THE PSYCHODRAMATIC PHENOMENON OF "ILLUMINATION"

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The psychodrama originated in the theatre. It uses modified theatrical techniques. It is spontaneous theatre, acted by patients and therapeutic personnel; its goal is therapeusis.

The patient improvises. He acts without a written text. Unlike in the theatre where the actor is subservient to the director, in the psychodrama the patient guides the director. Thus, the relationship between action, events and emotional involvement is far more immediate for the patient than for the actor in the theatre. In the psychodrama the patient is the creator, the actor and the producer of the material.

"Creative spontaneity is a principle evoking catharsis which is realized in the flow of action," according to Moreno.

In psychodrama the creative spontaneity of the patient is evoked. In addition, the presence of a group further stimulates the patient-actors. All of them are encouraged and challenged. They take their own world into the drama, relive past events or realize fantasies not yet experienced. In the contents and modulation of language, completed by mimicry and action of the body, in complex, completed action, they meet themselves.

Motoric action previously suppressed by fear and conflicting emotions, is encouraged and further developed in psychodrama; a personal movement or a particular movement of the partner often releases the related emotion. Because the emotionally charged experience is somewhat altered in the psychodrama it is more easily tolerated by the protagonist.

Thus, action often reduces emotional tension. The tragedy lived out on the stage merely remains stage-tragedy. This facilitates or actually makes feasible the psychodramatic encounter. The classic example is the application of Moreno's first therapeutic psychodramatic intervention in the case of the actress Barbara and her poet George, in the Stegreiftheater in Vienna.

Sometimes, probably as a consequence of the release of spontaneity, an increase of emotion results in the psychodramatic encounter. Deeply charged emotional reactions may occur; these are welcomed by the psychodramatist for their therapeutic effectiveness. "Acting out" and "psychodramatic shock" have their proper place here.

Many a psychodramatist knows of such reactions from his own experience,

but according to our knowledge, have never been described in the literature. Herewith follow a few examples:

A neurotic male patient plays a scene in which he speaks with his "father" about his professional interests. Suddenly he starts to stroke his body with his hands. He interrupts the dialogue, slides onto the floor and starts to speak in a very different voice, producing a childish lisp. In the ensuing explanation he recalls that as a child, one time, after defecating, he besmeared his entire body with faeces. He thoroughly enjoyed doing this but his father took him to task and punished him for it.

A schizophrenic male patient abruptly gets up and moves away from the group, begins to act out a pantomime. He describes coloured clouds which he is seeing in a dream and which depress him very much. At the end of the pantomime he bursts into laughter. Afterwards he recalls that this is a repetition of an actual childhood dream.

A female patient enacts one of her recent dreams. In it, a man speaks to her, summoning her to come close to him. All of a sudden she changes the intonation of her voice, speaks gruffly and makes clearly masculine movements. In tears she tells us that her uncle who played with her in her childhood spoke and acted with her in this same manner.

By such specific happenings, the patient is thrown into an entirely unexpected situation and is carried by the warm-up to continue and complete this action although it appears quite new to him. These psychodramatic phenomena are like an illumination. It is as if suddenly a spotlight is switched on; psychic contents of the patient, thus far hidden in the dark, appear in the limelight of his consciousness. They push to the surface, impress themselves upon the patient as somehow being important and are then completed by the patient in action, although they are often quite unaware of what is happening to them. They lend themselves easily to further exploration for therapeutic possibilities.

The wholesome effect of such emotional recollection is well known and is part of the experience of all psychotherapists. In the cases described above, however, the motoric aspect plays an important role because it releases this recollection in toto and itself forms an essential part.

Referring to the German word "Erleuchtung" and the idiomatic expression "it began to dawn on me", we like to call this phenomenon "Beleuchtung" (Engl. illumination). We made the following observations in reference to this illumination:

1. The illumination phenomenon appears suddenly, without warning.
2. It reveals to the patient and the therapist previously unremembered facts.
3. It starts with some motoric action and tends to lead to further dramatic development.
4. For the patient it is connected with a very deep emotional storm.
5. A repressed event of early childhood is usually uncovered.
6. It can occur with all types of personalities.

7. It may be found in every patient of the psychodrama group.
8. It leads to clear therapeutic progress.

As an antishock to the emotional outburst, the repetition of the scene with the support of a double proved quite successful. At the end of the session we produced a closure scene which has no connection with the illumination.

The psychodramatist should not lose sight of the illumination. It originates from the spontaneity of the patient and should be ranked with other, already known psychodramatic phenomena. It adds new dimensions on the rich possibilities of psychodrama. However, it also points to the need for thorough psychodramatic training on the part of the therapist-director.