrama enactment, and not only through this, but also through situations and relationships in our lives that allow us to change, such as the roles of an inspired writer, generous helper, conscious employer, etc. Such roles can also be a self that is angry, sad or a self that can or cannot contain strong feelings.

Regarding the earlier discussion of Mead and his view on the self, namely that a self is a product of social experience, and is not a priori there, but is a result of the relations that an individual has with their environment (primary objects and social world), we can see how this corresponds with Moreno’s ideas of the self. Moreno argued that roles arise before the self (Moreno, 1946), because roles are a part of our human nature, and not a mask we put on ourselves. Self therefore arises from playing roles. We can see here how both Mead and Moreno saw roles as essential parts of an individual. Even more, leaning on Moreno’s view of the self and child development, there are three stages of child development in psychodrama: a) development of identity – the child cannot see him- or herself as separate from the mother, so mother and child share one identity; b) development of the self – the child is able to distinguish him- or herself from the mother, and becomes aware of their own self; c) recognition of the other – after being able to see him- or herself as separate from the mother, the child can put him- or herself in the place of the other and play their role, which can often be seen when children play doctors, teachers, etc. (Kellermann, 2007). These stages correspond with three crucial techniques in psychodrama: a) the double – where the therapist or a member of the group stands behind a protagonist and speaks his or her unconscious thoughts, giving them voice, thus corresponding with the mother being a double for the child; b) the mirror – where the protagonist comes out of the scene and sees himself being played by his double, thus corresponding with the child being aware of him- or herself as being separate from the mother; c) role reversal – where the protagonist reverses roles with the auxiliary, thus corresponding with the final stage of child development where the child
is able to be someone else without losing touch with his or her own self. We find role reversal to be the most important technique in psychodrama, since it is “a technique of socialization and self-integration” (Blatner and Cukier, 2007:302). It enables people to be seen from the perspective of the other, which enriches their sense of self and opens a path to change. Role reversal brings us again to Mead’s distinction between “I” and “me”, since “me” consists of the attitudes of others, of how others see us and our reaction to that. Regarding Mead’s concept of “me”, there have been some experimental findings in 2011 of what happens when a person takes the perspective of the other. The experiment (n=120) found that the exchange of positions in social relations (role reversing) goes beyond ordinary cognitive change; it is “a newly identified and powerful social mechanism” (Gillespie and Richardson, 2011:608).

In psychodrama, however, it is well known that role reversal has not just a cognitive but a therapeutic effect (Moreno et al., 1955; Leutz, 1985; Kellermann, 1992; Kellermann, 1994). Moreno encouraged people to live his “golden rule” by mentally and practically exercising role reversal with others, and to think what it would be like to be someone else, because he strongly believed that this creates empathy, compassion and self-reflection. Moreno’s view of the role reversal technique is best described in his poem about an encounter which he wrote in 1914:

- A meeting of two: eye to eye, face to face
- And when you are near I will tear your eyes out
- and place them instead of mine
- and you will tear my eyes out
- and place them instead of yours
- then I will look at you with your eyes
- and you will look at me with mine. (Moreno, 1914)

Peter Felix Kellermann in his article “Role Reversal in Psychodrama” published in the book Psychodrama since Moreno (1994) argues that this poem is actually the spiritual foundation of the role reversal technique in psychodrama, and also the philosophical foundation of Moreno’s existential view of life. Through role reversal, each person is encouraged to understand the perspective of the other, which allows them to identify empathically with the position of the other and to view oneself from the outside. When taking on someone else’s role, a person uses empathic, cognitive and behavioral skills to credibly play the role of the other (Kellermann, 1994). We argue that enabling and developing empathy through reversing roles can be a clear path to catharsis. Kellermann argues that “catharsis, insight and interpersonal relations are therapeutic factors central to psychodramatic group psychotherapy” (Kellermann, 1992:69). Catharsis, as a process of releasing pent-up emotions, can and often does occur during role reversal. For example, in our psychodrama group a female protagonist (Mia) reversed roles with the auxiliary role of her mother, who was rather distant and emotionally cold in her childhood. Mia told her mother about how she had felt rejected and unloved during her childhood. Stepping into the role of her mother, Mia became aware of how her
mother actually felt towards her, that she is full of regret and sadness she could not have been there for her the way Mia had needed. Mia was also able to see herself from her mother’s perspective. Returning to her role as daughter, Mia heard that her mother was always emotionally inhibited and could not find a way to reach out to Mia, and that she felt sorry about that. At that point, Mia felt overwhelmed by her mother’s words and she burst into tears. It was the first time that Mia had had the chance to see and feel something different in their relationship, something filled with genuine emotion, and it was a cathartic experience for her. Of course, catharsis alone is not enough, because it needs an integration, or a working through, in order for role reversal or psychodrama enactment to be seen and experienced as a therapeutic experience. As Zerka T. Moreno stated: “restraint has to come after expression” (Moreno, 1965). In this way, a psychodramatic experience of role reversal becomes whole, giving space for both emotions and cognitive insight, and consequently broadening a person's sense of self.

As elaborated in the previous section, in a similar way to Mead, Linton’s ideas on “status” and “role” are also congruent with psychodramatic role theory. In Linton’s theory, role, as a dynamic and individualized action within a status, finds its practical equivalent in role development in psychodrama. In psychodrama, role development has many stages: a) role perception, where a person sees someone playing a role and understands it as such (e.g. a teacher); b) role expectation, where a person starts to imagine him- or herself in that role; c) role taking, where a person assumes an already established role (a teacher) with no improvisation; d) role playing, where a person feels more confident in playing the role and is able to demonstrate variations of the role he / she is playing; and finally e) role creating, where a person plays a role with a high degree of spontaneity and creativity, and where a role becomes a personal expression (Moreno, 1946). For example, in our psychodrama group we had a member (Ana) who felt socially inhibited and timid, and wanted to become more open and confident in social relationships. We agreed to work with her using role training as a method to try out new roles. We created situations where she was in social situations, e.g. parties or business lunches, and she tried to act upon them. At first, she had little knowledge of how socially competent people would act in a group, and she could not relate to the role (role perception), except through imagining how her role models would act in a role (role expectation). After a while, however, she started taking on and playing the role of these role models, and imitated their acts and behavior (role taking). She started to speak a little more loudly and with a more upright posture. This was only a cognitive and behavioral change, but it gave Ana encouragement to go further (role playing). After some months, she entered the role of a socially confident person with more firmness and determination, and even came up with her own phrases, which revealed her own creativity (role creating). It is also important to note that after going through all these stages, a person may wish to go through role relief, where he / she lets go of the role, and possibly develops other, complementary roles. For example, if a person is often a giver, he / she may want to try assuming the role of a person who receives, in order to feel relief from the overdeveloped role. In our group, there was a member (Ivana) who from the first session was always someone who
wanted to do something for others, e.g. create an environment that was pleasant and interesting to others, or to be in roles that were supportive and helping. In sharing, she often assumed the role of a therapist, offering explanations that she thought would help everyone; she did not want to talk for long, fearing that she would take up too much time in the group. It was not until the final phase of her attendance in the group that she was able to give up on the role of a giver and simply be in the group, as someone who could receive something for herself. She was able to be more observant and patient in the group, immersing herself in the group process, without trying to help members of the group and us leaders. It gave her more capacity for personal growth and for an inner exploring of her hidden fears and strengths. Here we can clearly see how these stages of role development are very dynamic and individual in psychodrama practice, clearly confirming Linton’s role theory as a dynamic and individualized action.

Goffman’s dramaturgical analysis of everyday face-to-face interactions refers to the foundations of psychodrama, since psychodrama emerged from theatre. In his early years (1921-1924), Moreno worked with actors in order to stimulate spontaneous reactions in their performances. Moreno argued that there was a lack of spontaneity in the theatre of his time, and he encouraged actors to use their own emotions, memories and experiences as a basis for theatrical performance (Haworth, 2005). In Vienna, he organized “perhaps the first improvisational theatre troupe” (Blatner and Cukier, 2007:296) which he called “Theatre of spontaneity” (1922-1925). He believed that spontaneous enactment had therapeutic value, and he wanted to create a form of psychotherapy that used stage and dramaturgical action as forms of healing (Haworth, 2005). John Casson, in his book *Handbook of Psychodrama* (2005), explains the effectiveness of the dramaturgical approach in psychodrama: theatre stimulates spontaneity and creativity, which are two main postulates of psychodrama; theatre is a place where the inner world can be externalized and easier to work on, and theatre enables empathy, whereby the audience is stimulated to reflect on their own material while watching or participating in the protagonist’s work (Casson, 2005). Goffman used theatrical performance more as a metaphor for everyday life, and to explain and illustrate what happens in face-to-face interactions, rather than as a chance for personal growth or even social development. This is why we see the employment of theatrical elements in psychodrama as a contribution to Goffman’s theory. Most of all, we see Goffman’s ideas about the “back region” as an area where psychodrama directly complements and contributes to Goffman’s theory. This is especially related to Adam Blatner’s idea of the “meta-role” in psychodrama. Before explaining the connection of “back regions” and “meta-roles”, it is necessary to show how Blatner’s concept of “role dynamics” expands on Goffman’s ideas.

In his article “Role dynamics: A comprehensive theory of psychology” (1991), Blatner explains why he finds Moreno’s role theory to be a practical contribution to psychology and sociology. Since many psychodramatists agree, as stated above, that Moreno did not leave behind a coherent role theory, Blatner offered a systematization of Moreno’s role theory, naming it “role dynamics”. Role dynamics “describes psychosocial phenomena in terms of the various roles and role components being played, how they are defined,
and, most important, how they can be redefined, renegotiated, revised, and actively manipulated as a part of interpersonal interaction” (Blatner, 1991:34). He continues by arguing for the advantages of role dynamics in relation to contemporary psychology and sociology. Although many of these are listed, mentioning a few of these may be useful in explaining how we see the contribution of Moreno’s role theory to the theorists analyzed in this text and to social science in general. Blatner holds that role dynamics is comprehensive because it refers to various levels of people’s experience: psychobiological, intrapersonal, interpersonal, family relations, in small groups, in large groups, and in society and culture in general. This is why it can be used by anthropologists, sociologists, psychologists and clinical psychotherapists. Secondly, it is more understandable than other psychosocial concepts because it is familiar to people through the concept of role in everyday life (TV, theatre, children’s play). Its pluralistic model offers a dramaturgical model as a powerful metaphor comparing life to a dramatic performance where many roles can be played, rehearsed, and reflected on, and as a safe place where we can even allow ourselves to fail at playing certain roles.7

Blatner emphasized role distance as the most valuable advantage of role dynamics, since it implies that a place exists where we can distance ourselves from our roles. In this way, we can dis-identify from our role and simultaneously identify with the meta-roles of director or observer (Blatner, 1991), thereby enabling us to renegotiate the various roles we play in our lives, which enhances insight. Thus, we become playwrights, not just actors, rewriting our roles spontaneously. Blatner defines meta-roles as those “with which the director in psychodrama generates the treatment alliance, and it is this part of the mind that joins with the director and the group as a kind of inner co-director, a part that analyses and decides how the various roles should be played” (Blatner, 2007:53).

With clients, he calls this “your inner manager”, a part of the person that connects with the therapist and forms a treatment alliance between them, allowing the therapist to be a guide on the person’s path of learning how to play roles authentically. Through meta-roles, people learn how to ask questions such as: “Which role should be played here? How involved do I choose to be in this role? How am I being perceived in this role? Do I notice that there might be a conflict between two or more of the roles I’m playing? What might need to change in order that I might perform this role?” (Blatner, 2007:57). These questions are a very useful tool for people who wish to rethink the different perspectives of the place they occupy in the world. Regarding Goffman, we argue that the concept of meta-role could be a theoretical and practical extension of his term “back region”. As mentioned earlier, Goffman’s back region is a place where people prepare for a role and relax, and where there is no audience for which one needs to perform. This undoubtedly offers a certain amount of freedom and a view from the outside. Although Goffman saw individuals as being deeply interconnected with society, and thus any attempt to change their position is likely to end up as a choice of already established roles, we see things quite differently. We hold that each role a person chooses, encouraged by spontaneity and creativity, and guided by insight and emotional experience, is a role that is authentic and coherent with the needs of that person. In this
way, the role that he/she chooses is open for exploration, never fixed and always negotiable. Playing already established roles forms only a part of the first three phases of role development in psychodrama, as discussed above (role perception, role expectation, role taking), where a person starts to explore the potentials of a perceived and already established role, playing it without improvisation or personal touch. However, through role playing and especially role creating, in the later phases of role development, a person can learn how to find a role that is congruent with his or her needs. In this way, a role becomes a spontaneous and creative act, a personal expression which is authentic and which exceeds and even transcends Goffman’s idea of an individual action ultimately constrained by the given of society. This is why we see psychodrama as a bridge that connects the individual with the social, personal, collective, psychology and sociology, because it enables people to explore their roles practically and redefine them therapeutically, as a continuous and permanent process.

4. ROLE ANALYSIS IN PSYCHODRAMA: TRUSTING THE PROCESS AND UNDERSTANDING THE DYNAMICS OF OUR CLIENTS

Following the theoretical foundation and explanation of psychodrama role theory and its contribution to social sciences in the previous sections, in this section we offer a view on the meaning of role analysis in psychodrama. Since we emphasize the importance of the practical and therapeutic aspects of role theory in psychodrama, it is necessary to address role analysis as another important practical aspect of psychodrama enactment. In that way, role analysis serves as another logical and practical extension that psychodramatic role theory has made to sociology. We can see Mead’s, Linton’s and Goffman’s ideas, leaning on psychodramatic role theory presented in the previous sections, as a theoretical basis that shapes the contours of a practical employment of psychodramatic role theory through role analysis. Role analysis becomes a practical outcome of sociological and psychodramatic theory which is important for psychodramatic practice. Playing with roles, changing them, improving and reshaping their modalities is made possible precisely through the interrelation between sociological and psychodramatic theory. Blatner and Cukier define role analysis as a systematic method for examining roles and a practical extension of role theory which helps in examining role dynamics at the intrapsychic, interpersonal, group, and sociocultural levels of interaction (Blatner and Cukier, 2007). The goal of role analysis is to examine systems of roles, and on the basis of that examination to see whether these roles can be further developed and in what way. Blatner proposed certain questions when analyzing roles and their components: “Are some dimensions of the personality being suppressed? Is this causing problems? Might roles expressing one facet of the personality be overdeveloped

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7 Similarly to this, Zerka Moreno used a powerful and authentic metaphor calling psychodrama “a non-punitive laboratory for learning how to live” (Kellermann, 1992:69).
in part because others are being neglected? Are there any important dimensions of personal development that are being repressed or denied, and could other actions express efforts to compensate for or disguise these needs?” (Blatner, 2000:180). In this way, role analysis can encourage people to identify and rehearse new roles through role playing, role training and role reversal.

Argentinean psychodramatist Dalmiro Bustos further developed Moreno’s role theory, searching for an answer to his question: “Can we understand human suffering in a systematic way, without having to resort to classical formulations about psychopathology?” (Bustos, 1994:50). He found the answer in Moreno’s ideas about role clusters, which he expanded to base these more on health than on pathology. He argues that there are two bonds between roles: symmetric and asymmetric. Symmetric roles are on an equal hierarchical level or power basis; they are complementary and have equivalent responsibilities. They include the roles of siblings, lovers, companions, friends, etc. On the opposite side, there are asymmetric roles, which have different hierarchical levels and responsibilities and clear power differences between them. They involve two-person interactions, e.g. parent-child, teacher-pupil, therapist-patient and boss-employee (Bustos, 1994). It is necessary to state here that we understand the need for generalization in explaining and giving examples of symmetrical and asymmetrical roles. However, we must not neglect the fact that sometimes, if not very often, there is no clear distinction between symmetric and asymmetric roles. Very often there is a clear power difference between siblings, lovers, companions and friends; there is also sometimes, albeit not very often, an equal hierarchy between parent and child. Very often, one partner in a relationship is dominant and assumes the role of the parent, and the other is passive and assumes the role of a child. Also, in friendships, many people have experience of being bullied by a friend (especially during teenage years) where asymmetrical power relations have their most clear faces. These examples indicate the interconnection and permeability between symmetric and asymmetric roles in order to see them as more flexible and open, because very often there is no clear boundary between the roles that we take in certain relationships. Even in the therapist-patient dyad, patients with a certain diagnosis can be very manipulative, where their feelings towards their therapist often shift from admiration or love to anger or dislike, positioning themselves as being superior or submissive in relation to the therapist. It is our opinion that in such relationships therapists themselves may often experience the feeling of losing control over the process, not being able to maintain relationship boundaries.

Besides noting the bonds between roles, Bustos explains that there are three role clusters: 1) **Cluster one**: these are the roles a child assumes at an early age when dependent and passive. This is related to the *mothering functions* (feeding, nurturing, holding, softness) and their dynamic is passive-dependent-incorporative. These include the roles of son, daughter, pupil, patient, etc. and are asymmetric roles (Bustos, 1994:51). 2) **Cluster two**: as the child becomes more independent, he / she connects to the outside world and becomes more active and powerful. This is related to *fathering functions* (working, self-confidence, the capacity to achieve, the exercise of power) and their dynamic is acti-
ve, independent and achieving. These are also asymmetric roles; 3) Cluster three: roles in this cluster relate to the dynamics of the sibling function: competitiveness, cooperation, rivalry, sharing, mutuality, playfulness, etc. Through these roles, a person learns to set limits, be assertive, be able to defend himself / herself, and generally to look after himself / herself more actively and fully. The bond here is symmetrical, and we can find it in the relationships between brothers, sisters, friends, companions, colleagues where no one is dominant or passive, and where people have to learn how to look after themselves. We argue that relating clusters to mothering and fathering functions in the way presented in the text is a very sensitive matter. Here we can see how a passive-dependent-incorporative dynamic is related to a mother, and an active, independent and achieving dynamic is related to a father. Of course, it is clear again that there is a need to generalize concepts in order to create a theory, but at the same time we must be careful not to fall into stereotypes. Although Bustos indicated a cultural rather than a natural determination of the fact “that the child has the experience of the mother as the first holding figure” (Bustos, 1994:52), we argue that it also has to be stated more clearly that a father is not the only figure that is active, independent, self-confident and has the capacity to achieve. Particularly in modern society, where separated gender roles are being questioned and women are more included in the world of work, achievement, career, power struggles, etc. In view of the fact that our article deals with psychodrama, we also have to indicate that achieving independence, self-confidence and personal power is an equal need both for women and men. We see this in our psychodrama group, especially since we predominantly have female clients, since women often experience power, independence and self-confidence as their own inner qualities. The female clients in our group had a quite clear view of themselves as already being active and independent, and we continued to work with them on taking more proactive steps in order to achieve more power at work and in relationships. Of course, the fact that all of them were highly educated and had stable jobs could be an important factor for questioning gender roles, and that should not be neglected, but could also be further explored in some future research.

Bustos saw maturity as an “unstable equilibrium” and a place where all of these role clusters are adequately represented and accessed (Bustos, 1994:52). However, since we can all agree that life always gives us an opportunity to make a path to maturity seem more or less like a “winding road”, the usefulness of these clusters can help us understand the dynamics of our clients and within ourselves. The analysis of role clusters can help us (as therapists) to learn where the conflicts between roles are, which roles are inadequately developed, which are overdeveloped, and which roles need repairing and training. In this way, the practical implication of role clusters can help both therapists and clients in revealing the dynamics of the relationship between the therapist and the client, and between clients and their significant others.

8 For example, patients with borderline personality disorder.
For example, as Bustos pointed out (1994), in a therapist-client relationship we always shift from one role cluster to another. At the beginning of therapy, we might have to be in Cluster One, taking on the “mother” function, if a client needs us to be more nurturing and to hold and contain them more empathetically. After a while, when a client learns how to contain himself / herself better, we may move to Cluster Two, into the “father” function, encouraging the client to be more independent and self-confident. When ending therapy, we may have to be in Cluster Three, in the “sibling” function, providing a feeling of a symmetrical power relationship between us and the client, where we can be seen more as “fellow travellers” (Yalom, 2002:6) than at the beginning. For example, a client in our group (Nina) never wanted us to approach her from Cluster One, the “mother” function. Even at the beginning, she was always protective and defensive whenever we showed empathy or understanding for her needs. It was only when we were in the “father” or “sibling” functions that we could relate to her and that she allowed us to come closer to her. It soon became evident that she had had a distant and cold mother, who rarely attended to her needs and often disappointed her during her childhood. It was obvious that Cluster One was where the conflict was, and we therefore had to work on repairing the “mother” function in order for Nina to become capable of receiving care and nurturing. This was crucial for her, since she was not able to establish intimate relationships. During her time in the group we worked together on her softness, vulnerability and on connecting with others emotionally, but there was not much progress. She did not stay long in the group; however, her final protagonist work brought her closer to realizing the emotional wounds from her relationship with her mother. She was more able to acknowledge it emotionally. We had to approach her from Clusters Two and Three, shifting between the “father” and “sibling” functions, since this was the only way she could relate to us. Unfortunately, her work had just begun, and if she had stayed longer, we could have worked further on exploring and repairing the role of Cluster One.

In training groups, these role cluster dynamics can also be found and made use of in an educational way. At the beginning of our training it was obvious that asymmetric role bonds were inherent between us, as trainees, and the trainer. We were more in the role of protagonists, while he was in the role of director (director / protagonist asymmetric bond), in the Cluster One “mother” function. As the traineeship was coming to an end, the dynamics changed, becoming closer to the symmetrical relationship of director / director and moving from dependence to autonomy. This was a very useful experience, enabling us to use it in our own groups in order to show our clients how to trust and be dependent, and also how to move towards autonomy. This seems to be most evident in the way that our clients leave the group. The maturity of recognizing the appropriate time to leave, and to use the remaining time in order to close down the process adequately, feeling the self-confidence, power and knowledge acquired in the group – we see this as a proper way to end therapy.
5. CONCLUSION: HOW CAN PSYCHODRAMA ENABLE AUTHENTIC LIVING AND BE SOCIETY’S “DEVIL’S ADVOCATE”?

In this paper, we aimed to show the ways in which Moreno’s role theory is more inclusive than the sociological one, particularly since the sociological contribution to role theory is widely known and recognized (Mead, Goffman, Linton, Cottrell). Psychodrama role theory on the other hand is important and acknowledged mainly within psychodrama, and to a very small extent in other humanities or social sciences. We wanted to see what happens when sociology meets psychodrama and how we can employ such a potent blend. Mead’s view of the self as an essentially social structure, and his theory of the “I”, “me”, and “generalized other”, indicate the importance of role reversal and meta-role even though he did not use these exact terms. Psychodrama is viewed here as a practical implication of these terms, and shows what happens when a person in a psychodrama, or in life, changes his / her position with the other. Moreno saw psychodramatic role theory as more inclusive and as a bridge between sociology and psychology, since it is based in drama and operates with a psychiatric orientation. The therapeutic aspect is very important, and we have shown how this enables mental growth and personal well-being. Linton’s definitions of “status” and “role” are very similar to role development in psychodrama, which is also a practical contribution of psychodrama. Finally, Goffman is a theorist who is perhaps the most congruent with psychodrama foundations, specifically regarding his dramaturgical analysis of face-to-face interactions. However, since Goffman believed that individuals are very much defined by sociological context, we have shown how psychodrama employs spontaneity, creativity, emotional and practical experience, creating a role that is authentic and never fixed. This enables people to question their roles and their view of society. This can simultaneously be a point of concurrence or resistance to society. Thus, psychodrama can never only be a method for normalizing and adjusting individuals to the needs (norms) of society; it can even be a method for questioning societal postulates. It is our assumption that a person who questions, redefines and continuously explores himself / herself can never be solely a product of society, but can even be its most persistent critic or “devil’s advocate”. Ultimately, role analysis, as another important practical aspect of psychodrama enactment, shows how we as therapists can employ useful diagnostic and therapeutic instruments for learning which role cluster is underdeveloped or even overdeveloped. This can shape the whole therapeutic journey and show its most useful outcomes.

We deliberately concentrated only on classic sociological texts concerning role theory and not on recent ones in order to show the differences between the formation of soci-

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9 Of course, this does not mean that shifting between clusters takes place in a linear way, because we often find ourselves in a situation of moving from the “father” back to the “mother” function, especially if there is a crisis in the client’s life, as well as moving back and forth from the “father” to the “sibling” function in the later phase of the therapy process.
ological and psychodramatic role theory in the first part of the 20th century. Of course, such an analysis including recent texts in sociological role theory could be an important step in some future research. Moreover, examples used from our psychodrama group are employed only in a descriptive manner in order to illustrate select theoretical points concerning psychodrama role theory, and our aim was not to present any kind of empirical or qualitative data. We believe that such comparison between psychodrama and sociology has been insufficiently explored, and we hope that this endeavor can bring a valuable contribution to psychodrama and sociology, and to social science in general.

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Sažetak
U ovom se radu analizira doprinos psihodrame teoriji uloga u sociologiji. Teorija uloga nastala je i razvila se u sklopu sociologije, odnosno socijalne psihologije. Naš cilj ukazati na načine na koje psihodrama može poslužiti kao most između sociologije i psihologije. Utemeljitelj psihodrame, J. L. Moreno, tvrdio je da je psihodrama inkluzivnija od sociologije, s obzirom da ima praktične i terapeutске aspekte igranja, a posebice zamjene, uloga. Želimo pokazati kako zamjena uloga, razvoj uloga, analiza uloga i teatrička pozadina psihodrame predstavljaju praktične elemente koji mogu imati terapeutске učinke. Zajedno s teorijskim razradama navedenih aspekata te različitih doprinosa, koristimo i primjere iz grupa psihodrame koje se održavaju tjedno a koje vodimo kao koterapeuti od 2014. godine.

Ključne riječi: psihodrama, teorija uloga, Moreno, sociologija (Mead, Linton, Goffman), zamjena uloga, analiza uloga

ROLLENTHEORIE UND ROLLENAANALYSE IM PSYCHODRAMA:
EIN BEITRAG ZUR SOZIOLOGIE
Iva Žurić Jakovina und Trpimir Jakovina

Zusammenfassung
In dieser Arbeit wird der Beitrag des Psychodramas zur Rollentheorie in der Soziologie analysiert. Die Rollentheorie entstand und entwickelte sich im Rahmen der Soziologie, bzw. der sozialen Psychologie. Unser Ziel ist es auf die Art und Weise hinzuweisen, wie das Psychodrama als eine Brücke zwischen Soziologie und Psychologie dienen kann. Der Gründer des Psychodramas J. L. Moreno behauptete, dass das Psychodrama inklusiver als Soziologie ist, weil sie praktische und therapeutische Aspekte des Spielens hat, insbesondere der Rollenaustausch. Wir wollen zeigen, wie der Rollenaustausch, die Rollenentwicklung, die Rollenaanalyse und der Theaterhintergrund des Psychodramas praktische Elemente darstellen, die eine therapeutische Wirkung haben können. Zusammen mit theoretischen Erörterungen der angeführten Aspekte sowie mit verschiedenen Beiträgen, verwenden wir auch Beispiele aus Psychodramagruppen, die wöchentlich stattfinden und die wir als Kotherapeuten seit 2014 leiten.

Schlüsselwörter: Psychodrama, Rollentheorie, Moreno, Soziologie (Mead, Linton, Goffman), Rollenaustausch, Rollenaanalyse